

**Richland Parish Schools**  
**Performance Demand-Based Compensation (PDBC) Option 2**  
**2019-2020**  
**T.I.F.**

**Instructions:** Fill out one *PDBC Option 2* if you are a 2019-2020 resident teacher who has been hired for the 2020-2021 school year. You will be eligible to be included in the sign-on bonus payout pool only when the form is completed and submitted with all required documentation.

PDBC Option 2 will be processed when the following criteria is met:

- completed residency in Richland Parish in the 2019-2020 school year
- complete district interview process and receive superintendent approval of hire
- certified teacher of record hire for the 2020-2021 school year (i.e., Level 1)
- serve as teacher of record for the majority of the school day (i.e., 51% of the school day)

PDBC Option 2 compensation eligibility

- resident sign-on bonus payout pool will be disbursed equally between all who qualify

It is the responsibility of the individual requesting compensation to complete a request and include all supporting documentation each year:

- Resident sign-on compensation request must be submitted by **August 10**

*The target area for sign-on bonuses is determined yearly via district committee and the pay-out pool amount will be determined yearly pending budget availability.*

**1. Employee Information**

Name: \_\_\_\_\_

SS# : \_\_\_\_\_ Phone # \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

School: \_\_\_\_\_ Grade/Subject \_\_\_\_\_

**FOR EACH REQUEST YOU MUST ATTACH:**

- 1. COPY OF YOUR RESIDENT CERTIFICATE**  
(For high needs certification stipends you must hold valid up-to-date certification in the area identified as a critical shortage via current workforce data)
- 2. COPY OF YOUR HIRE LETTER FROM THE SUPERINTENDENT**
- 3. COPY OF YOUR GRADUATION LETTER OR LEVEL 1 TEACHING LICENCE**
- 4. COPY OF YOUR DAILY TEACHING SCHEDULE FROM JPAMS FOR THE 2020-2021**

*Certification of Payee*

I certify that this stipend request is just and true in all respects. I will repay the district 100 percent of all stipends disbursed if I voluntarily resign prior to the start or during the 2020-2021 school year. I hereby agree to pay any and all balances due at that time to District in full upon demand. In the event I do not make such payment in full upon demand, I knowingly and voluntarily authorize District to deduct from my wages any amount owed by me to District under this agreement. Upon referral of this debt by District to an attorney, I further agree to pay attorney's fees in addition to the balance I owe.

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|--|
| For office use only:<br>Date: _____<br>Amt. _____<br>Code: _____ |
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\_\_\_\_\_

\_\_\_\_\_

Payee Signature

LEA Authority