

**LINCOLN COUNTY SCHOOLS
KINDERGARTEN
 TEACHER-PUPIL RATIO**

Teacher's Name

Name of School

Employee ID

Payroll Period

Date	Number of Students Enrolled in Excess of 20

Finance Office Use Only	
Total # of Students	
Tch's Daily X 1/20 th	
Amount Due	

 Employee Signature

 Principal Signature

Account # 11..11111.114._____
 Location #

COPY IN GREEN ONLY