

LINCOLN COUNTY SCHOOLS
Grades 1-6 PER SESSSION
TEACHER-PUPIL RATIO

Teacher's Name

School Location

Employee ID

Payroll Period

Number of Students in Excess of 25

Date **1st** **2nd** **3rd** **4th** **5th** **6th** **7th** **8th**

Finance Office Use Only	
Total # of Students	
Teachers Daily Rate	
1/25 th	_____
1/7 th	_____
Amount Due	

 Employee Signature

 Principal Signature

Account # 11..11111.114._____
 Location #

COPY IN GREEN ONLY