

## EXTRA-CURRICULAR ACTIVITIES OUT-OF-COUNTY EXPERIENCE VERIFICATION

(FORM MUST BE RECEIVED WITHIN 30 DAYS FROM DATE OF HIRE)

The information below is to be completed by the former Principal, Assistant Principal, Athletic Director, or Designated Personnel Officer. This information will assist determining the supplemental salary for individuals serving in extracurricular activities within the Clarksville-Montgomery County School System (CMCSS).

NAME OF COACH / SPONSO	PR				
Last 4 digits of SOCIAL SECU			-		
EXPERIENCE RECORD for PA Please list different position Assistant Basketball Coach, Football you will need to be Coordinator position or regu you will only receive credit	is on a separate line. Thigh School Band Dire Specific on if the Assisular Assistant Football	The position held should ctor, Class Sponsor, etc. stant Football coaching position. If Offensive/D	be specific. Ex If you wish to position was fo	receive cre r an Offens	edit for Assistant ive/Defensive
Name of School	School System	PAID Position Held	Beginning Date	Ending Date	Time Employed Years / Months
I HEREBY CERTIFY THAT THE CONTACTED BY CMCSS TO C	CONFIRM THE INFORM	IATION.			
Signature		Date			
Telephone Number		Email Address			
1312 TN-4	Clarksville-M	TURN THE COMPLETED F Iontgomery County Scho Attn: John Miller D / FAX: 931-553-1172 /	ool System	ller@cmcss	s.net
******	**************************************	SS Internal Use ON	LY ******	*****	****
Experience Approved					
Signature CHRO or Humar	Date				

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