Elected Statewide CFT Leadership Stipend

Request and Certification

As per Resolution 2 from the 2011 CFT Convention, CFT will compensate persons serving in CFT positions elected statewide who are not receiving release time, load reduction, or a reasonable stipend for CFT work by their local. Completion of the attached form is required for payment.

Directions and Guidelines

1.) Only one stipend will be issued per person for any given period.

2.) The CFT leadership stipend is $500 per period.

3.) Both sections of this form must be completed for payment consideration. Section I is for payment and tax reporting by the recipient. Section II is for verification by another local leader for eligibility.

4.) If you received any form of compensation from the local for CFT work, you are required to disclose it. "Reasonable stipend" paid by the local is any amount equal to or greater than the CFT leadership stipend. CFT will make whole and pay the difference between the CFT leadership stipend and the local’s stipend.

5.) Stipends will be issued for the periods of Spring and Fall. Spring is the period of January 1st – June 30th and Fall is the period of July 1st – December 31st. Fall Stipends will be paid by March 15th and Spring Stipends will be paid by September 15th.

6.) Stipends will only be issued to those who are eligible and who serve 50% or greater for the stipend period, i.e. at least 90 days or 3 months of the period.

Section I. Instructions:

7.) Complete section I including the CFT statewide title and the start date and end date of the position served. (Ex: If elected at the 2013 Convention, the start date would be April 1, 2013 and end date would be June 30, 2013 for Spring 2013 period. Same person would record July 1, 2013 as start date and December 31, 2013 for Fall 2013 period).

8.) This form must be filed with CFT for each period a stipend is requested and must be received no later than 30 days after the completion of the period.

9.) You are responsible for reporting the taxable portion of this payment to the IRS.

Section II. Instructions:

10.) Your local’s leader must complete Verification section II. The local leader is the president, treasurer or senior vice president who is not the recipient of the stipend.
Section I.
CFT Elected Statewide Leadership Position Certification

“I ___________________________ certify that during the period of _______________ to _______________.

(Print full name of stipend recipient) (Start date) (End date)

I served in the elected statewide position of _____________________________ and during the same period of time indicated above I did not receive release time, load reduction, or a reasonable stipend from the local for CFT work. To the best of my knowledge all information is correct and I am entitled to the full or partial CFT stipend.”

________________________________________ ______________________
Statewide Officer’s Signature Date

Address __________________________________________________________

City, State, Zip ___________________________________________________

Social Security No. ________________________________________________

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Section II.
Verification by Local

“I ________________ certify that during the period stated above that _____________________________ and _____________________________

(Print name of local leader not requesting stipend) (Name of stipend recipient) did not receive release time or load reduction from the local or district for CFT work. Additionally, the person named above for the same period of time received ________________ from the local for CFT work.”

(Dollar amount of local stipend)

________________________________________ ______________________
Local Name and Number

Local Leader’s Signature Title Date

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Return request to: Secretary Treasurer, California Federation of Teachers
2550 North Hollywood Way, Suite 400, Burbank, CA  91505

Office use:
Date received:________
Approved:___________
Check mailed:_________