

Application for Incremental Medical-Dental Benefits 2017 – 2018

Pursuant to Article 14, Section 15 of the BFT-BUSD Collective Bargaining Agreement, substitute teachers who have worked at least 80 jobs may apply for Incremental Medical-Dental Benefits. To be eligible, all K-12 jobs must be listed in the substitute management system. A job is either a full day or half day with a different confirmation number. **Payroll records will no longer be used to verify jobs.** This stipend is payment toward medical/dental benefits. Requests must be submitted no later than June 30th to receive payment by July 31st.

- Worked **80 jobs – stipend \$ 976**
- Worked **95 jobs – stipend \$1,116**
- Worked **110 jobs – stipend \$1,256**
- Worked **125 jobs – stipend \$1,396**

Print Name: _____
 First Name Last Name Employee ID #

By signing this, I certify that the **attached** substitute management system job report is an accurate record of the jobs I have worked.

Signature: _____ Date: _____

The Payroll Department is authorized to pay one stipend payment by July 31st in the amount of \$ _____

I certify that the total units and stipend are correct.

Verified by Human Resources Staff Member:

Signature: _____ Date: _____

Approved by Human Resources Administrator:

Signature: _____ Date: _____

Application submitted to the Payroll Department on _____ by _____.

Budget Code: 01-0000-901-0-00-1151-1110-1003-000