



**Receipt Acknowledgement for Athletic Extra Duty and
Non-WTU Stipend Pay Procedures**

By signing below, I acknowledge that I have received a copy of the Athletic Extra Duty Pay and Non-WTU Stipend Pay Procedures guide for the **2018-19 school year**. I further acknowledge that I have been informed, I have read and that I understand the policy guidelines described in the Athletic Extra Duty Pay and Non-WTU Stipend Pay Procedures guide.

Date Received: _____

Name of School: _____

Coach/Worker's Name: _____
(Print)

Signature: _____

DCIAA Athletics Departments Copy

*Coaches – give this copy to your school-based Athletic Director
DCIAA Workers – give this copy to the DCIAA sports coordinator*