



Building Partnerships for Tomorrow

Union County Educational Services Commission

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**UCESC Mentoring Plan
Authorization for Payroll Deduction of Mentor's Fee:
Four-Week Mentoring Phase**

Novice Teacher's Name: _____

School: _____

Title of Provisional Certificate: _____

Full Time Equivalency: (check one)

_____ Full Time

_____ 4/5 Time

_____ 3/5 Time

_____ 2/5 Time

_____ 1/5 Time

_____ Other (Explain) _____

Commencement Date of Four-Week Mentoring Phase: _____

Payroll Deduction Authorization:

I hereby authorize the Union County Educational Services Commission to deduct \$450.00 from my paycheck at the conclusion of my four-week mentoring phase to be paid to the following mentor teacher:

Mentor Teacher's Name: _____

In the event the four-week mentoring phase has not been completed at the conclusion of this school year or upon my termination of employment, I hereby authorize UCESC to deduct a prorated share of the mentoring fee from my final paycheck to be paid to my assigned mentor.

Novice Teacher's Signature: _____ **Date:** _____