



REQUEST FOR LONGEVITY PAY TEACHING ASSISTANT

TO: Teaching Assistants

FROM: Department of Human Resources

RE: Longevity Pay

Upon completion of 15 and 20 years of employment in the Yonkers school district teaching assistants receive "Longevity Pay".

Teaching assistants who are eligible for this provision should complete this "Request for Longevity Pay" form and forward it to the Department of Human Resources 30 days prior to commencing their 16th & 21st year of employment.

TO: DEPARTMENT OF HUMAN RESOURCES

NAME: _____ SCHOOL: _____

Having completed 15 20 years of employment, I am hereby requesting a Longevity Payment to become effective: _____
Date

Date of appointment in the Yonkers Public Schools: _____
Month Day Year

Have you ever had a break in employment while with the Yonkers Public Schools? Yes No

If "YES", state dates and reason: _____

Signature of Person Making Request: _____ Date: _____

Reviewed by: _____ Date: _____ Effective date: _____

