

PENN CAMBRIA SCHOOL DISTRICT

Homebound

INSTRUCTIONS FOR COMPLETION OF FORMS

Thank you for agreeing to be a **Homebound** teacher for one of our students. Your hours are flexible between you and the parent. You can arrange a convenient time for the instruction to take place.

A few reminders for you:

- ✓ Homebound rate is extra duty rate per PCEA contract. Maximum instruction time is **five hours** a week.
- ✓ Travel Rate is the IRS reimbursable rate. (If you are not sure of the rate, refer to travel form on webpage).
- ✓ Send/give the completed **Application for Remuneration** and **Monthly Report** to the building principal on the last day of the month or the last day of your Homebound instruction. (Principal will sign and forward to Admin Office)
- ✓ Complete the **Termination Report** once the student has completed Homebound and has returned to school. This report is sent to the Principal of the building where the student is enrolled. (Principal & Guidance Counselor will review, sign and forward to Admin)
- ✓ You can communicate with school counselor or the classroom teachers of the student during **Homebound** instruction via email or telephone.
- ✓ Each school secretary has extra copies of the required forms.

INSTRUCTION IN THE HOME: MONTHLY REPORT

Date _____ Signed _____
Home Instructor

PENN CAMBRIA SCHOOL DISTRICT
Cresson, Pennsylvania

INSTRUCTION IN THE HOME: APPLICATION FOR REMUNERATION

DIRECTIONS: *Complete one (1) copy of this form by listing the information required relative to home instruction for each teacher performing home instruction for pupils enrolled in your building.*

This report is required for payroll purposes. Payroll reporting data will vary from month to month.

Teacher Name _____
(last) (first)

Subjects in which instruction was provided:

Student Name _____
(last) (first)

HOME INSTRUCTION			
Date	Hours	Rate	Amount Due
TOTALS			\$

TRAVEL		
Miles*	Rate	Amount Due
		\$

Teacher Signature _____

Date _____

Penn Cambria _____ School

Principal Signature _____

Date _____

Approved by: _____
Administration Office

Date _____

***Actual miles traveled to and from student's home.**

HOMEBOUND INSTRUCTION TERMINATION REPORT

DIRECTIONS: *Each teacher who provides homebound instruction to an incapacitated child is requested to complete this form when the homebound instruction is terminated.*

Student Data:

1. _____
(last) (first) (initial)
2. School Enrolled in Penn Cambria _____ School Grade _____
3. Instruction began: Month _____ Day _____ Year _____
4. Instruction ended: Month _____ Day _____ Year _____

Homebound Instructor Data:

5. _____
(last) (first) (initial)
6. Mailing Address _____
7. _____
Certification Phone # _____

Instructional Summary

- | 8. Subject(s)
Taught | Teacher of Record (Course) | Report
Grade |
|-------------------------|----------------------------|-----------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Signature of Homebound Instructor

OTHER DATA:

10. Counselor Signature _____
11. Principal Signature _____

NOTE: Building principal sends copies of this form to the guidance office, returns the original to the Superintendent and informs the appropriate office staff of student's change in status.

____ Guidance Office