

# **NON-UNION CLASSIFICATIONS**

## **EMPLOYEE**

### **H A N D B O O K**



**Mason City Schools  
211 North East Street  
Mason, OH 45040**

**Approved by the Board of Education  
July 19, 2010**

# **INTRODUCTION**

The purpose of this manual is to provide you with easy access to information pertaining to the operation of the district as it relates to you and your duties.

When more information is needed than is provided in this handbook, you may visit the Policy Manual on the district intranet. If you are unable to locate needed information, you should feel free to ask your supervisor for assistance.

Your comments and suggestions for improvement of this handbook are welcomed and will be considered by the administrative team during the evaluation of the manual.

Kevin L. Bright  
Superintendent

# **MASON CITY SCHOOLS**

## **VISION**

Mason City Schools...welcoming, valuing, and engaging each learner.

## **MISSION**

To deliver excellence every day for all students by ensuring high impact learning, engaging parents and community, and providing a safe and nurturing environment.

## **PURPOSE**

To ensure that all students develop the capacity and confidence to thrive and meet the challenges of a diverse and dynamic global society.

## **VALUES**

Achievement, Collaboration, Connectedness, Efficiency, Flexibility, Inclusion, Independence, Innovation, Integrity, Planning, and Responsibility.

## **CONTINUOUS IMPROVEMENT PLAN COMPONENTS**

- Student Achievement
- Parent and Community Engagement
- Safe and Inviting Schools

# TABLE OF CONTENTS

**Cover Page**  
**Introduction**  
**Vision**  
**Table of Contents**

**A. Employment - Structure & Conditions**

**AA Organizational Chart**  
**AB Pre-Employment Procedures**  
**ABA Confidential Student & Employee Information**  
**ABA SafeSchools**  
**ABA Bloodborne Pathogens Training**  
**ABA Smoke Free Work Environment**  
**AC Probationary Period**  
**AC Seniority**  
**AD Affirmative Action Plan – Non-Discrimination Statement**  
**ADA Title VI, Title IX, Section 504 Grievances**  
**ADB Grievance Procedure**

**B. Wages & Benefits**

**BA Salary Schedules**  
**BB Salary Schedule Placement**  
**BB Schedule of Work Days**  
**BC Payroll Deductions**  
**BCA Federal Withholding**  
**BCA State Withholding**  
**BCA Retirement Deductions & Benefits**  
**BCB Medicare**  
**BCB Other Deductions**  
**BD Pay Periods**  
**BD Time Cards/Time Sheets Procedure**  
**BDA Compensatory Time and Work Exchange Days**  
**BDB Overtime Pay**  
**BDB Emergency Overtime Pay**  
**BDC Direct Deposit & Paychecks**  
**BE Benefit Eligibility**  
**BEA Vacations & Scheduling of Vacations**  
**BEB Holidays & Holiday Pay**  
**BEC Severance Pay**

## **TABLE OF CONTENTS**

### **(Continued)**

<b>BED</b>	<b>Major Medical/Hospitalization Insurance</b>
<b>BED</b>	<b>Spouse Coverage</b>
<b>BEE</b>	<b>Dental Insurance</b>
<b>BEE</b>	<b>Life Insurance</b>
<b>BEF</b>	<b>Optical Insurance</b>
<b>BEG</b>	<b>Countryside YMCA</b>
<b>BEG</b>	<b>Tax Sheltered Annuities</b>
<b>BEG</b>	<b>Section 125</b>
<b>BEH</b>	<b>Student Tuition Charge</b>

#### **C. Attendance**

<b>CA</b>	<b>Validation of Absence</b>
<b>CAA</b>	<b>Absence Procedures</b>
<b>CB</b>	<b>School Delays and Closings</b>
<b>CC</b>	<b>Use of Sick Leave</b>
<b>CC</b>	<b>Adoption Leave</b>
<b>CCA</b>	<b>Granting Deficit Sick Days</b>
<b>CCA</b>	<b>Reporting Accumulated Sick Leave</b>
<b>CCA</b>	<b>Sick Leave Accumulation</b>
<b>CD</b>	<b>Personal Leave</b>
<b>CE</b>	<b>Professional Leave</b>
<b>CF</b>	<b>Child Rearing Leave</b>
<b>CG</b>	<b>Family and Medical Leave Act</b>
<b>CH</b>	<b>Assault Leave</b>
<b>CH</b>	<b>Leave of Absence</b>
<b>CI</b>	<b>Jury Duty/Court Appearances</b>
<b>CI</b>	<b>Loss of Salary for Absence</b>
<b>CI</b>	<b>Resignations</b>

#### **D. Performance & Evaluation**

<b>DA</b>	<b>Employee Job Classifications</b>
<b>DB</b>	<b>Recruitment, Selection &amp; Appointment</b>
<b>DC</b>	<b>Personnel Records</b>
<b>DC</b>	<b>Examination of Personnel Records</b>
<b>DD</b>	<b>Supervision and Evaluation of Job Performance</b>
<b>DDA</b>	<b>Process of Evaluation</b>
<b>DDB</b>	<b>Assigned Uniforms &amp; Equipment</b>
<b>DDB</b>	<b>Unsatisfactory Job Performance</b>

## **TABLE OF CONTENTS (Concluded)**

### **E. Reduction, Suspension & Removal**

- EA Written Notice**
- EA Disciplinary Suspension**
- EA Removal or Discharge**
- EB Procedure for Disciplinary Action, Suspension, or Removal  
of an Unsatisfactory Employee**
- EB Reduction in Force**
- EC Layoff**
- ED Transfers**
- EE Reinstatement**

### **F. Forms - SAMPLES**

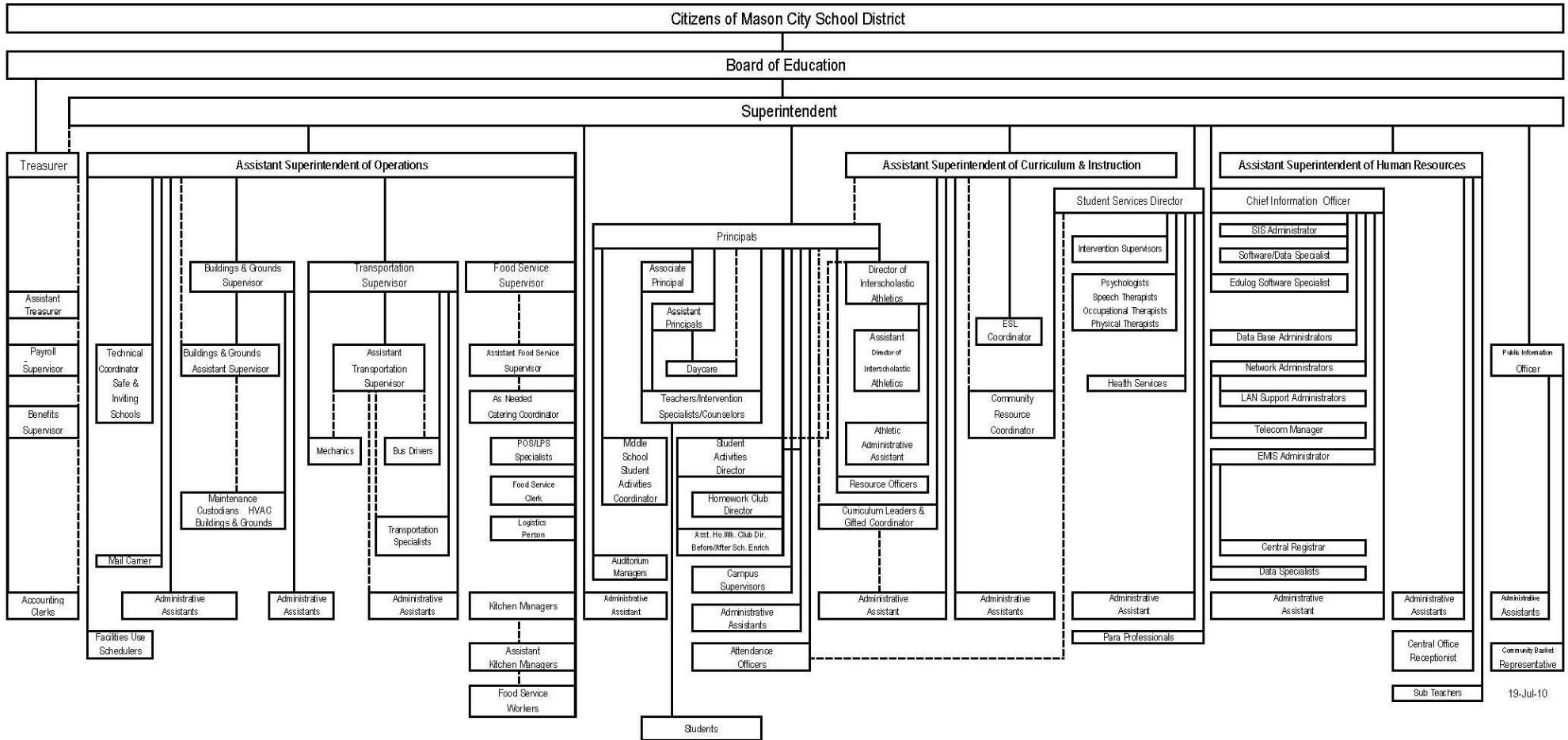
- MCS-501 Absence from Duty**
- MCS-502 (Request for) Leave of Absence**
- MCS-503 (Request to) Attend Professional Meeting**
- MCS-504 Personal Leave Request**
- MCS-505 Employee Incident Report**
- MCS-507 Change of Address**
- MCS-508 Vacation Request**
- MCS-510 Separation (Resignation, Retirement, Non-Renewal &  
Termination)**
- MCS-530 Grievance Form Step I – Principal/Supervisor**
- MCS-531 Grievance Form Step II – Assistant Superintendent of  
Human Resources**
- MCS-532 Grievance Form Step III – Superintendent**
- MCS-540 Performance Appraisal – Administrative Assistants**
- MCS-541 Performance Appraisal – Non-Union Classified Employees**
- MCS-606 Monthly Mileage Form**

**Mason City Schools**  
**CLASSIFIED STAFF HANDBOOK**

**A. Employment - Structure and Conditions**

- AA Organizational Chart**
  
- AB Pre-Employment Procedures**
- ABA Confidential Student and Employee Information**
- ABA SafeSchools**
- ABA Bloodborne Pathogens Training**
- ABA Smoke Free Work Environment**
  
- AC Probationary Period**
- AC Seniority**
  
- AD Affirmative Action Plan – Non-Discrimination Statement**
- ADA Title VI, Title IX, Section 504 Grievance**
- ADB Grievance Procedure**

ORGANIZATIONAL CHART





## **PRE-EMPLOYMENT PROCEDURES**

All potential classified staff members will follow the procedures outlined below *prior* to their first day of employment:

1. Complete the Board-adopted, online application.
2. Undergo a personal interview with immediate supervisor, and possibly the building principal.
3. Provide written verification of criminal record, via the Ohio Bureau of Criminal Identification and Investigation's fingerprint process (BCI) and the Federal Bureau of Investigation (FBI). Criminal background checks must have been completed within the past year.

Background checks are processed in the Human Resources Department.

Subsequent FBI background checks are required every five years for employees of Mason City Schools.

It is each employee's responsibility to pay for his/her background check.

Employment with the Mason City School District is contingent upon the recommendation of the Superintendent, and upon formal approval by the Board of Education based upon the results of the criminal background check.

4. Complete the following forms:
  - A. W-4 (Federal Withholding)
  - B. IT-4 (State Withholding)
  - C. City Tax
  - D. School Employees Retirement System (SERS)
  - E. SSA-1945 (Social Security Windfall)
  - F. I-9 (Federal Requirement)
  - G. Division of Homeland Security
  - H. Network Policy Agreement

## **CONFIDENTIAL STUDENT AND EMPLOYEE INFORMATION**

The Board of Education of the Mason City School District is committed to protecting the confidential student and employee records and information that it maintains for the efficient and effective operation of the school district.

To this end, no employee, agent, contractor, or volunteer of the Board of Education shall disclose, divulge, release, transmit, or otherwise make public confidential student or employee records or information without legal authority or permission, which must be in accordance with state and federal law. Such confidential student and employee records or information includes, but is not limited to, the following: medical records, history or information; juvenile or other court records that are not public records; records pertaining to adoption, probation, or parole proceedings; social security numbers; Student IDs and State Student IDs (SSID); student education records and other personally identifiable student information as defined by Ohio law and the Family Educational Rights and Privacy Act (“FERPA”); BCI and/or FBI criminal background checks for employees, agents, contractors, or volunteers; confidential financial records (including, but not limited to, bank account and credit card information); retirement system documents; and any other student or employee records or information, the release of which is prohibited by state or federal law.

Nothing contained herein shall prohibit the disclosure of any record that is considered a public record under Ohio’s Public Records Act. Likewise, nothing contained herein shall prohibit the disclosure of student records or personally identifiable student information in accordance with Ohio law and FERPA, including the use or disclosure of personally identifiable student information by an employee acting exclusively in his or her capacity as an employee for a legitimate educational or administrative use.

Access to all records, systems, databases, and data containing student and employee information is granted solely for the purpose of performing legitimate, authorized, and assigned responsibilities required for the necessary and proper administration of the school district. An employee may not access any record, system, or database containing confidential student or employee records or information unless such access is necessary to perform a legitimate, authorized, and assigned job responsibility. Employees may not alter, change, modify, add, or delete student or employee records unless appropriate authority has been granted by a supervisor, or it is a part of their specific assigned responsibilities to do so.

The disclosure of confidential student or employee records or information to others who do not have legal authority to receive such records or information may violate the Ohio Privacy Act, FERPA, the Health Insurance Portability and Accountability Act of 1996 (HIPAA), and/or other federal and state laws. Misuse or improper disclosure of student or employee records or information and/or other conduct in violation of this Policy may subject you to disciplinary action, up to and including termination.

## **SAFESCHOOLS**

SafeSchools is an online safety training and tracking system specifically designed for school employees.

Every new employee is required to complete three online training courses. The SafeSchool courses required by House Bill 276 are:

- Bloodborne Pathogens
- Child Abuse
- Sexual Harassment: Staff to Staff

Each employee has 30 days within which to complete the assigned courses. Additional courses may be required for certain departments.

Subsequent refresher courses are required and will be assigned as needed.

## **BLOODBORNE PATHOGENS TRAINING**

In compliance with Ohio House Bill 308 and the OSHA Bloodborne Pathogens Standard, 29CFR, Subpart Z, Section 1910.1030, an Exposure Control Plan has been developed for the Mason City Schools.

This Exposure Control Plan is a key component in the commitment of the Mason City Schools to control occupational exposure of our employees to bloodborne pathogens. This plan specifically addresses Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV).

The Plan is:

1. Available at all times to all employees as copies are kept in the front office of each building. Personal copies are available within 15 days of request
2. Further explained via on-line, required training of all employees
3. Explained during training for those employees who have occupational exposure
4. Updated to reflect modifications in tasks or procedures which may result in occupational exposure
5. Reviewed annually and revised as needed

Please refer to the up-to-date copy of the Exposure Control Plan, which is located in each building office, for further details regarding training and inoculations.

**SMOKE FREE WORK ENVIRONMENT**

Smoking on or in school property is prohibited. The district will advise all potential candidates prior to their employment that smoking is not permissible on or in school property.

## **PROBATIONARY PERIOD**

Within the Mason City Schools, there will be a one year probationary period from the date of assignment during which time the principal or immediate supervisor should conduct a minimum of one appraisal conference during the first six (6) months on any person who has applied for and received a reassignment/promotion, and on any newly hired classified personnel. The appraisal conference may or may not result in a written performance appraisal.

Any appraisal shall:

- Summarize the performance of the individual from the time of hiring or reassignment to the point of appraisal
- Determine whether employment will continue for the newly hired individual or the promotion/reassignment for others

Employment with the Mason City School District is contingent upon the discretionary recommendation of the Superintendent, based upon the results of the criminal background check, and upon formal approval of the Board of Education.

If employment continues, future appraisals will occur in accordance with board policy.

## **SENIORITY**

Seniority is determined by the date of employment (first paid day) for regular employees, either on a full-time or part-time basis.

Seniority shall be used for the purpose of determining the order in which transportation routes are bid or offered.

The order of seniority shall not be used solely as the basis for promotion or reduction in force.

Time paid as a substitute worker is not part of a worker's seniority.

Should an employee resign or retire, and then be re-employed, the date of employment for seniority purposes shall be the return date rather than the original date.

## **AFFIRMATIVE ACTION PLAN - NONDISCRIMINATION STATEMENT**

### **Responsibilities of the Mason Board of Education Serving Its Citizens**

The Mason Board of Education provides the finest educational opportunities for all its students and for its adult community. To ensure all its citizens are provided these services without regard for race, color, national origin, sex, or handicap, the Board believes it necessary to state its responsibilities.

### **Responsibilities in the Education Profession**

The Mason Board of Education provides education and related services to all eligible citizens of the District without regard for race, color, national origin, sex, or handicap.

### **Responsibilities as an Employer**

The Mason Board of Education is an equal opportunity employer. The District provides employment opportunities in accordance with all laws of the State of Ohio and all rules and regulations of the Personnel Review Board of the City of Mason, Ohio, Warren County, by Section 6.11 of the Charter of Mason, without regard for race, color, national origin, sex, or handicap.

### **Responsibilities as a Sponsor of Athletic Events & Other Activities**

The Mason Board of Education provides athletic teams and other school activities for its students without discrimination on the basis of race, color, national origin, sex, or handicap as required by Title VI of the Civil Rights Act of 1964, Title IX of the Federal Education Amendments of 1972, and Section 504 of the Rehabilitation Act of 1973. To comply with all regulations of Title VI, Title IX, and Section 504, the Mason Board of Education has designated the Assistant Superintendent of Human Resources as the **Affirmative Action Officer** for the District (211 North East Street, Mason, Ohio 45040, phone 513/398-0474).

### **Responsibilities to Enforce All of the Above**

The Mason Board of Education is mindful that in a large school community such as the Mason City School District, it is possible that some citizens may need active support to secure all rights due those citizens. To enforce all of the above rights and responsibilities of the school district, the Mason Board of Education asks that all complaints be directed to the **AFFIRMATIVE ACTION OFFICER AT THE MASON BOARD OF EDUCATION OFFICE, 211 NORTH EAST STREET, MASON, OHIO 45040.**

**TITLE VI, TITLE IX, SECTION 504 GRIEVANCES**

Any employee of the District who believes he/she has been discriminated against on the basis of sex, race, color, national origin, or handicap may file a grievance by following the procedures listed below:

1. A sincere attempt shall be made to resolve any grievance by oral interview between the complainant and the building principal or immediate supervisor before any differences become formalized as a grievance.
2. If the grievance cannot be resolved on an informal basis, it may then be submitted in writing to the building principal or immediate supervisor as a formal grievance. Specific forms shall be used for each step of the grievance procedure.

Step I - Principal/Supervisor (MCS-530)  
Step II - Assistant Superintendent (MCS-531)  
Step III - Superintendent (MCS-532)

Copies of these forms are included in the forms section of this handbook.

3. The principal or immediate supervisor must respond in writing to the aggrieved party within seven (7) calendar days.
4. If the problem still remains unresolved, the employee may submit the grievance in writing to the **Assistant Superintendent of Human Resources**, Coordinator of Title VI, Title IX, and Section 504, using the MCS-531 Form - Step II. The completed form may be delivered or mailed to 211 North East Street, Mason, Ohio 45040. A hearing shall be conducted within seven (7) calendar days of receipt of the written grievance.

The aggrieved employee shall have the right to have others present at the hearing to provide information relative to the grievance.

5. The Coordinator shall respond to the aggrieved employee in writing within seven (7) calendar days of the date of the hearing.
6. The decision of the Coordinator will be final.

All attempts should be made to resolve grievances at the lowest possible level.

## **GRIEVANCE PROCEDURE**

Any employee of the District who believes he/she has been treated unfairly relative to his/her employment has the right to file a grievance.

1. A sincere attempt shall be made to resolve any grievance by oral interview between the complainant and the building principal or immediate supervisor before any differences become formalized as a grievance.
2. If the grievance cannot be resolved on an informal basis, it may then be submitted in writing to the building principal or immediate supervisor as a formal grievance. Specific forms shall be used for each of the three steps of the grievance procedure:

Step I - Principal/Supervisor (MCS-530)

Step II - Assistant Superintendent (MCS-531)

Step III - Superintendent (MCS-532)

Copies of these forms are included in the forms section of this handbook.

3. The principal or immediate supervisor must arrange for a hearing within seven (7) calendar days after receipt of the formal grievance. Following such a hearing, the principal or immediate supervisor must respond in writing to the aggrieved party within seven (7) calendar days after the requested hearing.
4. If the problem still remains unresolved, the employee may submit the grievance in writing to the Assistant Superintendent by moving to Step II of the Grievance Procedure. The second step may involve a hearing with the Assistant Superintendent. The hearing shall be conducted within seven (7) calendar days of the Assistant Superintendent's receipt of MCS-531 - Step II - Assistant Superintendent Form.

The aggrieved employee shall have the right to have others present at the hearing to provide information relative to the grievance.

5. The Assistant Superintendent shall respond to the aggrieved party within seven (7) calendar days after receipt of the grievance or within seven (7) calendar days after the hearing.
6. The third level of the grievance is the final option available to the aggrieved party. The MCS-532 - Step III - Superintendent Form must be submitted to the Superintendent. Copies of Step I and Step II Grievance Forms must be attached to the appeal request. The Superintendent may also appoint a designee to stand as Hearing Officer to hear the appeal.
7. The decision of the Superintendent/designee is final.



## CLASSIFIED STAFF HANDBOOK

- B. Wages & Benefits
  - BA Salary Schedules
  
  - BB Salary Schedule Placement
  - BB Schedule of Work Days
  
  - BC Payroll Deductions
  - BCA Federal Withholding
  - BCA State Withholding
  - BCA Retirement Deductions & Benefits
  - BCB Medicare
  - BCB Other Deductions
  
  - BD Pay Periods
  - BD Time Cards/Time Sheets Procedure
  - BDA Compensatory Time & Work Exchange Days
  - BDB Overtime Pay
  - BDB Emergency Overtime Pay
  - BDC Direct Deposit & Paychecks
  
  - BE Benefit Eligibility
  - BEA Vacations & Scheduling of Vacations
  - BEB Holidays & Holiday Pay
  - BEC Severance Pay
  - BED Major Medical/Hospitalization Insurance
  - BED Spouse Coverage
  - BEE Dental Insurance
  - BEE Life Insurance
  - BEF Optical Insurance
  - BEG Countryside YMCA
  - BEG Tax Sheltered Annuities
  - BEG Section 125
  - BEH Student Tuition Charge

**MASON CITY SCHOOL DISTRICT**  
**NON-UNION CLASSIFIED SALARY SCHEDULE**  
**2010-2011 SCHOOL YEAR**

MCS-105A

2.50%

	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>	<b>F</b>	<b>G</b>	<b>H</b>	<b>I</b>	<b>J</b>	<b>K</b>	<b>L</b>
<b>ADMINISTRATIVE ASSISTANT</b>												
Class I	24.34	24.95	25.57	26.19	26.80	27.42	28.03	28.62	29.25	29.87	30.47	31.09
Class II	18.70	19.30	19.92	20.55	21.14	21.76	22.37	22.98	23.61	24.21	24.82	25.45
Class III	17.95	18.54	19.14	19.77	20.37	20.98	21.61	22.23	22.83	23.43	24.04	24.66
Class IV	17.15	17.73	18.38	18.99	19.59	20.20	20.84	21.42	22.05	22.66	23.28	23.90
Class V	15.04	15.65	16.25	16.85	17.46	18.07	18.68	19.30	19.92	20.53	21.14	21.76
Receptionist	13.18	13.80	14.39	15.04	15.65	16.25	16.85	17.48	18.08	18.68	19.30	19.92
Substitute Clerical	Step A of position filled											
Substitute Teacher Scheduler	Class V											
<b>ACCOUNTANTS</b>												
Accounting Clerk	18.70	19.30	19.92	20.55	21.14	21.76	22.37	22.98	23.61	24.21	24.82	25.45
<b>TECHNOLOGY</b>												
Lead Data Specialist	18.70	19.30	19.92	20.55	21.14	21.76	22.37	22.98	23.61	24.21	24.82	25.45
Desktop Specialist	18.70	19.30	19.92	20.55	21.14	21.76	22.37	22.98	23.61	24.21	24.82	25.45
Edulog Specialist	17.95	18.54	19.14	19.77	20.37	20.98	21.61	22.23	22.83	23.43	24.04	24.66
Data Specialist	17.15	17.73	18.38	18.99	19.59	20.20	20.84	21.42	22.05	22.66	23.28	23.90
<b>PARA PROFESSIONALS</b>												
Media Center Assistant	9.47	10.09	10.85	11.55	12.28	13.01	13.72	14.45	15.07	15.69	16.29	16.92
Preschool Assistant	9.47	10.09	10.85	11.55	12.28	13.01	13.72	14.45	15.07	15.69	16.29	16.92
Intervention Specialist Assistant	9.47	10.09	10.85	11.55	12.28	13.01	13.72	14.45	15.07	15.69	16.29	16.92
Cafeteria /Playground/Recess Monitor	8.90	9.49										
High School Lab Assistant	18.31	18.92										
Study Hall Monitor	11.79	12.41										
Substitute	Step A of position filled.											
ESL Assistant	14.45	15.07	15.69	16.29	16.92	17.59	18.27	18.99	19.71	20.48	21.29	22.10





**MASON CITY SCHOOL DISTRICT**  
**NON-UNION CLASSIFIED SALARY SCHEDULE**  
**2011-2012 SCHOOL YEAR**

MCS-105A

2.50%

	A	B	C	D	E	F	G	H	I	J	K	L
<b>ADMINISTRATIVE ASSISTANT</b>												
Class I	24.95	25.57	26.21	26.84	27.47	28.11	28.73	29.34	29.98	30.62	31.23	31.87
Class II	19.17	19.78	20.42	21.06	21.67	22.30	22.93	23.55	24.20	24.82	25.44	26.09
Class III	18.40	19.00	19.62	20.26	20.88	21.50	22.15	22.79	23.40	24.02	24.64	25.28
Class IV	17.58	18.17	18.84	19.46	20.08	20.71	21.36	21.96	22.60	23.23	23.86	24.50
Class V	15.42	16.04	16.66	17.27	17.90	18.52	19.15	19.78	20.42	21.04	21.67	22.30
Receptionist	13.51	14.15	14.75	15.42	16.04	16.66	17.27	17.92	18.53	19.15	19.78	20.42
Substitute Clerical	Step A of position filled											
Substitute Teacher Scheduler	Class V											
<b>ACCOUNTANTS</b>												
Accounting Clerk	19.17	19.78	20.42	21.06	21.67	22.30	22.93	23.55	24.20	24.82	25.44	26.09
<b>TECHNOLOGY</b>												
Lead Data Specialist	19.17	19.78	20.42	21.06	21.67	22.30	22.93	23.55	24.20	24.82	25.44	26.09
Desktop Specialist	19.17	19.78	20.42	21.06	21.67	22.30	22.93	23.55	24.20	24.82	25.44	26.09
Edulog Specialist	18.40	19.00	19.62	20.26	20.88	21.50	22.15	22.79	23.40	24.02	24.64	25.28
Data Specialist	17.58	18.17	18.84	19.46	20.08	20.71	21.36	21.96	22.60	23.23	23.86	24.50
<b>PARA PROFESSIONALS</b>												
Media Center Assistant	9.71	10.34	11.12	11.84	12.59	13.34	14.06	14.81	15.45	16.08	16.70	17.34
Preschool Assistant	9.71	10.34	11.12	11.84	12.59	13.34	14.06	14.81	15.45	16.08	16.70	17.34
Intervention Specialist Assistant	9.71	10.34	11.12	11.84	12.59	13.34	14.06	14.81	15.45	16.08	16.70	17.34
Cafeteria /Playground/Recess Monitor	9.12	9.73										
High School Lab Assistant	18.77	19.39										
Study Hall Monitor	12.08	12.72										
Substitute	Step A of position filled.											
ESL Assistant	14.81	15.45	16.08	16.70	17.34	18.03	18.73	19.46	20.20	20.99	21.82	22.65





## SALARY SCHEDULE PLACEMENT

### New Employees

New employees will be placed at the appropriate step on the salary schedule at the time of employment.

The administrator who interviews prospective employees will evaluate experience.

Salary step placement recommended by administrators or direct supervisors must be approved by the Superintendent.

### Continuing Employees

Employees who work a minimum of one hundred twenty (120) days in any work year with satisfactory performance will be **eligible** for advancement on the salary schedule.

The Board of Education has given any administrator the option of freezing employees at their current salary step when job performance is sub standard.

Freezing of the level of wages may be done for one year, with written direction to the employee for improvement. The employee will also be notified that termination will result if standards are not met within a specified period of time (usually within the next work year).

Administrators may recommend an alternative placement on the salary schedule for a given employee based on competitive market conditions for the position. The Superintendent will approve or deny the recommendation.

## SCHEDULE OF WORK DAYS

Each employee shall be assigned a schedule of working hours and work days for the work year.

A calendar of the work year will be provided by the Treasurer's Office, indicating the designated work days. This calendar will accompany the annual salary notice.



## **PAYROLL DEDUCTIONS**

In accordance with federal, state, and local laws, the following deductions will be made from all employees' pay checks:

1. Federal Withholding Tax
2. State Withholding Tax
3. Retirement - SERS
4. City/Local Tax
5. Medicare Tax

Each newly hired employee shall meet with the Assistant Superintendent of Human Resources/designee to review a packet of information and forms concerning deductions and benefits.

Other deductions may occur according to the eligibility of the employee for particular benefits and programs:

1. Health Care Coverage (Major Medical/Hospitalization)
2. Dental Insurance
3. Optical Insurance
4. Countryside YMCA
5. Credit Union
6. Optional Insurance
7. Tax Sheltered Annuities

All necessary paperwork for withholding taxes and retirement contributions must be on file before the first paycheck can be issued.

Completed, signed withholding forms and/or enrollment cards must be submitted to the Treasurer's Office for review before deductions and/or coverage may begin. Forms need to be submitted in a timely manner in order to assure insurance coverage and/or no delay in receiving pay.

Sufficient enrollment among employees of the District must exist with a company for tax sheltered annuity (TSA) deductions to occur. The Treasurer's Office may provide more information regarding TSA's.

Changes in withholding, deductions for credit union, YMCA dues, and tax sheltered annuities may be made in the Treasurer's Office.

Changes in health care, dental, optical, and life insurance may be made in the Treasurer's Office. The open enrollment period for insurance is in August of each year for employees not previously enrolled, with coverage to begin September 1<sup>st</sup>. Employees who are in need of coverage after the open enrollment period should contact the Treasurer's Office.

Report any changes relative to name, marital status, address, phone number, and/or the birth/adoption of a child.

## **FEDERAL WITHHOLDING**

Federal income tax shall be withheld from each employee's earnings in accordance with rates established by the Department of the Treasury-Internal Revenue Service.

Payroll deductions will be based on the employee's W-4 form, which indicates status and number of exemptions claimed and must be completed at the time of employment, prior to receiving the first paycheck.

Each year on or before January 31<sup>st</sup>, the Treasurer's Office shall issue a W-2 form with earnings and withholding information for the employee's use in preparing federal, state, and local tax returns. **Changes in federal withholding must be made in the Treasurer's Office.**

## **STATE WITHHOLDING**

State income tax shall be withheld from each employee's earnings in accordance with rates established by the Ohio Department of Taxation.

Payroll deductions will be based on the employee's Form IT-4, which indicates status and number of exemptions claimed and must be completed at the time of employment, prior to receiving the first paycheck.

Each year on or before January 31<sup>st</sup>, the Treasurer's Office shall issue a W-2 form with earnings and withholding information for the employee's use in preparing his/her state tax return. **Changes in state withholding must be made in the Treasurer's Office.**

## **RETIREMENT DEDUCTIONS & BENEFITS**

### **School Employees Retirement System of Ohio (SERS)**

*The following information is subject to legislative changes.*

All employees of the District are required to contribute to SERS at the rate of ten percent (10%) of their total salary.

The Board of Education contributes fourteen percent (14%) of total classified salaries to the retirement system.

The Board of Education makes the retirement deductions on a pre-tax basis. This results in a ten percent (10%) reduction of an employee's taxable income for federal and state purposes.

Employees who leave the program prior to retirement age may withdraw the amount which has been deducted from wages per SERS guidelines.

## **MEDICARE**

All employees hired after April 1, 1986, are required to contribute 1.45% of their gross earnings to Medicare. This is in accordance with Section 13205 of the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA).

The Board of Education is also required to contribute 1.45% on the earnings of all employees (both regular and substitute).

Should an employee who was originally hired before April 1, 1986 resign and then become re-employed by the District, or take a leave of absence during which no wages are earned, such employee would then be required to contribute to Medicare.

## **OTHER DEDUCTIONS**

Employees of the Mason City Schools have the option of having other deductions taken from their paychecks.

All employees may choose:

- Credit Union Deductions (savings, checking, Holiday/Vacation Club, car payments)
- Optional Insurance
- Countryside YMCA Dues (15% reduction in membership dues through payroll)
- Tax Sheltered Annuities (dependent upon participating, eligible companies)

Eligible, participating employees will have the following deducted from their paychecks:

- Health Care, if applicable, and HSA deposits and/or premiums
- Dental Insurance Premiums, if applicable
- Vision/Optical Insurance Premiums, if applicable

Court-ordered or Internal Revenue Services deductions may occur:

- Child Support Payments
- Garnishment of Wages
- Court-Ordered IRS Deductions
- Tax Levies

Questions or concerns about payroll deductions should be addressed to the Treasurer's Office.

## **PAY PERIODS**

District employees are paid every other Tuesday. Salary changes occur on the following dates each work year:

- July 1<sup>st</sup> Employees working 250-260 days
- August 1<sup>st</sup> Employees working 217-249 days
- September 1<sup>st</sup> Employees working 187-216 days

Annual salary is calculated as follows:

- Number of days in Work Year times Number of Hours per Day = Annual Hours
- Annual Hours times Hourly Rate = Annual Wages
- Annual Wages divided by Number of Pay Days in Employee's Work Year = Gross Pay (each payday)

Time cards/time sheets will be utilized in reporting overtime or extra days worked. All overtime and/or extra days worked must be **pre-approved** by the employee's principal or supervisor, who will sign the time card/sheet, initialing any overtime or extra hours, and approving any comp time.

## **TIME CARDS/TIME SHEETS PROCEDURE**

### **Time Cards/Time Sheets**

Time cards/time sheets will be completed by all regular workers paid on an hourly basis. At the conclusion of a two week period (usually Friday - or the last day worked before holidays or vacation), the completed time card/time sheet must be submitted to the employee's building principal or direct supervisor for approval.

The building principal or supervisor will review all time cards/time sheets for accuracy, initial approved overtime, extra days, or comp time, and will then sign. The building principal or supervisor shall be accountable for time cards/time sheets of all employees in their building or under their supervision, the correct completion of such cards, signature of approval, and attachments such as Absence from Duty forms.

The building principal or supervisor will forward completed time cards/time sheets and attachments to the Treasurer's Office. Where applicable, a payroll summary sheet will accompany the time cards/time sheets and attachments.

## **COMPENSATORY (COMP) TIME AND WORK EXCHANGE DAYS**

The District recognizes that the work load for many employees varies throughout the year. There may be times during the year when it is necessary for an employee to work extra hours that are above the normal work schedule. Comp time accumulated during excessively busy times of the year may be used later as vacation time. All additional hours/days worked must be pre-approved by the employee's direct supervisor/principal.

### **Compensatory (Comp) Time**

1. All time worked must be reported on each employee's time card. All time not worked that is requested to be paid (paid leave) must also be reported, with the reason for the paid leave reported and approved by a supervisor.
2. Any time worked over the standard number of hours per day will be performed only with the prior approval of the employee's supervisor, and only with the prior understanding of whether it is to be paid, or reported as comp time.
3. Additional time worked that is not requested to be paid (comp time) will be added to the employee's vacation balance so the employee may take that time off at a later date.
4. Time worked in excess of the regular hours per day will be reported in the "Extra Hours" columns of the time card. The Treasurer's Office will determine if these hours are eligible for overtime premium.
5. If the employee, with the supervisor's approval, wants the additional time added to vacation time (comp time), it is to be noted at the bottom of the time card in the space provided for comp time. Comp time is accrued to the vacation balance in all time for the total of the two week pay period.
6. Once accrued and added to the vacation balance, comp time will not need to be requested separately. It is merely additional vacation time and should be requested as vacation time. Comp time hours will be reported as additional vacation time available, and will be subject to the same one-half day minimum use requirement.
7. Any use of the vacation leave balances will be assumed to use any balance of accumulated comp time first before using any available vacation time.
8. All vacation leave balances will be subject to the current limitations on balances that may be carried over from one year to the next. Vacation time (including comp time) accrued in the fiscal year (ending June 30) must be used by December 31<sup>st</sup> of the calendar year in which the fiscal year ends.
9. Employees are limited to adding no more than 40 hours (including any overtime premium) in one fiscal year (7/1 – 6/30) of comp time to vacation.

**COMPENSATORY (COMP) TIME AND WORK EXCHANGE DAYS  
(concluded)**

**Exchange Days/Hours**

Employees may request exchange hours or an exchange day in lieu of taking personal days or sick leave days. Exchange hours or an exchange day would be worked in order to accomplish required tasks, making up hours lost during the employee's absence. Exchange time **must** be worked within the **same week** that it is to be used. All exchange hours earned and used during a week must be reported in the "Extra Hours" column on the time card on the days it is earned and used. All additional hours/days worked must be pre-approved by the employee's direct supervisor/principal.

## **OVERTIME PAY**

An overtime pay rate of one and one half times the hourly wage of an employee shall be paid for time worked in excess of forty hours during a given work week.

All overtime hours must be pre-approved by the Superintendent or his/her designee, and the building administrator must place his/her initials beside the additional hours written on the time card.

Holiday pay will be counted as hours worked. No other kind of leave pay, including vacation, personal, or sick leave pay, will be considered as hours worked when calculating overtime pay. Except for Holiday pay, overtime pay is based upon additional hours beyond forty (40) hours *actually* worked.

When an employee works in two or more pay classifications, a blended rate of overtime pay will be utilized. The rate will be weighted based on the amount of time spent in each classification.

## **EMERGENCY OVERTIME PAY**

An emergency overtime pay rate of one and one half times the hourly wage for employees requested to work outside of their normal assignment during a District Declared Emergency (formally declared by the Superintendent) shall be paid for any time paid in excess of forty hours during a given work week. Holiday, vacation, personal, sick leave pay, or any other kind of leave pay will be considered as hours paid when calculating emergency overtime pay.

When an employee works in two or more pay classifications, a blended rate of overtime pay will be utilized. The rate will be weighted based on the amount of time spent in each classification.

## **DIRECT DEPOSIT & PAYCHECKS**

Classified Employees will receive their payroll via direct deposit with electronic pay stubs sent to the employee via the employee's selected email account. Direct deposit notifications will be delivered to the appropriate building during the school year if no email exists. If an employee is to receive a paycheck, it will be available in the Treasurer's Office.

An employee's earnings may be directly deposited into the employee's checking or savings account at any qualified bank or financial institution each pay period. Any change to an employee's direct deposit will result in the employee receiving a paycheck for the next pay period, with the direct deposit beginning with the pay period following that check.

A direct deposit form is included in each packet of information given to new employees. The completed direct deposit form should be returned with withholding forms prior to the first paycheck.



## BENEFIT ELIGIBILITY

Eligibility for fringe benefits is based on length of assignment as outlined below:

### **Less Than Twenty (20) Hours Per Week**

Those employees who are **scheduled to work throughout the *school* year** for less than twenty (20) hours per week qualify for:

1. Sick Days (1.25 days per month; 12 months per year) \*
2. Personal Days (3 days per year; unused days are converted to accumulated sick leave)
3. Severance Pay (based upon accumulated, unused sick days at the time of retirement)
4. Retirement Benefits through School Employees Retirement System (SERS)
5. Holiday Pay (7 days: Labor Day, Thanksgiving Day, Christmas Day, New Year's Day, Martin Luther King Day, Presidents' Day, and Memorial Day)

### **Twenty (20) Hours or More Per Week**

Those employees who are **scheduled to work throughout the *school* year** for twenty (20) hours or more per week qualify for:

1. Sick Days (1.25 days per month; 12 months per year) \*
2. Personal Days (3 days per year; unused days are converted to accumulated sick leave)
3. Severance Pay (based upon accumulated unused sick days at the time of retirement)
4. Retirement Benefits through School Employees Retirement System (SERS)
5. Holiday Pay (7 days: Labor Day, Thanksgiving Day, Christmas Day, New Year's Day, Martin Luther King Day, Presidents' Day, and Memorial Day)
6. Life Insurance
7. High Deductible Health Plan
8. Dental Insurance
9. Optical Insurance

Those employees who are **scheduled to work throughout the *calendar* year** for twenty (20) hours or more per week qualify for:

1. Sick Days (1.25 days per month; 12 months per year) \*
2. Personal Days (3 days per year; unused days are converted to accumulated sick leave)
3. Severance Pay (based upon accumulated unused sick days at the time of retirement)
4. Retirement Benefits through School Employees Retirement System (SERS)
5. Holiday Pay (11 days: Labor Day, Thanksgiving Day, Day After Thanksgiving, Christmas Eve, Christmas Day, New Year's Day, Martin Luther King Day, Presidents' Day, Memorial Day, Good Friday, and 4<sup>th</sup> of July)
6. Life Insurance
7. High Deductible Health Plan
8. Dental Insurance
9. Optical Insurance
10. Paid Vacation Days (half the allotted time after one year of regular service [sub days excluded])

## BENEFIT ELIGIBILITY (Concluded)

**For employees working seven and one half (7½) hours per day, but not five (5) days per week,** vacation will be pro-rated according to time worked.

EXAMPLE: Employee works three (3) days per week, seven and one half (7½) hours per day, which is equal to 60% of normal work week. After one full year of service, employees are entitled to vacation days equivalent to time worked in a ten day period.

10 days X .60 (sixty percent) = 6 vacation days

**For employees working four (4) hours per day, five (5) days per week,** vacation will be pro-rated according to time worked.

EXAMPLE: Employee works four (4) hours per day, five (5) days per week throughout the calendar year. After one full year of service, employees are entitled to vacation days equivalent to time worked in a ten day period.

10 days X 4 hours = 40 hours ÷ 8 hour work day = 5 vacation days

### **Thirty-Seven and One Half (37½) or Forty (40) Hours Per Week**

Those employees who are **scheduled to work throughout the calendar year** (September-August) for thirty-seven and one half (37½) or forty (40) hours per week qualify for:

1. Sick Days (1.25 days per month; 12 months per year)
2. Personal Days (3 days per year; unused days are converted to accumulated sick leave)
3. Severance Pay (based upon accumulated unused sick days at the time of retirement)
4. Retirement Benefits through School Employees Retirement System
5. Holiday Pay (11 days: Labor Day, Thanksgiving Day, Day After Thanksgiving, Christmas Eve, Christmas Day, New Year's Day, Martin Luther King Day, Presidents' Day, Good Friday, Memorial Day, and 4<sup>th</sup> of July)
6. Life Insurance
7. High Deductible Health Plan
8. Dental Insurance
9. Optical Insurance
10. Paid Vacation Days (after one year of service)

\* *Part-time employees who become full-time will have their sick leave balance adjusted to full-time equivalency. See Section CCA Sick Leave Accumulation.*

## **VACATIONS & SCHEDULING OF VACATIONS**

Employees requesting vacation time must submit a completed Vacation Request Form as early in the calendar year as possible to their building administrator or direct supervisor. Forms are available on DocuShare or from principals and/or supervisors. Use of vacation days when school is not in session is encouraged.

The vacation schedule will be arranged by the employee's immediate supervisor or building principal. The Assistant Superintendent of Human Resources will have final approval of vacation schedules for classified staff. It is the immediate supervisor's responsibility to ensure that vacations are scheduled to least interfere with the operation of schools. Requests of two (2) or more consecutive weeks may be denied.

Every attempt shall be made to meet the needs of the employee; however, it is necessary for all preparations to be completed before the opening or closing of school.

Administrators reserve the right to postpone vacations when the time scheduled interferes with the welfare of the district.

Vacation days are accrued monthly. The first paycheck of each month will reflect the previous month's accrual.

Paid vacation days for full-time (year-round and modified year-round) employees are as follows:

1. Two (2) weeks (ten [10] work days) after one (1) year of service
2. Three (3) weeks (fifteen [15] work days) after eight (8) years of service
3. Four (4) weeks (twenty [20] work days) after twenty (20) years of service

Paid vacation days for part-time, year-round employees are as follows:

1. Two (2) weeks (ten [10] work days) after one (1) year of service  
(prorated at their number of hours scheduled to work)
2. Three (3) weeks (fifteen [15] work days) after eight (8) years of service  
(prorated at their number of hours scheduled to work)
3. Four (4) weeks (twenty [20] work days) after twenty (20) years of service  
(prorated at their number of hours scheduled to work)

Employees who have been employed by another agency in the State of Ohio *immediately prior to their employment* in the Mason City Schools shall receive credit for that service time towards eligibility for vacation days (in accordance with Ohio law).

## **HOLIDAYS & HOLIDAY PAY**

The following holidays are recognized by the District:

1. New Year's Day
2. Martin Luther King Day
3. Presidents' Day
4. Good Friday \*
5. Memorial Day
6. 4th of July \*
7. Labor Day
8. Thanksgiving Day
9. The Day After Thanksgiving Day\*
10. Christmas Eve\*
11. Christmas Day

*\* Paid holidays only for year-round (250-260 days) employees (37½-40 hours per week)*

In order to qualify for such holiday pay, employees need to have accrued full day earnings on the preceding and next scheduled work days.

If a holiday is observed while an employee is on sick leave, or other paid status, he/she will receive holiday pay and the day will not be charged against the leave.

When it is necessary to call employees who are paid an hourly wage to work on any of their scheduled paid holidays for the performance of emergency work, such employee shall be paid for the holiday, plus for all hours actually worked. The hours actually worked will be paid at the rate of one and one half (1½) times his/her rate of pay. (ORC 4111.03)

## **SEVERANCE PAY**

This payment shall be based upon the employee's rate of pay at retirement and shall eliminate all accrued and unused sick leave credit.

Separation pay shall be paid according to the calculation below to the beneficiary of a retirement-qualified employee who dies while actively employed with the District. Retirement-qualified shall mean an employee, who joined SERS prior to May 14, 2008, of any age, who has thirty (30) years of service or one who has at least twenty-five (25) years of service and is at least fifty-five (55) years of age. Employees who joined SERS on or after May 14, 2008 shall mean an employee who has 30 years of service and is at least fifty-five (55) years of age, or one who has at least 25 years of service and is at least sixty (60) years of age.

An employee retiring from active service with the Board after ten (10) or more full years of service with the Board shall be paid one-fourth ( $\frac{1}{4}$ ) the value of his/her accrued, but unused, sick leave credit, at the time of retirement through the School Employees' Retirement System, to a maximum of 60 days.

Despite the calculation established below, a classified employee who retires at the end of the school year in which he/she first reaches thirty (30) years of service credit under the School Employees Retirement System (SERS), shall be paid one-half ( $\frac{1}{2}$ ) the value of his/her accrued but unused sick leave accumulation.

An employee retiring from active service with the Board with less than ten (10) years of service with the Board shall be paid the following percentage of the formula set forth above:

- Five Years - 70%
- Six Years - 70%
- Seven Years - 70%
- Eight Years - 90%
- Nine Years - 90%

## **MAJOR MEDICAL/HOSPITALIZATION INSURANCE**

Hospitalization, including major medical, shall be available to all employees.

Coverage will begin, if requested, with the first of the month following first day of work for new employees.

The coverage will continue until one of the following conditions occur:

- (A) If an employee resigns during the contract year, his/her coverage will terminate on the next first day of the month at 12:00 midnight.
- (B) If the employee works a full contract year and resigns, his/her coverage will terminate on September 1<sup>st</sup> at 12:00 midnight.

An employee must notify the Treasurer's Office when any of the following things happen:

- (A) Marital status change;
- (B) Marriage of a dependent covered by the plan;
- (C) Death of spouse or dependent child;
- (D) Double coverage, for any reason, by the same company to which the board pays the hospitalization, surgical, and major medical insurance.

The Board shall pay:

- (A) One Hundred percent (100%) of the premium cost for single or family health insurance coverage for all classified employees who are scheduled to work 37.5 hours or more per week (Level 1).
- (B) Seventy-five percent (75%) of the premium cost of single or family coverage for health insurance coverage will be paid by the Board of Education for all classified employees who are scheduled to work between thirty (30) and thirty-seven (37) hours per week (Level 2).
- (C) Fifty percent (50%) of the premium cost of single or family coverage for health insurance coverage will be paid by the Board of Education for all classified employees who are scheduled to work between twenty (20) and twenty-nine (29) hours per week (Level 3).
- (D) The District has a High Deductible Health Plan. The Plan has a \$4,000.00 deductible for a Family plan and a \$2,000.00 deductible for the Single plan. Employees have the option to open a Health Savings Account or not with this HDHP.

**MAJOR MEDICAL/HOSPITALIZATION INSURANCE  
(concluded)**

- (E) The Board contributes to the employee's HSA account an amount according to the Level they are scheduled to work. The exact amount the Board will be contributing may be found on the back of the HSA sign up form. These amounts are divided and 50% is deposited on September 1<sup>st</sup> and the remaining 50% is deposited on March 1<sup>st</sup> of each plan year.
- (F) Bus Drivers actual hours worked are tracked and they are adjusted quarterly into the Level they averaged in the previous quarter.
- (G) If the Board elects to change insurance carriers, employees shall be notified at least sixty (60) days in advance. Any new insurance coverage shall not reduce the benefits available under the existing plan.
- (H) Each employee's share of the hospitalization premium shall be processed through an Internal Revenue Code, Section 125A Plan. Additionally, employees shall have the option to participate in a full or limited flexible benefit plan under IRC, Section 125. Full or limited plans are offered according to the employee's eligibility.

Employees who do not enroll in hospitalization at the time of the initial employment must wait for the August open enrollment period (coverage effective September 1<sup>st</sup>) or provide proof of loss of previous coverage (or qualifying event). It is the employee's responsibility to notify the Treasurer's Office and complete the necessary form(s) to add dependents, either through marriage, birth, or adoption.

## **SPOUSE COVERAGE**

- (A) When both the husband and wife are employees, either one family plan or two single plans shall be available. The type of policy shall be decided by the employees.
- (B) A classified employee's spouse who is eligible to receive health insurance coverage through his/her employer must enroll in such plan on at least a single enrollment basis.

A spouse is considered to be eligible for his/her employer's health insurance plan if:

- The access is continuous (i.e., non-seasonal) and reasonable group coverage is available, and
- The spouse works more than twenty (20) hours in an average work week, and
- The spouse is not required to pay more than 45% of the premiums.

When the spouse has enrolled in a health insurance plan maintained by his/her employer, coverage for the spouse under the Board provided plan shall be secondary coverage when the member carries a family plan.

The classified employee shall provide all information required to administer this provision through the enrollment form/process and completion of the coordination of benefits questionnaire distributed by the Board in August of each year. Failure to provide accurate information may result in the classified employee having to repay any claims paid to the Board's health insurance account.

- (C) A classified employee shall be reimbursed up to \$2,000 annually for the difference in net premium payments from that required of his/her spouse's employer and the premium amount required by the Board's plan.



## **DENTAL INSURANCE**

Dental insurance is available to each eligible employee.

Coverage offered by the District to qualified employees will be provided, if requested.

The coverage will continue until an employee resigns during the work year. His/her coverage will terminate on the last day of the month following the resignation at 12 midnight.

An employee must notify the Treasurer's Office when any of the following things happen:

1. Change in Marital Status
2. Marriage of a Dependent Covered by the Plan
3. Reach Age 65
4. Death of Spouse or Dependent Child
5. Double Coverage for Any Reason

One hundred percent (100%) of the cost of single or family coverage for dental insurance will be paid by the Board of Education for all classified employees scheduled to work 37 ½ or more hours/week (Level 1).

Seventy-five percent (75%) of the cost of single or family coverage for dental insurance will be paid by the Board of Education for all classified employees who are scheduled to work thirty (30) to thirty-seven (37) hours per week (Level 2).

Fifty percent (50%) of the cost of single or family coverage for dental insurance will be paid by the Board of Education for all classified employees who are scheduled to work twenty (20) to twenty-nine (29) hours per week (Level 3).

When both the husband and wife are employed, either one family plan or two single plans shall be available.

**DENTAL INSURANCE  
(Concluded)**

Current coverage includes the following:

1. Dental benefits are paid on a usual, customary, and reasonable basis.
2. Basic dental benefits are paid accordingly. See policy for specific details.
  - A. 100% - Preventative and diagnostic (deductible waived)
  - B. 80% - Oral surgery, restorative, endodontics and periodontics
  - C. 60% - Major restorative
  - D. 60% - Orthodontia
3. Deductible:
  - A. Single - \$25 per calendar year
  - B. Family - \$50 per calendar year
4. Basic dental maximum - \$1,500 per calendar year
5. Orthodontic maximum - \$2,500 (to age 19)

In the event a change is made in the dental insurance carrier, employees shall be notified at least sixty (60) days in advance.

**LIFE INSURANCE**

The District shall provide a life insurance policy in the amount of \$50,000 face value to each qualified classified worker at no charge to the classified employee.

## **OPTICAL INSURANCE**

Optical insurance is available to each eligible employee.

Coverage offered by the District to qualified employees will be provided upon request.

The coverage will continue until an employee resigns during the work year. His/her coverage will terminate on the last day of the month following the resignation at 12 midnight.

An employee must notify the Treasurer's Office when any of the following occurs:

1. Change in Marital Status
2. Marriage of a Dependent Covered by the Plan
3. Reach Age 65
4. Death of Spouse or Dependent Child
5. Double Coverage for Any Reason

One hundred percent (100%) of the cost of single or family coverage for optical insurance will be paid by the District for all classified employees scheduled to work 37 ½ or more hours/week (Level 1).

Seventy-five percent (75%) of the cost of single or family coverage for optical insurance will be paid by the District for all classified employees who are scheduled to work thirty (30) to thirty-seven (37) hours per week (Level 2).

Fifty percent (50%) of the cost of single or family coverage for optical insurance will be paid by the District for all classified employees who are scheduled to work twenty (20) to twenty-nine (29) hours per week (Level 3).

When both the husband and wife are employed, either one family plan or two single plans shall be available.

Current coverage includes the following:

Examination:	One exam in any 12-month period
Lenses:	One (pair) in any 12-month period
Frames:	One (pair) in any 24-month period
Deductible:	None

In the event a change is made in the optical insurance carrier, employees shall be notified at least sixty (60) days in advance.

## **COUNTRYSIDE YMCA**

Countryside YMCA, which is located in Lebanon, offers all employees of the District a reduced rate on membership if dues are paid through payroll deduction.

The rate is discounted fifteen percent (15%), with the deduction being split between the first and second pay of each month for twelve (12) months.

Annual membership enrollment at the discounted rate is accomplished by completing an enrollment card, which is available in the Treasurer's Office.

## **TAX SHELTERED ANNUITIES**

The Board of Education offers opportunities for classified staff to deduct earnings on a pre-tax basis for retirement or future financial planning.

A list of qualified companies may be obtained from the Treasurer's Office. A minimum of one percent of total staff is needed to add qualified shelter companies/agents to the existing list of qualified providers.

## **SECTION 125**

The employee's share of health/medical, dental, and optical insurance premiums may be sheltered from taxes through a Section 125 program.

Employees may purchase additional cancer, intensive care insurance, or choose to deposit money into an account for medical and dependent care expenses. These amounts will be sheltered if they are payroll deducted.

The option of sheltering must be made at the time of coverage enrollment. An employer representative will contact each employee annually concerning re-enrollment.

## **STUDENT TUITION CHARGE**

Any classified employee hired on or before September 5, 2006, who resides outside of the Mason City School District, may choose to enroll his/her children in the Mason City Schools. Attendance of an employee's child(ren) shall be free of tuition charges.

Any classified employee hired after September 5, 2006, who resides outside of the Mason City School District, may choose to enroll his/her child(ren) in the Mason City Schools free of tuition charge for up to two (2) school years. Following two years of attendance, if the employee continues to reside outside the Mason City School District, he/she shall pay the difference of the tuition cost (established by the Department of Education) and the state funding for the individual child. The child of the employee must be enrolled prior to the start of the school year. There is a charge for pre-school students.

**Mason City Schools**  
**CLASSIFIED STAFF HANDBOOK**

**C. Attendance**

<b>CA</b>	<b>Validation of Absence</b>
<b>CAA</b>	<b>Absence Procedures</b>
<b>CB</b>	<b>School Delays and Closings</b>
<b>CC</b>	<b>Use of Sick Leave</b>
<b>CC</b>	<b>Sick Leave - School Closings</b>
<b>CC</b>	<b>Adoption Leave</b>
<b>CCA</b>	<b>Granting Deficit Sick Days</b>
<b>CCA</b>	<b>Reporting Accumulated Sick Leave</b>
<b>CCA</b>	<b>Sick Leave Accumulation</b>
<b>CD</b>	<b>Personal Leave</b>
<b>CE</b>	<b>Professional Leave</b>
<b>CF</b>	<b>Child Rearing Leave</b>
<b>CG</b>	<b>Family and Medical Leave Act</b>
<b>CH</b>	<b>Assault Leave</b>
<b>CH</b>	<b>Leave of Absence</b>
<b>CI</b>	<b>Jury Duty/Court Appearances</b>
<b>CI</b>	<b>Loss of Salary for Absence</b>
<b>CI</b>	<b>Resignations</b>

## **VALIDATION OF ABSENCE**

No salary payment for days of absence shall be made to any employee except upon presentation to the Treasurer's Office of a completed Absence from Duty form, indicating the number of days and reason for the absence.

After two (2) days of consecutive absence due to illness or injury, the employee may be required to provide a doctor's certificate explaining the absence.

In the case of absence because of injury, surgery, or illness on the part of the employee of more than five (5) consecutive days, a signed statement of the attending physician or surgeon must be submitted covering the entire period of absence. If the employee is absent for ten (10) or more consecutive days, the attending physician or surgeon may certify the employee's ability to return to work.

The Superintendent may require a doctor's certificate for any absence.

An absent employee is expected to return to work the following day unless he/she contacts the immediate supervisor.

Employees who fail to follow prescribed procedures for absence may experience an unexcused absence and a related reduction in pay.

## ABSENCE PROCEDURES

The following directives are outlined below for the purpose of clarifying the procedures by which each job classification shall notify their building principal or immediate supervisor of their pending absence:

**Administrative Assistants** - Building principals and supervisors shall establish a plan of action according to the needs of their respective offices. In general, notification shall be given as soon as possible prior to the beginning of the work day.

**Para Professionals** - Copy, Media Center, Preschool, Intervention Specialists, Cafeteria/Playground/Recess - Building principals and/or supervisors shall be notified as soon as possible prior to the beginning of the assigned daily schedule.

**Health Services** - Building principal shall be notified as soon as possible prior to the beginning of the work day.

**Child Nutrition** - Kitchen Managers are to notify the Child Nutrition Supervisor twenty-four (24) hours in advance of any absence whenever possible. Child Nutrition Workers must notify the Supervisor by 7:00 a.m. on the day of any absence. *Part-time* Child Nutrition Workers must notify the Supervisor no later than 8:00 a.m.

**Extended Care/Daycare/Homework Club** - Directors and supervisors shall establish a plan of action according to the needs of their respective buildings. In general, notification shall be given as soon as possible prior to the beginning of the work day.

**Lab Tutors/Attendance Officers/Study Hall Monitors** - The building principal must be notified as soon as possible prior to the beginning of the assigned daily schedule.

**Transportation** – Sick Leave – Call in Procedures to Use:

1. A driver who is unable to drive his/her *morning run* should contact the Transportation Office at 513/229-4175 prior to 5:30 a.m. and leave a message on the voice mail of the Assistant Transportation Supervisor. The information should include your route number, and how long you will be off work. If unable to drive a *mid-day run*, the Transportation Supervisor or his/her designee should be notified by 8:00 a.m. Absence from an *afternoon run* must be reported to the Transportation Supervisor or his/her designee no later than 11:30 a.m. Drivers must call in each day they are absent.
2. Call 513/200-6128 **only** in the event that the other number is out of service.
3. When requesting time off due to sickness for midday or afternoon **you must see your supervisor for approval.**
4. Sign the Absence from Duty Form on your first day back to work.



**ABSENCE PROCEDURES  
(Concluded)**

**Employee Responsibility**

All employees have the responsibility to be on the job at the appointed time or to make the necessary arrangements for their absence.

Employees who are ill should follow the outlined procedures for notifying their building principal or direct supervisor of their absence.

## **SCHOOL DELAYS AND CLOSINGS**

In the event of severe weather conditions that cause schools to be closed, employees will be notified at the earliest possible time. Bus drivers and mechanics will be notified of delays and closings by Call Command.

The following procedure will be followed:

### **1 HOUR DELAY**

**All schools are delayed one hour.**

- All administrators, building administrative assistants and receptionists, and central office personnel are required to report to work. They are expected to be at work within at least one hour of the normal start time.
- Essential personnel report to work at their regularly scheduled time or as directed by their supervisor.

### **2 HOUR DELAY**

**All schools are delayed two hours.**

- All administrators, building administrative assistants and receptionists, and central office personnel are required to report to work. They are expected to be at work within at least two hours of the normal start time.
- Essential personnel report to work at their regularly scheduled time or as directed by their supervisor.

### **SCHOOL CANCELLATIONS**

**All schools closed.**

- All administrators, building administrative assistants and receptionists, and central office personnel are required to report to work. They are expected to be at work within at least two hours of the normal start time. If a staff member cannot make it into work, he or she must use a vacation or personal day to be paid for that day's absence.
- Essential personnel report to work at their regularly scheduled time or as directed by their supervisor.

### **LEVEL 3 EMERGENCY**

- All employees who are not able to come to work because there is a level 3 emergency in Mason City Schools, or the community they live in or travel through, will be compensated for a snow day.

**SCHOOL DELAYS AND CLOSINGS  
(concluded)**

- Essential personnel report to work at their regularly scheduled time or as directed by their supervisor.

**Time Cards**

- All time cards are to be filled out to reflect the actual time present with a separate notation for snow day time.
- \* *Essential business operations personnel are custodians, maintenance, grounds and HVAC staff. Others may be identified by their supervisor.*

## **USE OF SICK LEAVE**

Employees may use sick leave for absence due to illness, injury, exposure to contagious disease, or illness due to pregnancy. After delivery, a maximum of six (6) weeks of sick leave may be used. A birth mother may use a maximum of six (6) calendar weeks of sick leave and such weeks must be taken within the first six (6) consecutive calendar weeks immediately following the day of birth. If the birth is caesarian, the maximum shall be eight (8) calendar weeks. If additional time is needed, a doctor must provide a written statement indicating that additional sick leave is necessary.

A father may use sick leave for absence to aid in the recovery of his wife due to the delivery of his baby. He may use sick leave during any of the seven (7) calendar days immediately following the day of the birth. If the birth is caesarian, the father may use sick leave during any of the ten (10) calendar days immediately following the day of the birth. Additional days may be granted due to unusual circumstances.

Sick leave may be used for illness or death in the immediate family. Immediate family is defined as meaning: spouse, children, stepchildren, parents, parents-in-law, stepparents, or any person living in the same household as the employee.

Employees may use three (3) days of sick leave for absence due to serious illness or death of brothers, sisters, grandparents, grandparents-in-law, grandchildren, brothers-in-law, and sisters-in-law. Under extenuating circumstances, the Superintendent may grant additional days.

Employees may also use three (3) days of sick leave for absence due to the death of an aunt, uncle, niece, or nephew. Under extenuating circumstances, the Superintendent may grant additional days.

An employee in his/her probationary period is not eligible for advancement of sick leave during the first six (6) months of employment.

The use of sick leave for reasons other than those listed above is not permitted; and falsification of sick leave is grounds for suspension or termination of employment.

## **ADOPTION LEAVE**

Employees anticipating an adoption during the upcoming school year may reserve up to two (2) days of unused personal leave for the purpose of adoption. In order to reserve the unused personal leave days, an employee must submit a request in writing to the Assistant Superintendent of Human Resources by May 1<sup>st</sup> of the school year preceding the school year when the adoption is to occur. The request is only valid for one year.

At the time of adoption, an employee may use up to five (5) days of sick leave during the school year for the adoption of a child. Additionally, an employee may use his/her allotted three (3) personal leave days plus up to two (2) additional personal leave days which had been previously reserved for purpose of adoption by the employee.

## GRANTING DEFICIT SICK DAYS

If an employee is absent for a reason that is covered by sick leave before he/she has had sufficient time to accumulate a sick leave balance, or after the employee has exhausted his/her sick leave balance, a deficit of up to six (6) days will be debited against his/her anticipated accumulative sick leave. This enables an employee to avoid having his/her salary docked for the day(s) that he/she is absent.

In the event that an employee exhausts the deficit sick leave days granted above, if the employee absence from work is due to an injury, non-elective surgery, or serious illness occurring under unusual, severe, or emergency conditions, the Board will grant up to an additional six (6) days of deficit sick leave. Additional deficit sick leave shall not be granted for ordinary illness or for sickness of family members.

Should an employee leave the employment of the Board while owing deficit sick leave days, the Board shall have the right to retain from the employee's last paycheck(s) the value of such paid sick leave days. In the event that the remaining paychecks are insufficient to permit the Board a full recovery, the employee shall be responsible for full reimbursement to the Board.

An employee on probationary status (first twelve 12 months) is not eligible for advancement of sick leave during the first six (6) months of employment.

## REPORTING ACCUMULATED SICK LEAVE

The Treasurer's Office shall include a report of the employee's sick leave accumulation on each payroll check stub (or direct deposit notification), with the accumulative one and one quarter ( $1\frac{1}{4}$ ) days being reflected on the first paycheck of each month. Unused personal days converted to sick days shall be reflected by the second paycheck in July of each year.

## SICK LEAVE ACCUMULATION

**Sick Leave Accumulation.** All classified employees shall be entitled to fifteen (15) days of sick leave annually to be credited at the rate of  $1\frac{1}{4}$  days per month. The maximum accumulated sick leave for any classified employee shall be two hundred forty (240) days.

Employees working less than  $37\frac{1}{2}$  hours per week will have their sick leave accumulation adjusted in the event their assignment is increased to full time ( $37\frac{1}{2}$  or 40 hours per week).

EXAMPLE: An employee works twenty (20) hours per week for two (2) years. Sick leave accumulation would total 30 days.

The same employee takes a forty (40) hour per week job. His/her sick leave accumulation is adjusted to 15 days. (30 days total  $\div$  2 years).

## **PERSONAL LEAVE**

Up to three (3) days of personal leave shall be granted within each work year (July 1<sup>st</sup> - June 30<sup>th</sup>). Personal days may only be used for personal business that cannot be conducted at a time other than on a regular workday and during regular work hours. These days may be taken as full or as half days.

An employee in his/her probationary period is not eligible for personal leave during the first six (6) months he/she is employed.

Personal leave days do not accrue. Employees who end the work year with unused personal leave days shall have those days converted to sick leave on an equal basis.

Personal leave shall not be taken on or during:

1. The first ten (10) days of the school year;
2. The day immediately following or preceding a holiday or other break, unless approved by the Superintendent, Assistant Superintendent of Human Resources, or designee;
3. Fridays or Mondays from May 1<sup>st</sup> through the last day of school for students. (Applicable only for employees with less than a 12-month contract).

Exceptions to above include:

1. Emergencies beyond the control of the employee;
2. Graduations of self, parent, spouse, child, sibling, or grandchild;
3. Weddings;
4. Religious Observance;
5. Other extenuating circumstances as approved by the Superintendent, Assistant Superintendent of Human Resources, or designee.

Unpaid days may not be used immediately before and/or after a personal leave day unless approved by the Superintendent or Assistant Superintendent of Human Resources or designee.

An application for such leave shall be made to the immediate supervisor at least two (2) days in advance of the leave day or days. Emergency conditions may prevent the possibility of advance notice; in such instances appropriate forms will be completed upon return to duty.

Under extreme extenuating circumstances, and/or for religious observance, the Superintendent or the Assistant Superintendent of Human Resources may grant additional days of personal leave.

## **PROFESSIONAL LEAVE**

Classified staff employees are an integral part of the District's total staff. Training and development are essential to the efficient and economical operation of the schools.

Therefore, all classified staff employees shall be encouraged to grow in job skills and to take additional training that will improve their skills on the job.

It shall be the responsibility of all building principals and supervisors to assist to the maximum degree in the training of classified staff assigned to their buildings.

Absences to attend meetings, conventions, conferences, or workshops of local, state, or national associations which serve to advance the welfare of the district through the upgrading and strengthening of the classified service may be granted by the Superintendent without loss of pay to the employee.

When an employee attends a professional workshop or meeting that was pre-approved by his/her supervisor or by an administrator, the employee's expenses will be reimbursed in full upon presentation of detailed receipts and documentation acceptable to the Treasurer.

This Professional Leave Policy does not apply to sessions required for an employee's job-specific recertification.



## **CHILD REARING LEAVE**

Child rearing leave for a newly born or newly adopted child shall be granted for up to twelve (12) consecutive months without pay. Extensions may be granted at the discretion of the Board. The twelve (12) months shall commence immediately following the expiration of sick leave, in accordance with the statutory law of Ohio.

Pregnant employees shall submit written notice to the Assistant Superintendent of Human Resources on the approved Leave of Absence form no later than thirty (30) days prior to the anticipated date of the employee's last work day, advising the Assistant Superintendent of Human Resources of the date that this leave is to begin and the anticipated date of return.

The thirty (30) day notification will be waived in the case of adoption. However, the employee will provide a written notice, advising of the anticipated date of return.

Upon the return of the employee from an approved leave of absence, the employee shall return to a position for which the employee is qualified *within the same job classification*.

The Board recognizes that the granting of unpaid child rearing leave does not preclude an employee from also exercising his/her statutory rights to sick leave for maternity leave in accordance with the statutory law of Ohio.

The Board and the employee shall continue paying his/her shares of any insurance premiums in which the Board participates for the first twelve (12) weeks of child rearing leave per the Family and Medical Leave Act. If the employee's leave extends beyond twelve (12) weeks, he/she shall assume full premium payment for the remainder of the leave.

Maternity leave, child rearing leave, and leave taken under the Family and Medical Leave Act shall run concurrently.

## **FAMILY AND MEDICAL LEAVE ACT**

The FMLA requires covered employers to provide up to twelve (12) weeks of unpaid, job-protected leave to “eligible” employees for certain family and medical reasons.

Employees are eligible if they have worked for a covered employer for at least one year, and for 1,250 hours over the previous twelve months, and if there are at least fifty (50) employees within seventy-five (75) miles.

Unpaid leave must be granted for any of the following reasons:

- For incapacity due to pregnancy, prenatal medical care, or child birth;
- To care for the employee’s child after birth, or placement for adoption or foster care;
- To care for the employee’s spouse, son or daughter, or parent, who has a serious health condition; or
- For a serious health condition that makes the employee unable to perform the employee’s job.
- Because of any qualifying exigency (as the US Department of Labor shall, by regulation, determine) arising out of the fact that the spouse, or a son, daughter, or parent of the employee is on active duty (or has been notified of an impending call or order to active duty) in the Armed Forces in support of a contingency operation.

FMLA time will be used concurrently with sick time.

For additional information on the Family Medical Leave Act, visit: 1-866-4US-WAGE (1-866-487-9243) TTY: 1-877-889-5627 WWW.WAGEHOUR.DOL.GOV

## **ASSAULT LEAVE**

The District may grant up to a maximum of ten (10) days assault leave to any employee who is absent due to physical disability from an assault which occurs in the course of District employment. Such employee will be maintained on full pay status during the period of such absence and such leave shall not be charged against the employee's earned or earnable sick leave.

The District shall require an employee to furnish a signed statement on forms provided by the District to justify the use of assault leave. A certificate from a licensed physician, stating the nature of the disability and its duration, shall be submitted to the Assistant Superintendent of Human Resources before assault leave can be approved.

Under extremely unusual circumstances involving serious injury, the ten (10) day limitation may be extended with District approval.

Any employee applying for assault leave shall cooperate with the law enforcement agencies. The District shall provide the employee with release time necessary to cooperate with said agencies.

## **LEAVE OF ABSENCE**

Normally, granting of a leave of absence will be considered only for the following reasons:

- Illness or Disability
- Service in the Armed Forces

Except for service in the Armed Forces, a leave of absence will be granted for only one year upon recommendation of the Assistant Superintendent of Human Resources to the Superintendent and approval by the Board of Education. It may not be renewed unless, in the judgment of the Superintendent, there are compelling reasons for such renewal and evidence that the interests of the school district will not suffer. Such renewal must be approved by the Board of Education.

When an employee has been absent due to personal illness or injury for a continuous period and sick leave is exhausted, the Superintendent shall investigate the case and make a recommendation to the Board of Education as to whether or not that employee should be given an unrequested leave of absence.

In such circumstances, the employee is entitled to a hearing before the Board of Education (ORC 3319.081).

## **JURY DUTY/COURT APPEARANCES**

When an employee is called for jury duty, he/she must provide proper notice to the building principal or supervisor. (Please refer to **CD Personal Leave**)

If an employee is subpoenaed as a witness as a result of his/her employment with the district, or is involved in court action as a result of his/her employment with the district (other than as a plaintiff), he/she must provide proper notice to the building principal or supervisor. (Please refer to **CD Personal Leave**)

Should continued absence for jury duty be required, the employee shall notify their direct supervisor of their status on a daily basis.

The District will pay the employee his/her regular per diem pay.

The employee shall surrender to the Treasurer's Office any payment received as a result of such duty. It is the responsibility of the employee to collect for his/her court services.

Court responsibilities not a result of an employee's employment with the district require the use of personal days or unpaid leave if no personal days are available.

## **LOSS OF SALARY FOR ABSENCE**

Unexcused absence on the part of any employee shall result in the loss of salary. A day's salary shall be calculated by dividing the annual wages by the number of days in the employee's work year.

Such unexcused absence by an employee will be cause for disciplinary action which may include a suspension of from one (1) to ten (10) days or termination of employment.

Written notification of the District's action to terminate employment must be provided by certified mail. Under Ohio law and Section 6.11 of the City Charter, the employee has ten (10) days after the receipt of the notice to file a written appeal with the Personnel Review Board of the City of Mason.

## **RESIGNATIONS**

Resignations must be submitted, *in writing*, to the building principal or supervisor who will forward the document to the Assistant Superintendent of Human Resources.

The resignation of any employee whose appointment was confirmed by the District shall be referred to the Board of Education for action.

In the event the employee is on spread pay, he/she will be advised of any salary adjustments, as well as vacation and sick leave balances.

Final pay will not be released to the employee until the Separation Form has been completed and signed by the employee and the supervisor/designee. If the employee is in possession of a uniform or any other Mason City Schools property, this property must be returned before final pay will be released.

**Mason City Schools**  
**CLASSIFIED STAFF HANDBOOK**

**D. Performance & Evaluation**

**DA Employee Job Classifications**

**DB Recruitment, Selection & Appointment**

**DC Personnel Records**

**DC Examination of Personnel Records**

**DD Supervision and Evaluation of Job Performance**

**DDA Process of Evaluation**

**DDB Assigned Uniforms & Equipment**

**DDB Unsatisfactory Job Performance**

## **EMPLOYEE JOB CLASSIFICATIONS**

Although the purpose of the school is instruction, it is readily recognized that instruction is impossible without the assistance and cooperation of many people. The operation of a school system is an intricate and complicated proposition, and no part of the system can operate effectively unless each of the other facets is functioning properly. Each job in a school system is important because the entire system is affected by it and depends upon it.

The Superintendent/designee(s) shall be responsible for the selection and evaluation of all employees and for making recommendations to the Board of Education for their appointment, reemployment, or dismissal.

The non-union employees of the district shall be employed in accordance with Sections 124 and 3319 of the Ohio Revised Code (ORC). Section 7.07 of the Charter of the City of Mason creates and establishes the Personnel Review Board. In accordance with law, the Personnel Review Board shall act in the role of Civil Service Commission for the District. The Personnel Review Board is the third step in the review process of an appeal made by non-union employees.

Employee job classifications have been established by the District for non-union employees as follows:

- Administrative Assistants
- Para Professionals
- Accountants
- Technology
- Health Services
- Child Nutrition
- Transportation
- Daycare/Extended Care
- Salaried Employees
- Facility Rental
- Other

## **RECRUITMENT, SELECTION & APPOINTMENT**

Employment practices are established to give equal opportunity to any person with respect to hiring, tenure, terms, conditions, and privileges of employment. No inquiry in regard to sex, race, handicap, color, religion, national origin, or ancestry shall be made of any person proposed for or seeking employment in any capacity in the District, except as required or permitted by law.

Applications for classified positions will be completed online at [masonohioschools.com](http://masonohioschools.com).

Falsification of any statement in an application shall be considered dishonesty and sufficient cause for disqualification or removal from service.

The Superintendent/designee(s) shall recommend to the Board persons for:

- Initial Employment
- Reinstatements
- Suspensions
- Removals
- Layoffs
- Reductions in Force

Those recommendations shall be in accordance with the Administrative Rules and Regulations of the Personnel Review Board of the City of Mason and/or the Policy Manual of the Mason Board of Education.

Whenever a vacancy occurs, the building principal or department supervisor shall make a request to the Assistant Superintendent of Human Resources for either a replacement of an existing position or for a new position. The request must include the proposed job title and other data describing the duties and responsibilities of the position, location, immediate supervisor, qualifications as required to perform the job, and whether the position is to be filled permanently or temporarily on a full-time or part-time basis.

Appointments to positions will be filled with the most qualified applicants.

Temporary appointments are made to fill vacancies when regular employees are ill for a prolonged period of time or off duty on an approved leave of absence. Persons are selected on an “as needed” basis to serve as substitute workers or as extra help to relieve heavy workloads.

Seasonal positions will be filled by appointments based upon the recommendation of the supervisor or director in whose department the need exists.



## **PERSONNEL RECORDS**

The Assistant Superintendent of Human Resources' Office shall maintain a personnel file for each classified employee, active and inactive. The file may include, but shall not be limited to:

- Application
- Pre-Employment Physical Examination Form (when applicable)
- Salary Information
- Work Hours
- Work Schedule
- Location
- Probationary & Evaluation Forms
- Certificates, Permits, Licenses (as applicable to the position held)
- Attendance Records
- Commendations
- Complaints
- Written Telephone Memoranda
- Discipline Letters
- Suspension Letters
- Termination Letters

## **EXAMINATION OF PERSONNEL RECORDS**

Upon advance request, employees shall have the right to view the contents of their personnel file. All contents of the file shall be available for viewing, except pre-employment information.

The District reserves the right to charge for copies of materials in the file (with the exception of pre-employment information). The Assistant Superintendent of Human Resources, his/her designee(s), or the principal must be present during the viewing of the personnel file.

## **SUPERVISION AND EVALUATION OF JOB PERFORMANCE**

The primary purpose of an effective evaluation program is to improve job performances by identifying the strengths and weaknesses of each employee and to provide a basis for administrative decisions concerning the retention, promotion, or demotion of each employee.

The Assistant Superintendent of Human Resources shall plan and implement the evaluation program for the classified staff. This evaluation plan shall be approved by the Superintendent.

Written observations and recommendations will provide the basis for an informal and formal interview with the employee being evaluated. Employee evaluations will be filed in the personnel file in the office of the Assistant Superintendent of Human Resources.

Employees shall be retained on the basis of a satisfactory job performance. Written recommendations to improve an unsatisfactory job performance will be made by the building principal or the immediate supervisor. Probationary and regular employees who cannot or will not improve an unsatisfactory job performance will be subject to disciplinary suspension, including removal.

### **Types of Evaluation**

The performance evaluation will be used for three different types of evaluations: probationary, annual, and special.

1. **Probationary** - Each classified employee shall serve a probationary period of one year following the original appointment. During this probationary period each employee may be evaluated at any time. During an employee's probationary period, the immediate supervisor should conduct a minimum of one appraisal conference during the first six (6) months. This appraisal conference may or may not result in a written performance appraisal. At the end of the probationary period, the building principal or supervisor will make a recommendation for continued employment or to discontinue employment.
2. **Annual** - Classified employees are evaluated during each of their first two years in the district. Thereafter, classified employees are to be evaluated a minimum of once every three years. Supervisors, however, may evaluate employees annually.
3. **Special** – A formal evaluation should be held immediately if an employee's performance warrants discipline or dismissal, and this should be documented on the evaluation form. The evaluation will be shared with the employee during a conference. A written recommendation to terminate their employment should be attached to the original evaluation form, then forwarded to the Superintendent. The procedure can take place any time during the school year.

## **SUPERVISION AND EVALUATION OF JOB PERFORMANCE (Concluded)**

### **Evaluation Procedures**

The following procedures are in accordance with Policy GDN and GDN-R of the Board Policy Manual. These policies refer to the "continuing program of performance evaluation for the classified staff." The program will include written evaluations and a means of making the results of such evaluations known to the employees.

This "continuing program" is outlined below:

1. All regular classified employees will be evaluated annually during their first two years of employment; once every three years, thereafter.
2. The supervisor will assess the employee on the basis of work performance and abilities.
3. Evaluation forms used shall be appropriate to the employee's position.
4. Evaluation forms shall be written in ink, typewritten, or computer generated. (No pencil).
5. An additional narrative report may be written if the building principal or supervisor feels it is warranted.
6. The building principal or supervisor shall also submit his/her recommendation regarding continued employment of the employee.
7. After completing the evaluation form, the building principal or supervisor will conduct a conference with the employee to discuss:
  - A. the reasons for the performance evaluation; and
  - B. the areas in which work performance should be improved.
8. The building principal or supervisor and employee shall sign the evaluation form at the close of the conference and distribute copies to the following:
  - Central Office/Personnel Folder
  - Employee
  - Principal's or Supervisor's File
9. Original evaluation forms are sent to the Assistant Superintendent of Human Resources at the Central Office no later than May 30<sup>th</sup> for review and placement in the employee's personnel file.

## **PROCESS OF EVALUATION**

The administrator, building principal, director, supervisor, or designee has the primary responsibility for evaluating all classified employees under his/her supervision. Those responsibilities include:

- Observations
- Documentation
- Evaluation Conference

Each employee shall be advised of the purpose of the evaluation and how their names fit into the evaluation schedule.

Evaluation of personnel is an on-going, day-to-day process which should enable the administrator, building principal, directors, or supervisors to make factual observations and recommendations.

Observations of the employee's job performance should be included in the formal written evaluation. The formal evaluation should include all aspects of the employee's job performance with appropriate indications on the form; and contain recommendations, as well as factual statements that present an accurate description of the employee's job performance.

The evaluation conference shall be set at a convenient place and time, allowing adequate discussion of the employee's job performance. The conference should also allow the employee to explain his/her position relative to his/her job assignment. A friendly and honest interchange between the employee and the evaluator is essential to reach a mutual understanding of his/her job performance. This is the time to share preventative or corrective measures to assist in the improvement of job performance. Reinforcement of good behavior and recognition of good work provide positive feedback in the evaluation process.

Facts that affect the job assignment will be discussed in the conference in an effort to assist the employee in a continual pattern of growth and improvement. The evaluation conference shall also serve as a time to explain the overall goals of the district and how such goals relate to the employee. Classified employees are a contributing part of an outstanding school system.

The evaluation conference provides the employee the occasion to discuss any problems concerning day-to-day duties or activities as well as his/her personal growth or career opportunities.

The conference shall conclude with the evaluator and the employee signing the evaluation form, signifying that the documents have been read and the conference held. The employee has the right and must be given the opportunity to react to the report either orally or in writing within fourteen (14) calendar days. The employee's written statement will be attached to all copies of the evaluation.

Following the evaluation conference, the employee will receive a copy of the completed, signed form. A copy will be retained by the supervisor. The signed original will be sent to the Assistant Superintendent of Human Resources for review and then filed in the employee's personnel file.

## **ASSIGNED UNIFORMS & EQUIPMENT**

Since employees are representatives of the school district, certain classified job assignments require wearing specific uniforms. Employees are expected to wear their uniforms at all times when performing their duties, including weekends, holidays, or any other additional hours worked.

Each regular employee who is required to do so will be provided five (5) changes of uniform, by the school district at no charge. Laundry and maintenance are the responsibility of the employee.

- Child Nutrition – Shirts, Pants, and Caps or Hair Nets
- Transportation Mechanics – Shirts, Pants, and Jacket

A photo ID/name badge will be worn during working hours.

Footwear shall conform to OSHA standards.

Other specialized uniform components (jackets, aprons, promotional wear, etc.) or small equipment (masks, goggles, and latex gloves) shall be worn at the direction of the employee's direct supervisor or manager.

Failure to conform to the uniform requirement could result in the following disciplinary action being taken:

- First Violation - Verbal/Written Warning
- Second Violation - One Hour Off *without pay* to go home and change into uniform
- Third Violation - Four Hours Off *without pay* to go home and change into uniform
- Fourth Violation - Sent Home during Employee's Entire Assigned Shift *without pay*
- Fifth Violation - Dismissal

## **UNSATISFACTORY JOB PERFORMANCE**

In the event an employee's job performance is unsatisfactory, such employee will be notified and written recommendations to improve the employee's job performance shall be made by the building principal or immediate supervisor. Such written recommendations need not be given in instances where the building principal or the immediate supervisor determines such recommendations are unlikely to raise the employee's performance to a satisfactory level. Probationary or regular employees who cannot or will not improve an unsatisfactory job performance will be subject to disciplinary action, up to and including suspension and removal.

**Mason City Schools**  
**CLASSIFIED STAFF HANDBOOK**

**E. Reduction, Suspension & Removal**

- EA Written Notice**
- EA Disciplinary Suspension**
- EA Removal or Discharge**
- EB Procedure for Disciplinary Action, Suspension, or  
Removal of an Unsatisfactory Employee**
- EB Reduction in Force**
- EC Layoff**
- ED Transfers**
- EE Reinstatement**

## **WRITTEN NOTICE**

The tenure of each employee of the District is incumbent upon his/her good behavior and efficient service. No such employee shall be reduced in pay or position, suspended, or removed, except for incompetency, inefficiency, dishonesty, drunkenness, immoral conduct, insubordination, discourteous treatment of the public, neglect of duty, violation of the Personnel Review Board, or any other failure of good behavior, or any other acts of misfeasance, malfeasance, or nonfeasance in office.

This does not limit the District's right to layoff or reduce employees in pay or position due to lack of work, lack of funds, abolishment of positions, or other valid reasons as determined by the District.

In the case of reduction or suspension for more than five (5) days, or removal, the Assistant Superintendent or the Superintendent/designee shall furnish such employee with a copy of the order of reduction, suspension, or removal which shall state the reason(s) for action. Such order shall be filed with the Personnel Review Board of the City of Mason.

## **DISCIPLINARY SUSPENSION**

A classified employee may be suspended without the right of appeal, and without pay, for a period not to exceed five (5) working days for disciplinary purposes.

Notice of disciplinary suspension must be in writing with reasons stated for the suspension and will become a part of the employee's personnel record.

## **REMOVAL OR DISCHARGE**

A discharged employee of the District shall be served within a reasonable time with a written order of removal.

1. The order shall contain one or more statutory reasons for grounds for removal together with such specifications of facts as shall place the person fairly upon defense.
2. A copy of such order of removal must be filed with the Superintendent/designee and Personnel Review Board of the City of Mason.

## PROCEDURE FOR DISCIPLINARY ACTION, SUSPENSION, OR REMOVAL OF AN UNSATISFACTORY EMPLOYEE

All employees are members of a team working together for the education of our youth. By accepting the position, they accept the responsibilities to carry out the duties in an efficient manner.

No employee will be reduced in pay or position, suspended, or removed, except for incompetence, inefficiency, dishonesty, drunkenness, immoral conduct, insubordination, discourteous treatment of the public, neglect of duty, or any failure of good behavior, or any other acts of misfeasance, malfeasance, or nonfeasance in office.

Procedures used are to aid the school administrator, director, or supervisor in carrying out his/her duties and responsibilities. The process allows for due process for the employee and is in keeping with Board policy, as well as the rules and regulations of the Personnel Review Board of the City of Mason.

The authority to initiate or take disciplinary action, short of suspension and termination, is designated to the Superintendent, Assistant Superintendent, Treasurer, Principals, Directors, and Supervisors.

The Assistant Superintendent(s), Superintendent, and Treasurer shall have the sole authority to suspend an employee.

The Board of Education shall have the sole authority to terminate an employee.

## REDUCTION IN FORCE

Reduction in the number of classified staff members in the District shall be accomplished in accordance with the Administrative Rules and Regulations of the Personnel Review Board of the City of Mason.

### 1. Methods of Reduction

- A. Attrition - Employees who retire or resign may make further reductions unnecessary.
- B. Layoff - If the need to reduce classified staff cannot be met by attrition, seasonal employees shall be laid off first, and probationary (within the first 12 months of employment) shall be next to be laid off.

Thereafter, the least efficient of the regular employees, in the opinion of the administrator, director, or supervisor, shall be laid off after due consideration of merit ratings.



## LAYOFF

### 1. **Layoff Process**

Layoffs shall occur in the following order:

- A. Seasonal employees
- B. Probationary employees (within the first 12 months of employment)
- C. Least efficient of the regular employees  
(in the opinion of the administrator, director, or supervisor, based upon merit ratings)

### 2. **Layoffs May Occur Due to:**

- A. Lack of work
- B. Lack of funds
- C. Abolishment of position(s)

### 3. **Notification of Intent to Reduce Staff**

When staff reduction is necessary, the Superintendent shall give written notice to the affected employees as soon as possible. Such notification shall include:

- A. The reasons for the reduction/layoff;
- B. A list of the positions to be eliminated;
- C. A list of employees affected.

### 4. **Recall List - Establishment of Layoff Lists**

The names of persons holding classified positions which have been abolished or made unnecessary shall be placed on an appropriate "layoff" list in order of their original date of employment for a period not to exceed one (1) year. When discontinued positions are reestablished by the District, former employees of the departments in question who have been laid off and whose names appear on the "layoff" list shall be first to be considered for employment.

## **TRANSFERS**

The Superintendent has full authority to assign or reassign classified employees as he/she deems appropriate.

There are two types of transfers of classified employees:

- Voluntary
- Involuntary

### **Voluntary Transfers**

Requests for transfers shall be made in writing to the Superintendent/designee. The request shall state the reason for the requested transfer, the position sought, and any other supporting information that would help in making a decision.

Should an employee bid on, and receive, a new position, that employee is not eligible to bid on another position for 12 months from the acceptance date, unless extenuating circumstances warrant approval of the Supervisor.

The Superintendent/designee(s) will give full consideration to employees who apply for said positions. Candidates will be chosen on the basis of meritorious performance, potential for effectiveness, and experience. Seniority shall not be used solely as the basis for promotions or transfers.

### **Involuntary Transfers**

Administration may initiate a change in job assignment when it is deemed appropriate for the welfare of the school district.

The immediate supervisor will meet with the classified employee being transferred involuntarily to discuss the reasons for the transfer.

## **REINSTATEMENT**

Any regular employee who has resigned without delinquency may be reinstated by the District at any time provided there are no former employees of the department who have been laid off and whose names appear on the eligibility list for the classification or department.

If in the event an employee is reinstated, he/she shall forfeit any and all seniority privileges which may have accrued as a result of the prior period of service. Such seniority privileges may include, but are not limited to, vacations, longevity pay, bumping privileges, or any other privilege.

Any exception to this rule shall be made only with the approval of the Superintendent upon a determination that there exists a particular need for such exception. Any exceptions made shall be on a case by case basis.

**Mason City Schools**  
**CLASSIFIED STAFF HANDBOOK**

**F. Forms -- SAMPLES**

<b>MCS-501</b>	<b>Absence from Duty</b>
<b>MCS-502</b>	<b>(Request for) Leave of Absence</b>
<b>MCS-503</b>	<b>(Request to) Attend Professional Meeting</b>
<b>MCS-504</b>	<b>Personal Leave Request</b>
<b>MCS-505</b>	<b>Employee Incident Report</b>
<b>MCS-507</b>	<b>Change of Address</b>
<b>MCS-508</b>	<b>Vacation Request</b>
<b>MCS-510</b>	<b>Separation (Resignation, Retirement, Non-Renewal &amp; Termination)</b>
<b>MCS-530</b>	<b>Grievance Form – Step I</b>
<b>MCS-531</b>	<b>Grievance Form – Step II</b>
<b>MCS-532</b>	<b>Grievance Form – Step III</b>
<b>MCS-540</b>	<b>Performance Appraisal - Administrative Assistants</b>
<b>MCS-541</b>	<b>Performance Appraisal - Non-Union Classified Employees</b>
<b>MCS-606</b>	<b>Monthly Mileage Form</b>

## Mason City Schools Absence From Duty Form

Employee's Name: \_\_\_\_\_ Bldg: \_\_\_\_\_

**-- REASON FOR USE OF LEAVE --**

1. SICK LEAVE (see explanation on back)

Personal Illness / Injury (A)

Illness or Death in Immediate Family (B)

        Relationship: \_\_\_\_\_

Illness or Death of Other (C & D)

        Relationship: \_\_\_\_\_

2. PERSONAL LEAVE

6. ASSOCIATION LEAVE

3. PROFESSIONAL LEAVE

7. ASSAULT LEAVE

4. JURY DUTY

8. VACATION LEAVE

5. DOCK / UNPAID

If more than five (5) days of sick leave was taken, please provide the following information:

Name of Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Total number of days on leave: \_\_\_\_\_ days

List Dates Absent: \_\_\_\_\_

Approved

\_\_\_\_\_  
Signature of Employee

Not Approved

\_\_\_\_\_  
Signature of Principal / Supervisor

---

**Mason City Schools**  
**Request for**  
**LEAVE OF ABSENCE**

When an Employee will be off duty for an extended period of time (more than two weeks) because of illness, pregnancy, graduate study, etc., the employee should apply for a leave of absence. The Assistant Superintendent for Human Resources shall review the request and make a recommendation to the Board of Education for approval or disapproval.

Name \_\_\_\_\_

Building/Dept. \_\_\_\_\_ Job Assignment \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone Number \_\_\_\_\_

I am applying for:

\_\_\_\_\_ Maternity Leave  
(Up to 30 work days for normal delivery; 40 work days for caesarean, or until the end of the school year – whichever occurs first)

\_\_\_\_\_ I plan to use accumulated sick leave days.

\_\_\_\_\_ Unpaid Leave

\_\_\_\_\_ Child Rearing Leave (unpaid leave)

\_\_\_\_\_ Family & Medical Leave Act (FMLA) – (please give brief description)

\_\_\_\_\_ Personal \_\_\_\_\_

\_\_\_\_\_ Family Member \_\_\_\_\_

\_\_\_\_\_ Graduate Study

\_\_\_\_\_ Other (please give brief description) \_\_\_\_\_

Day/Date You Would Begin Leave of Absence \_\_\_\_\_

Day/Date You Will Return to Work \_\_\_\_\_

Leave of Absence is  APPROVED  
 DISAPPROVED

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Assistant Superintendent for Human Resources

Send Copies of Completed Form with Two Signatures to: EMPLOYEE ASST. SUPT. FOR HUMAN RESOURCES TREASURER'S OFFICE

**MASON CITY SCHOOLS**

**REQUEST TO ATTEND PROFESSIONAL MEETING**

**TO BE COMPLETED BY EMPLOYEE**

Name(s) \_\_\_\_\_ Date of Request \_\_\_\_\_

A Substitute \_\_\_\_\_ will be needed \_\_\_\_\_ will not be needed, to be paid for from \_\_\_\_\_ account

Amount of time substitute will be needed for: (e.g. full day, half day, # of hours) \_\_\_\_\_

Date of Meeting \_\_\_\_\_ Sponsor of Meeting \_\_\_\_\_

Short Description of Meeting/How aligned with district/building goals (continue on reverse if needed):  
\_\_\_\_\_  
\_\_\_\_\_

Estimated Expenses:	
Lodging	_____
Meals	_____
Travel	_____
Registration Fees	_____
Other	_____
TOTAL	_____
Maximum Reimbursement has been restricted to this amount _____	

Check One:
<input type="checkbox"/> Teacher Initiated
<input type="checkbox"/> Administrative Directed

A Purchase Order for all expenses MUST be processed after approval and before event. A Request for Reimbursement/Travel Expense Report should be filed following the event.

Original and detail receipts, copy of this form and Blue Copy of Purchase Order must be attached to Reimbursement Form to be processed for payment.

Account Number to be Charged:
# _____ - _____ - _____ - _____ - _____ - _____ - _____ - _____
Account Title:

**TO BE COMPLETED BY PRINCIPAL or SUPERVISOR**

RECOMMENDS

DOES NOT RECOMMEND

\_\_\_\_\_  
Signature of Principal/Supervisor

**TO BE COMPLETED BY ASSISTANT SUPERINTENDENT/CFO/CIO**

APPROVES

DISAPPROVES

\_\_\_\_\_  
Signature of Assistant Superintendent/CFO/CIO

REMARKS:



**MASON CITY SCHOOLS  
PERSONAL LEAVE REQUEST FORM**

The undersigned is hereby making application for the use of personal leave as provided in the Ohio Revised Code 3319.142 and the Collective Bargaining Agreement.

**TO BE COMPLETED BY EMPLOYEE**

Date Submitted: \_\_\_\_\_

Print Name: \_\_\_\_\_

Building: \_\_\_\_\_

I hereby request personal leave for \_\_\_\_\_  
Date(s)

**I certify that this request is in compliance with the Collective Bargaining Agreement, and/or the Handbook for Classified Employees, and/or Ohio Revised Code, and does not exceed a total of three personal days; is not being used the day immediately following or preceding a holiday or other break; is not being used immediately before or immediately after an unpaid work day; and**

- a) not on the last student day of the school year;
- b) not during the first ten days of the school year; and
- c) not on a Monday or Friday that falls from May 1<sup>st</sup> until the last day of school for students.

\_\_\_\_\_  
Signature of Employee

**TO BE COMPLETED BY PRINCIPAL OR SUPERVISOR**

APPROVED

This request for Personal leave is

DISAPPROVED

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Principal or Supervisor

**FOLLOW-UP BY BUILDING SECRETARY**

Copy of signed form returned to staff member on this date: \_\_\_\_\_



**MASON CITY SCHOOLS**

**EMPLOYEE INCIDENT REPORT**

(To be completed within 24 hours and sent to the Asst. Superintendent of Human Resources)

**EMPLOYEE'S REPORT:**

Date of Injury \_\_\_\_\_ Time \_\_\_\_\_ a.m. \_\_\_\_\_ p.m.

Date Reported \_\_\_\_\_ Time \_\_\_\_\_ a.m. \_\_\_\_\_ p.m.

Employee's Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

Home Address \_\_\_\_\_ Home Phone: \_\_\_\_\_

Building \_\_\_\_\_ Position \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Gender (check one):  Male  Female

To whom was the injury reported? \_\_\_\_\_

Description of the injury (be specific - name any objects or substances involved) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Part(s) of body injured \_\_\_\_\_

Name(s) of witness(es) \_\_\_\_\_

Was any medical or emergency treatment necessary? \_\_\_\_\_

If so, state name of physician and/or hospital \_\_\_\_\_

Is this an aggravation of a previous injury? \_\_\_\_\_

Have you ever had a similar injury? \_\_\_\_\_

Lost time from work (estimated) \_\_\_\_\_ days \_\_\_\_\_ hours None \_\_\_\_\_

By signing this form, I expressly waive all provisions of law which forbid any person or persons who heretofore did or who hereafter may medically attend, treat or examine me or who may have information of any kind which may be used to render a decision in my claim for injury/disease of \_\_\_\_\_, 20\_\_\_\_ from disclosing such knowledge to my employer. A copy of this form will serve same as original.

Date \_\_\_\_\_ Employee's Signature \_\_\_\_\_

Employee's Name (PRINT) \_\_\_\_\_

**SUPERVISOR'S REPORT:**

Remarks and/or exceptions to Employee's Report:

\_\_\_\_\_  
Supervisor's Signature is verification that the validity and completeness of the above statement has been checked.

\_\_\_\_\_  
Date

**CHANGE OF ADDRESS FORM**

It is the **EMPLOYEE’S RESPONSIBILITY** to notify their immediate supervisor (Building Principal, Cafeteria Manager, Director of Maintenance/Transportation, Treasurer, Asst. Supt. or Supt.) **IN WRITING** of any change (or correction/clarification) in their name, address, or phone number.

Please make your supervisor aware of this change, then complete the following information and forward to the **TREASURER’S OFFICE**.

Employee Name: \_\_\_\_\_

Building Assignment: \_\_\_\_\_

CHANGE ADDRESS TO: \_\_\_\_\_

\_\_\_\_\_

CHANGE PHONE NUMBER TO: \_\_\_\_\_

CHANGE NAME TO: \_\_\_\_\_

Effective Date: \_\_\_\_\_

School District You Live In: \_\_\_\_\_

-----

Previous Address: \_\_\_\_\_

\_\_\_\_\_

Previous Phone: \_\_\_\_\_

-----

SPECIAL NOTES: \_\_\_\_\_

\_\_\_\_\_

-----

Employee Signature \_\_\_\_\_ Date Completed: \_\_\_\_\_

**Mason City Schools**  
**VACATION REQUEST FORM**

Classified and Administrative employees are eligible for vacation, according to their years of service or their contract. Each employee shall request the days to be used as vacation as early as possible each calendar year (Classified-January) or each contract year (Administrative-August). The Principal or Supervisor shall review the request and approve the final vacation schedule.

Name \_\_\_\_\_

Building/Dept. \_\_\_\_\_ Job Assignment \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone Number \_\_\_\_\_

I am eligible for \_\_\_\_\_ vacation days and would like to use my days on the following dates (MM/DD):

_____ Day 1	_____ Day 6	_____ Day 11	_____ Day 16
_____ Day 2	_____ Day 7	_____ Day 12	_____ Day 17
_____ Day 3	_____ Day 8	_____ Day 13	_____ Day 18
_____ Day 4	_____ Day 9	_____ Day 14	_____ Day 19
_____ Day 5	_____ Day 10	_____ Day 15	_____ Day 20

\_\_\_\_\_  
Signature of Employee

---

Reviewed / Recommended by Principal / Supervisor

Approved as Requested

Changes Need to Be Made  
to Accommodate Bldg. Schedule

Disapproved

\_\_\_\_\_  
Signature of Principal / Supervisor

Send Copies of Completed Form with Two Signatures to: EMPLOYEE PRINCIPAL / SUPERVISOR

MASON CITY SCHOOLS  
**SEPARATION FORM**

*(To Be Completed By All Staff Members Leaving Employment Positions)*

Name \_\_\_\_\_ Date Submitted \_\_\_\_\_  
Last Name First Name Middle Name

Address \_\_\_\_\_  
Street City State Zip

Phone Number \_\_\_\_\_

Building Assignment \_\_\_\_\_ Position(s) \_\_\_\_\_

**SEPARATION REASON**

- Resignation
- Retirement
- Non-renewal
- Termination

Effective Date \_\_\_\_\_

Reason \_\_\_\_\_

**LAST DAY WORKED**

\_\_\_\_\_ Day \_\_\_\_\_ Month / Day / Year

\_\_\_\_\_  
Assistant Superintendent for Human Resources

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Signature of Verifying Administrator/Supervisor

**CENTRAL OFFICE USE**

Date Received \_\_\_\_\_

Date of Board Action \_\_\_\_\_

- Original Date of Employment \_\_\_\_\_
- Date Sent to Payroll \_\_\_\_\_
- Date of Last Paycheck \_\_\_\_\_
- Date COBRA Letter Mailed \_\_\_\_\_
- Sick Leave Balance \_\_\_\_\_
- Vacation Qualified \_\_\_\_\_

- Pull Personnel Folder
- Remove from Employee Database
- Date Insurance Coverage Ceases \_\_\_\_\_
- COBRA:  Enrolled  Declined

Please Type or Print

SPECIAL NOTES:

**MASON CITY SCHOOLS**  
**GRIEVANCE FORM**

**Step I – Principal/Supervisor**

Name of Grievant \_\_\_\_\_ Date \_\_\_\_\_

Assignment \_\_\_\_\_ Building \_\_\_\_\_

Statement of Grievance \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Relief Sought \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Request Hearing with Supervisor: \_\_\_\_\_ Yes \_\_\_\_\_ No

Signature of Grievant \_\_\_\_\_

.....

Hearing Date \_\_\_\_\_  
(within 7 days after receipt of grievance)

Step I Response (within 7 days after hearing):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Supervisor \_\_\_\_\_ Date \_\_\_\_\_

cc: Grievant  
Principal/Supervisor  
Superintendent

**MASON CITY SCHOOLS**  
**GRIEVANCE FORM**

**Step II – Assistant Superintendent**

The purpose of this form is to appeal the grievance to Level II, Assistant Superintendent.

Date of Written Appeal \_\_\_\_\_  
(filed within 7 days of receipt of decision of Step I)

Attach a completed copy of Grievance Form, Step I.

Request Hearing with the **Assistant Superintendent**:    \_\_\_ Yes    \_\_\_ No

Signature of Grievant \_\_\_\_\_

.....

Hearing Date \_\_\_\_\_

Step II Response  
(within 7 days after receipt of grievance or within 7 days after requested hearing)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Assistant Superintendent

\_\_\_\_\_  
Date

- cc: Grievant
- Principal/Supervisor
- Assistant Superintendent
- Superintendent

**MASON CITY SCHOOLS**  
**GRIEVANCE FORM**

**Step III – Superintendent**

**The purpose of this form is to appeal the grievance to Step III, Superintendent.**

**Appeal shall be sent to the Superintendent.**

Date of Written Appeal \_\_\_\_\_  
(filed within 7 days of receipt of decision of Step II)

**Attach completed copies of Step I and Step II Grievance Forms.**

Signature of Grievant \_\_\_\_\_

.....

MASON CITY SCHOOLS

**Performance Appraisal for Administrative Assistants**

Name:

Assignment:

Location:

Appraisal Period: From

Through

\*\*\*\*\*

**Directions:**

**Explanation of rating scale:**

**EXCELLENT** – when performance is outstanding

**GOOD** – when performance is entirely satisfactory and adequate for the requirements of the position.

**FAIR** – when performance is not quite the quality expected of the position, but not entirely unsatisfactory. An explanatory comment should be made for each fair rating.

**UNSATISFACTORY** – when performance is definitely inadequate for the position. An explanatory comment must be made for each unsatisfactory rating.

Comments for Excellent and Good are optional.

**NO DATA** – in cases where information is not available or the question does not apply.

Descriptive statements include under some of the general evaluation items should be considered as guidelines only. Your own comments must serve to clarify and give specific meaning or emphasis in individual cases.



**I. TELEPHONE SKILLS**                      **U**        **F**        **G**        **E**        **No Data**

- Answers phone promptly.
- Uses prescribed wording to answer and transfer calls.
- Enthusiasm, eagerness to assist, and a smile is evident in the voice at all times.
- Consistently conveys an “I can... I will” attitude.

Evaluator’s Comments:

**II. TECHNOLOGICAL SKILLS**                      **U**        **F**        **G**        **E**        **No Data**

- Maintains effective working knowledge if technology used in the job.
- Takes an initiative to expand working knowledge in the technology field.

Evaluator’s Comments:

**III. ACCOUNTING SKILLS**

**U**

**F**

**G**

**E**

**No Data**

- Maintains all bookkeeping, recordkeeping, filing and other pertinent tasks effectively.

Evaluator's Comments:

**IV. PUBLIC RELATIONS SKILLS**

**U**

**F**

**G**

**E**

**No Data**

- Consistently maintains awareness of how important the first impression is.
- Acknowledges customers immediately.
- Always furnishes sufficient, timely and accurate information or resources to assist the customer.
- Adheres to all guidelines in the customer service manual.

Evaluator's Comments:

V. **PROBLEM SOLVING SKILLS**                  U                  F                  G                  E                  No Data

- Is able to identify a problem and provide a solution to such.
- Takes initiative to make suggestions for improved efficiency.
- Performs well with minimum supervision.

Evaluator's Comments:

VI. **INVESTMENT**    U                  F                  G                  E                  No Data

- Takes ownership and shows pride in work.
- Reports to work regularly and promptly.
- Is committed to doing more than just the minimum.
- Satisfaction comes from the response of the customer rather than the performance of the administrative assistant.

Evaluator's Comments:

**SUMMARY COMMENTS**

\_\_\_\_\_  
Signature of Evaluator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Administrative Assistant Being Evaluated

\_\_\_\_\_  
Date

Absence: _____	Days
Sick: _____	
Personal: _____	
Dock: _____	

**MASON CITY SCHOOLS**  
**PERFORMANCE REPORT**  
**Non-Union Classified Employees**

Name _____ For Period Ending _____						
Position _____ School _____ Due Date _____						
<b>PERFORMANCE FACTORS – APPRAISALS CHECKED (✓)</b>	U	NI	A	AA	O	NA
U – Unsatisfactory      NI – Needs Improvement      A – Average AA – Above Average      O – Outstanding      NA – Not Applicable						
1. <b>ATTENDANCE / DEPENDABILITY</b> – Faithfulness in daily attendance & conforming to work hours						
2. <b>JOB KNOWLEDGE</b> – Information concerning work duties which an individual should know for successful job performance						
3. <b>INITIATIVE / DRIVE</b> – Going beyond the “call of duty;” enthusiasm for job						
4. <b>ATTITUDE</b> – Willingness to meet job requirements and accept suggestions; loyalty						
5. <b>QUANTITY OF WORK</b> – Amount of work the individual accomplishes in a work day						
6. <b>RELATIONSHIPS WITH PEOPLE</b> – Ability to get along with others; ethical conduct; relations with other employees						
7. <b>QUALITY OF WORK</b> – Ability to do job well with a minimum of supervision and meets attendance standards above						
8. <b>PERSONAL FITNESS</b> – Emotional stability, physical condition, appearance and personal habits						
9. <b>INVITATIONAL QUALITY</b> – Responds to students and the public in a cordial and enthusiastic manner						

**COMMENTS:** Comments will help support appraisals. Explain any “UNSATISFACTORY” or “OUTSTANDING” performance factors.  
Use the reverse side or add attachments if necessary.

**OVERALL APPRAISAL:**

(should reflect the above information)

UNSATISFACTORY	NEEDS IMPROVEMENT	AVERAGE	ABOVE AVERAGE	OUTSTANDING

Appraiser: \_\_\_\_\_ Position \_\_\_\_\_ Date \_\_\_\_\_

Employee: \_\_\_\_\_ Position \_\_\_\_\_ Date \_\_\_\_\_

Reviewed by \_\_\_\_\_ Position \_\_\_\_\_ Date \_\_\_\_\_

MASON CITY SCHOOLS  
MONTHLY MILEAGE FORM

Employee: \_\_\_\_\_

Building / Department: \_\_\_\_\_

- Mileage shall be paid to employees who are required to travel from building to building or to make other trips as part of their regular duties.
- Employees shall turn in mileage at the end of each month in order to receive reimbursement.
- Use the mileage chart on back to determine the number of miles driven between schools.

Month: \_\_\_\_\_

Year: \_\_\_\_\_

Date	To	From	Reason for Travel	Mileage
TOTAL MILEAGE				

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Signature of Principal / Supervisor

**CENTRAL OFFICE ONLY**

Total Mileage \_\_\_\_\_ X \_\_\_\_\_ per mile = \$ \_\_\_\_\_

Pay from Budget Account: \_\_\_\_\_

MILEAGE CHART

**Mason Central / ECC to:**

High School.....	1.3
Mason Middle & Intermediate.....	1.3
Western Row.....	3.0
Mason Heights.....	1.6

**Western Row School to:**

Mason Central / ECC .....	3.0
High School.....	2.3
Mason Middle & Intermediate.....	1.8
Mason Heights.....	3.9

**Mason High School to:**

Mason Central / ECC.....	1.3
Mason Middle & Intermediate.....	0.7
Western Row.....	2.3
Mason Heights.....	2.1

**Mason Heights School to:**

Mason Central / ECC .....	1.6
High School.....	2.1
Mason Middle & Intermediate.....	2.4
Western Row.....	3.9

**Middle & Intermediate to:**

Mason Central / ECC.....	1.3
High School.....	0.7
Western Row.....	1.8
Mason Heights.....	2.4

**Round trips:**

All Buildings.....	8.8
Scarlet Oaks.....	19.0

**MILEAGE MAY VARY DUE TO DETOURS**