

PARAPROFESSIONAL REQUEST FORM

1. Nature of Request: (Check One)
New Para Position: _____ Extended Time on Existing Position: _____
2. Reason for Request: _____

3. Name of Para (If applicable): _____
4. Teacher Assignment: _____
5. Bldg. Assignment: _____
6. No. of Hours Request: _____
(Standard Para Contract = 6 ½ hrs.)
7. Requested by: _____

To be completed by bldg. principal or USD central office:

Approved by: _____ Not Approved: _____
By: _____ Title: _____
Date: _____

To be completed by Tri-County Administration:

Approved by: _____ Not Approved: _____
By: _____ Title: _____
Date: _____ Hourly Rate: _____