



Plant some seeds.

**Kenmore Staff Development Center
155 Delaware Road
Kenmore, New York 14217
(716) 874 8403, ext. 32600**

Elaine Ablove, Director

2018-2019 SCHOOL YEAR

PERMISSION TO WITHHOLD MONEY FROM THE CAREER CREDIT STIPEND or PAYROLL CHECK

Complete and send this form to the Staff Development Center. We must have an original signature, therefore, no copies will be accepted.

I, _____, agree to have the Kenmore-Tonawanda UFSD withhold the amount of money necessary to pay for workshops, outstanding fees, and additional hours I will take through the Kenmore Staff Development Center or other agencies (ie. Approved Offsite workshops). This money will be withdrawn from my Career Credit stipend.

If I do not complete the correct number of hours to earn a stipend, as agreed to by my bargaining unit, then I will be responsible for paying for the workshops I enrolled in through my payroll check.

I understand that some workshops may require an additional fee for supplies and/or materials. This fee will be due prior to the start of the workshop.

ALL EMPLOYEES WHO ARE ELIGIBLE TO RECEIVE A STIPEND MUST COMPLETE THIS FORM.

Signature

Date

Employee Number

Building

Check One:

- KAA KTA – FULL TIME KTA – PART TIME (____ tenths)
- KTA SUBSTITUTE TEACHER KTA TEACHER ASSISTANT
- KTSEA – FULL TIME KTSEA – PART TIME