

Itinerant Assignments Declaration Form

2018-19

(Employee Number)

_____ (Please Print Name)

I am a member of the following:

- Substitute Teachers (K-12, Early Ed, or Adult)
- Special Educators & Itinerants (Arts, Music, Coaches, etc.) & Health and Human Services Personnel (Nurses, Psychologists, Counselors, P.S.A.)

The Schools/Work locations I am assigned to, ordered by MOST to LEAST:

School/Work Location

Approx % per week

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

I declare the above assignment information true to the best of my knowledge:

(Signature)

(Date)

(Non-LAUSD Email)

(Phone)

These Assignments are only valid for the current school year
Complete and return to Tara Thomas, UTLA
3303 Wilshire Blvd., 12th Floor, Los Angeles, CA 90010
Phone: (213) 637-5165 Fax: (213) 368-6231
tthomas@utla.net

(Date Received)