



Board Resolution Transfer Form

INSTRUCTIONS

Please complete this form to indicate a replacement for the employee(s) originally listed on the Board Authorization of Additional Pay. One form is required for each Resolution Code / Code Number. When sending the form to Payroll for processing, please be mindful of the current payroll schedule to ensure the employee has sufficient time to enter their hours worked online in PeopleSoft after allowing up to (2) business days for Payroll to update the record(s).

If all replacement employees are Per Diem Substitutes, Chief Signature is not required.

Submission Date: _____ Prepared by: _____ Contact #: _____
 (PRINT NAME so it is legible)

Board Meeting Date: _____ Board Meeting Page #: _____ Resolution Code: _____
 (Format example: 2017-18: 124)

Resolution Code Number: _____
 (Look up in PeopleSoft. Navigation: Manager Self Service / Time Management / View Time / Board Authorized Reported Time)

	Print Name (First/Last) and Employee ID of Teacher listed on the Resolution	Print Name (First/Last) and Employee ID of Teacher Replacement	Is the Replacement Employee a Per Diem Substitute? Y / N	Number of Hours to Transfer	List Date(s) Worked
1					
2					
3					
4					

Reviewed by: Principal Name _____ **Principal Signature** _____
 (PRINT NAME so it is legible) (Original signature required; stamp signature cannot be accepted)

Authorized by: Chief Name _____ **Chief Signature:** _____
 (PRINT NAME so it is legible) (Original signature required; stamp signature cannot be accepted)

Payroll Department • 131 West Broad Street • Rochester, New York 14614 • General Line (585) 262-8265 • **Scan/Email form to Payroll@rcsdk12.org**