

### Stipends Time and Effort

School	Compass Classical Academy
Payroll Month	

I certify that I have been working solely in activities supported by the \_\_\_\_\_ Title 1 \_\_\_\_\_ grant for the stipends listed below.

Name	# of Hours	Rate	Stipend Amt.	Signature

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Supervisor's Title

\_\_\_\_\_  
Date