# ATTACHMENT E

**Personnel Assignment for 2020-2021**

**Title III-English Language Acquisition (ELA) Grant**

**Language Enrichment Camp for English Language Learners (ELLs)**

## Directions:

1. Complete the information requested for each subject area, i.e., teacher’s name, employee number, room number, days of the week,

## and time. Make sure to type the days of the week in which enrichment will be provided.

1. List, if any, the name(s) of the teacher(s) who will be used as substitutes including the employee number(s) and area(s) of certification.
2. Teachers are to be paid $30.00 per hour at the end of each month, and must complete a Teacher Voluntary Compensation Agreement

Form.

1. **Upload** the completed form to [http://www.broward.k12.fl.us/esol/lec/index.asp**.**](http://www.broward.k12.fl.us/esol/lec/index.asp)

*You may use multiple copies of this form if additional tutors will be assigned.*

## School: WL#: Telephone #:

**Principal’s name:**

(Please print)

## LEC Contact Person: Title: Email Address:

(Please print)

|  |
| --- |
| Subject:  Teacher’s name: Employee #: Certified in: Room #: Time(s): **Type days of the week tutoring will be provided:** |
| Subject:  Teacher’s name: Employee #: Certified in: Room #: Time(s): **Type days of the week tutoring will be provided:** |
| Subject:  Teacher’s name: Employee #: Certified in: Room #: Time(s): **Type days of the week tutoring will be provided:** |
| **Substitute Teacher(s): Employee #: Certified in:** |

I certify that the above information is correct. Approved:

Principal’s signature

Date: