

# Stipend Agreement

Revised: 4/19/10

## Haywood County Schools Coaching Stipend Agreement

I, \_\_\_\_\_, of my own free will, volunteer my time and service to participate as an athletic coach at \_\_\_\_\_ **School**. My time and service in this volunteer capacity are given without promise, expectation or receipt of any form of compensation or other remuneration for this service. I will receive a **nominal stipend** in the amount listed below to offset my actual expenses relating to this volunteer activity.

I understand and agree that my volunteer participation is not being performed in the course and scope of my regular employment with **Haywood County Schools** and that my participation in this activity is not in any way required by the **Haywood County Board of Education**. I acknowledge and agree that my volunteer services do not involve the same or similar type of services I perform as an employee at **Haywood County Schools**.

I further acknowledge and agree that my volunteer services are not closely related to my duties and responsibilities as an employee and that my volunteer services in no way effect my employment with the **Haywood County Schools**.

I understand that my participation as a volunteer may be terminated at any time, without cause, and that I may withdraw from participation at anytime for any reason and that my withdrawal will not effect my continued employment with the **Haywood County Board of Education**. I further understand that a criminal background check is required.

**This agreement will continue in force until terminated.**

**School:** \_\_\_\_\_

**School Year:** \_\_\_\_\_

<b>Assignment(s):</b>	<b>Years Coaching</b>	<b>Stipend Amount</b>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
<b>TOTALS</b>		<b>\$ _____</b>

**STIPEND OPTIONS:**

Stipend may not begin before activity begins

1. **Full Stipend in November**
2. **Full Stipend in February**
3. **Full Stipend in March**
4. **Full Stipend in May**
5. **One-Half Stipend in November and Balance in March**
6. **Monthly Stipend to begin \_\_\_\_\_ and continue up to and including May**
7. **One-Half Stipend in November and Balance in February**

\_\_\_\_\_  
**Superintendent (Designee)**

\_\_\_\_\_  
**Stipend Coach**

\_\_\_\_\_  
**Principal**

\_\_\_\_\_  
**SSN/EIN of Stipend Coach**