



**Los Alamos Public Schools**  
 "We prepare confident, life-long learners."

## STIPEND REQUEST FORM

**School/ Department** (check one):  Aspen ES     Barranca ES     Chamisa ES     Mountain ES     Pinon ES

Los Alamos MS     Los Alamos HS     Athletic Department     Business Services     Custodial

Student Services     Transportation     Facilities     Freshman Topper Academy

\_\_\_\_\_ (other, please describe)

Employee Name: \_\_\_\_\_ Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Stipend Title** \_\_\_\_\_

District Stipend     Site Budget Stipend     Paid for from Other Funds

School Year: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_  
*Please use the actual End Date, not just end of year*

**Stipend Requestor** (administrator): \_\_\_\_\_

**Criteria** (check all that apply):

- Meets Board Policy, State Statute, and/or Federal requirements (describe below)
  
- Is aligned to district/school/site strategic plans and instructional goals (describe below)
  
- Is directly related to district approved academic or athletic interscholastic activities (describe below)

**Description of the added work and responsibilities to be completed:**

**DESCRIPTION OF PAY OUT WILL BE PLACED HERE.**

### For Administrative Use Only

① Site approval:  Approved     Denied

Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

② Account Code: \_\_\_\_\_

CFO: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: