

Beresford School District
Customizing Instruction (CI) Project/Plan

Verification of Hours

Teacher's Name: _____

CI Project/Plan Name: _____

Hours Approved by the CI/TIL Committee: _____

Hourly Rate Approved by the CI/TIL Committee: \$25.00

The following "Artifacts" were submitted to the Principal for review:

Signature of Teacher

Date

Upon completion of the project/plan, the teacher will present their artifacts to the principal and the principal will evaluate the project/plan and determine if it met the intended expectations. If the project/plan met the intended expectations, the principal will submit the request for board approval at the next regularly scheduled board meeting. Payment will then be processed during the next available payroll period.

Artifacts Reviewed by Principal (initial): _____

Hours Approved and Verified by Principal: _____ x \$25.00 = \$_____

Signature of Principal

Date