

**Employee and Retiree Service Center
MONTGOMERY COUNTY PUBLIC SCHOOLS
7361 Calhoun Pl., Ste. 190, Rockville, Maryland 20855**

**HIGH SCHOOLS EXTRACURRICULAR ACTIVITIES
SUMMER ATHLETIC PRACTICE**

INSTRUCTIONS: This form is used to pay athletic coaches/sponsors for additional (2nd) practice sessions held before the first reporting day for teachers.

- Each coach/sponsor may be compensated for a maximum of 4 hours per day for additional (2nd) practice sessions, not to exceed a total of 32 hours per person.
- Athletic directors complete the form indicating the number of hours for additional (2nd) practice sessions worked each day by the coach or sponsor.
- Completed forms must be signed by the appropriate coach/sponsor and verified by the athletic director and principal. (Due date: September 1)

| Fall Activity No. of Coaches | Payroll Name Coach/Sponsor | Employee I.D. Number | Position Class | Number of Hours Worked Each Day (Max. 4 Hrs./Day) | | | | | | | | | | | | Total Hours | Signature, Coach/Sponsor |
|---------------------------------|-------------------------------|-------------------------|-------------------|------------------------------------------------------|--|--|--|--|--|--|--|--|--|--|--|----------------|-----------------------------|
| | | | | | | | | | | | | | | | | | |
| Football 1 | | | | | | | | | | | | | | | | | |
| Football 2 | | | | | | | | | | | | | | | | | |
| Football 3 | | | | | | | | | | | | | | | | | |
| Football 4 | | | | | | | | | | | | | | | | | |
| Football 5 | | | | | | | | | | | | | | | | | |
| Field Hockey 1 | | | | | | | | | | | | | | | | | |
| Field Hockey 2 | | | | | | | | | | | | | | | | | |
| Volleyball 1 | | | | | | | | | | | | | | | | | |
| Volleyball 2 | | | | | | | | | | | | | | | | | |
| Girls Tennis | | | | | | | | | | | | | | | | | |
| Golf | | | | | | | | | | | | | | | | | |
| Cross Country 1 | | | | | | | | | | | | | | | | | |
| Cross Country 2 | | | | | | | | | | | | | | | | | |
| Boys Soccer 1 | | | | | | | | | | | | | | | | | |
| Boys Soccer 2 | | | | | | | | | | | | | | | | | |
| Girls Soccer 1 | | | | | | | | | | | | | | | | | |
| Girls Soccer 2 | | | | | | | | | | | | | | | | | |
| Cheerleader 1 | | | | | | | | | | | | | | | | | |
| Cheerleader 2 | | | | | | | | | | | | | | | | | |
| Pompon | | | | | | | | | | | | | | | | | |
| Asst. Athletic Dir. | | | | | | | | | | | | | | | | | |
| First Aid Asst. | | | | | | | | | | | | | | | | | |

School Name _____

School Number _____

_____/_____/_____
Signature, Athletic Director *Date*

_____/_____/_____
Signature, Principal *Date*