

**EXTENDED SESSION
TEACHER/STUDENT RATIO FACT SHEET**

School _____ District/Region _____
Name of Grievant _____ File # _____
Phone # _____ Cell # _____
District Rep. _____ Chapter Leader _____

**SET FORTH SPECIFICALLY THE ACT OR CONDITION AND THE
GROUNDS ON WHICH IT IS BASED. SET FORTH THE SPECIFIC
ARTICLE(S) AND SECTION(S) ALLEGED TO BE VIOLATED:**

CHECK ONE:

The extended session assignment for regular education teachers exceeds the maximum group size of ten students. This is a clear violation of Articles Six A Two and Six B of the Agreement.

Date violation began _____ Date violation ended _____

Number and names of additional students in each session: _____

If necessary attach a separate sheet with the names of the additional students assigned to your session.

The extended session assignment for special education teachers exceeds the maximum group size of five students. This is a clear violation of Articles Six A Four and Six B of the Agreement.

Date violation began _____ Date violation ended _____

Number and names of additional students in each session: _____

If necessary attach a separate sheet with the names of the additional students assigned to your session.