BOARD OF COOPERATIVE EDUCATIONAL SERVICES

Hamilton-Fulton-Montgomery Counties 2755 State Highway 67 Johnstown, NY 12095 (518) 736-4310, ext. 4302

EMPLOYEE STATISTICS

2025 - 2026

(Circle one) Mr. Mrs. Miss Ms.

NAME:	Last	First	M.I.	
	Lasi	THSt	141.1.	
ADDRESS:				
		Street/PO Box		
		City/State/Zip		
TELEPHONE NI	JMBER:			

Please *circle* your choice for the distribution of your gross salary.

PLEASE NOTE: THE CHOICE MADE NOW IS IRREVOCABLE FOR THIS SCHOOL YEAR

10-Month Option:

Payments spread over 10 months. First payroll will be a 1-week check dated 9/5/25, followed by a 1-week check dated 9/12/25, followed by 20 bi-weekly checks ending on 6/18/26.

*Bulk Pay Option:

Payments spread over 10 months. First payroll will be a 1-week check dated 9/5/25, followed by a 1-week check dated 9/12/25, followed by 20 bi-weekly checks ending on 6/18/26. A final <u>bulk check</u> at the end of the school year will be equivalent to five (<u>5</u>) bi-weekly checks and will be dated 6/17/26.

*Deferred Pay Option:

Payments spread over 12 months. First payroll will be a 1-week check dated 9/5/25, followed by a 1-week check dated 9/12/25, followed by 24 bi-weekly checks ending on 8/14/26.

* If you choose either the <u>bulk pay or deferred pay option</u>, you are **required** to have a **Payroll Election Form** on file with the HFM BOCES Payroll Department. A copy of the form has been enclosed for your use.

DATE: ______SIGNATURE: _____

PLEASE RETURN FORM TO CARENE CHRISTENSEN, SENIOR ACCOUNT CLERK BY JUNE 6, 2025