

**Lincoln County School District  
Stipend Agreement For Extra-Curricular Assignments**

Name: \_\_\_\_\_, Coach/Advisor

Recommended by: \_\_\_\_\_, Principal

Approved by: \_\_\_\_\_, Superintendent

Checked by Finance	Assignment(s)	Step	Lane	\$ Amount
				\$
				\$
				\$
				\$
				\$

I agree that as a volunteer:

1. I will perform this service for the District for charitable reasons, without promise, expectation or receipt of compensation for serviced rendered, although I can be paid expenses and a stipend for such as listed above.
2. I will offer my services freely and without pressure or coercion, direct or implied, from the District; and
3. I am not employed by the District to perform the same type of services as those for which I am agreeing to volunteer.
4. I realize the District is depending on my services. If for a serious reason, I cannot keep my commitment, I will notify my supervisor in advance.

Method of payment requested:     1. Stipend at end of assignment  
    2. Stipend paid over 12 installments

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Principal

\_\_\_\_\_  
Date