Spokane Public Schools
excellence for everyone

PERT Exception Hours Claim Form

Employee Name:	Supervisor/Administrator:	School Year: 2018-19
Employee ID #:	School/Department Name:	Location #:

Date of Activity	Description of Activity	Location Activity Occurred	Presenter/Trainer/Activity Facilitator	Did you register for Activity via Performance Matters?	PERT Hours being claimed	Account # (for HR use only)
(Date or Date Range if applicable)	(Activity title and brief description)	(Where was the activity/training located?)	(Who facilitated or led the activity?)	("Yes" if you registered in Performance Matters. "No" if not)	(# hours you are claiming from your PERT time balance)	
Total Hours:						

Employee Signature:	Date:	Supervisor/Administrator Approval Signature:	Date:

Directions / Routing:

A) Certificated Employee enters all information above to claim PERT hours. Hours are paid up to the available balance.
B) Certfiicated Employee submits their form to their Supervisor/Administrator for sign off.
C) After sign off, Supervisor/Administrator submits signed form to Human Resources for processing **(Deadline - 10th of the month).**

NOTE: Any forms received after the 10th of the month will be processed in the next payroll cycle.

Retention: Current + 3 years

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