

Anchorage School District Paycheck Distribution Request (Substitute and Temporary Employees only)

Name: _____

Social Security Number: _____

I am requesting that my:

- Substitute Teaching
- Substitute Clerical
- Noon Duty/Crossing Guard
- Temporary School Attendant
- Other _____

paycheck(s) be distributed to

_____ **until further notice.**
Location

Employee Signature

Date

For District Use Only

Processed by: _____ Date: _____