## **SALARY ELECTION FORM**

This is to notify the	that I have elected – beginning with the 2022-2023 school
(School Department)	
	during which I actually perform services to be paid over
either a 10-month or a 12-month period.	
The payments should be made in [choose one	]:
equal biweekly payments (every two	weeks) over a period of 10 months
equal biweekly payments (every two	weeks) over a period of 12 months
entitled to an additional payment for the amou	before the end of the 12-month payment period, I will be unt I have actually earned from the beginning of the aration from service, but which has not yet been paid. This al paycheck.
This notice is irrevocable for any particular contract year once that year begins, and may not be changed or withdrawn after the beginning of the contract year in which I am working. This notice will be effective for the 2022-2023 contract year and all following school years, unless I choose to change my election. I understand that if I want to elect differently in the future, I will need to submit a new form prior to the start of that contract year.	
Signature:  Print Name:	Date:
1 mit rame.	<del></del>

THIS FORM MUST BE COMPLETED BEFORE YOUR FIRST 2022 – 2023 PAY CAN BE PROCESSED; THEREFORE, PLEASE RETURN THIS FORM TO THE SUPERINTENDENT'S OFFICE AS SOON AS POSSIBLE.