Monterey County Office of Education

Administrative Designee Authorization

I hereby designate ________________________________ to act as Administrative Designee for the IEP/IFSP of ____________________ to be held at ________________________________________ on _______________________.

Time of Meeting ____________________________ to ____________________________

______________________________________

Authorizing Signature ___________________________ Date ________________

Designee acceptance ___________________________ Date ________________

**Attach this authorization to a timesheet**

**Procedure for payment:**

1) Submit timesheet for each occurrence and signed authorization to Supervisor for approval

2) Supervisor sends to department head for approval

3) Division Head sends to Business Office for payment

4) Business office sends copy to and Employee and Personnel Department

5) Personnel Department sends copy to MCOETA

Payment warrant date _________________________

White: Payroll       Yellow: Supervisor       Pink: Employee       Green: MCOETA
1) Attach this authorization to a timesheet indicating actual beginning and ending time of IEP meeting.

2) Retain Employee Copy of this authorization form.

3) Submit timesheet and remaining copies of Authorization form to Supervisor for approval.

4) Supervisor retains copy and submits to Department Head for payment.

5) Division Head sends copy of authorization form to Personnel (Personnel submits one copy to Association) and one copy of authorization form to Business office with timesheet attached.