



Red River Parish School Board

1922 Alonzo Street • P.O. Box 1369
Coushatta, LA 71019
Phone: (318) 932-4081 • FAX: (318) 932-3081
www.rrbulldogs.com

Overtime / Stipend Form 2021-2022 School Year

Name: _____

Address: _____

City, State ZIP: _____

Social Security Number: _____

Reason for Pay: _____

Dates Worked: _____

Rate of Pay: _____ (per hour / per day) Please circle one

Total Time Worked: _____ (hours / days) Please circle one

Total Gross Pay: (Rate of Pay x Total Time Worked) _____

Benefits:	School Employees Retirement	28.7%	_____
(Percentage of Total Gross Pay)	(Bus Drivers, Maintenance Employees)		
	Teacher Retirement	25.2%	_____
	(Teachers, Tutors)		
	Social Security	6.2%	_____
	(Substitutes Only)		
	Medicare Tax	1.45%	_____
	LWCC (Workman's Comp.) (One Class Only)		
	Bus Driver	6.9598%	_____
	Teacher/Clerical	0.5205%	_____
	Other	3.8575%	_____
	Total Cost		_____
	(Add the gross pay and all applicable benefits)		

Signatures: Employee _____ Date _____

Principal _____ Date _____