

# Ithaca City School District Study Hall Request/Approval Form

Date \_\_\_\_\_

Ithaca High School Athletic Department  
Ithaca City School District  
1401 North Cayuga Street  
Ithaca, NY 14850

To Whom it May Concern:

As a current staff member of Ithaca City School District, I would like to express my interest in being a Board of Education approved member of the Extended Day staff to the Ithaca Athletic Department during the 20\_\_\_\_ - 20\_\_\_\_ academic year. Please return to Athletic Department Attn: Samantha Little.

Thank you for your consideration.

Sincerely,

\_\_\_\_\_ (print)

\_\_\_\_\_ (sign)

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I would like to request Board of Education approval for this staff member to be a part of the Extended Day Program staff at Ithaca City School District Athletic Department for the 20 \_\_\_\_ - 20 \_\_\_\_ academic year as a \_\_\_\_\_ (please specify; after school sports study hall), at the hourly rate of \_\_\_\_\_, for up to \_\_\_\_\_ hours per week.

\_\_\_\_\_  
Date given to Human Resources

\_\_\_\_\_  
Director Athletics and Wellness