Overage Reporting Form: 6-12
In Compliance with SVUSD/VMTA Contract – Article 11

School_____   Teacher's Legal Name_____   Grade/Subject_____

****A VERIFIED CLASS ROSTER MUST BE ATTACHED PER THE CONTRACT****

*Did an excess enrollment continue beyond the ten day (15 days for HS) grace period? **Y**es ___ **No** ___ **Beginning Date of Excess**_____

Reporting Period-Sudent Attendance Days

☐ AUGUST		☐ JANUARY
☐ SEPTEMBER		☐ FEBRUARY
☐ OCTOBER		☐ MARCH
☐ NOVEMBER		☐ APRIL
☐ DECEMBER		☐ MAY
		☐ JUNE

Secondary Class Size Limits

English	28	Electives	30
Math	30	English-ELD	20
Social Studies	30	Itervention	23
Science	30	Music	40
Living Skills	30	P.E.	40
Electives (workstations)	27	Creekside HS	20

Date Range of Overage (A)	Class Size Limit (B)	# of Extra Students (C)	Student # Exceeds 3 Limit (D)	Days of Instruction (E)	Extra # Student Rate/Day $1 (F)	TOTAL (D x E x F)
Example: 8/15-19	28	4	1	5	$1	$5
						TOTAL:	

SECONDARY CONTRACT LIMIT

To be completed by School	No. of Students	Times	# of Days	Times $	Total Amount
6-12: Amount over student contract limit		X		x $1.00	= $

SPECIAL EDUCATION CASE LOAD & CLASS SIZE

To be completed by School	No. of Students	Times	# of Days	Times $	Total Amount
6-12: Amount over student contract limit		X		x $1.00	= $

_____   _____
Employee Signature (Required)   Date

_____   _____
Principal's Signature (Required)   Date

_____   _____
District Office Approval   Date