

Los Angeles Unified School District  
Human Resources Division  
Certificated Administrative Assignments

REQUEST FOR EXTRA DUTY PAY FOR ADMINISTRATORS

To: Local District Superintendent/Division Head Date: \_\_\_\_\_

From: \_\_\_\_\_  
Title \_\_\_\_\_ Org Unit/Loc \_\_\_\_\_

Employee Information:

Name of Administrator: \_\_\_\_\_ Emp No \_\_\_\_\_

Current Position: \_\_\_\_\_ Basis: \_\_\_\_\_ Location: \_\_\_\_\_

Proposed Classification:

Professional Expert  X/Z Basis  Other

Provide description of services and rationale:

Date of Services: To \_\_\_\_\_ From \_\_\_\_\_ Days/Time of services: \_\_\_\_\_

Proposed Hourly Rate: \_\_\_\_\_ Total Hours: \_\_\_\_\_ Total Compensation: \_\_\_\_\_

Are non-administrative employees being compensated for similar services? Yes  No

Classification: \_\_\_\_\_ Hourly Rate of Pay: \_\_\_\_\_

Program name to be charged: \_\_\_\_\_ Program Code: \_\_\_\_\_

For important information regarding criteria and guidelines for qualifying for professional expert and X/Z basis pay, please refer to Personnel Policy E12, Employment of Professional Experts.

This form must be submitted with a Request for Personnel Action "RPA" and a Professional Expert Application form if applicable.

Approved

Not Approved

\_\_\_\_\_  
Local District Superintendent/Division Head

\_\_\_\_\_  
District

\_\_\_\_\_  
Date

