



PMEA Music Performance Assessment

Adjudicator Stipend Confirmation Form

(Solo & Small Ensemble MPA's)

To be completed by each adjudicator on-site and returned to the Host by the end of the MPA.

NAME: _____

MAILING ADDRESS:

MPA SITE: _____ **MPA DATE:** _____

CALCULATE THE STIPEND OWED:

Number of Hours of Adjudicating: _____ $\times \$35 = \$$ _____
Prorated to the half hour.

+ Travel Reimbursement (as applicable): _____ $= \$$ _____

Adjudicators may be eligible for travel reimbursement based on the number of miles traveled one way to the MPA site:

Less than 50 miles one way = No reimbursement

50-99 miles one way = \$25

100-149 miles one way = \$50

150+ miles one way = \$75

+ Other Expenses (as applicable): _____ $= \$$ _____

Must be pre-approved by the MPA Coordinator and documented with receipts to be authorized for reimbursement.

TOTAL STIPEND _____ $= \$$ _____

PMEA will mail payments to adjudicators within one month from when hosts submit the online Host Expense Report Form. All registration fees must be received before payments are issued with payments monitored by the MPA Coordinator and PMEA.

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Adjudicator Signature

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Date