

### REDUCTION-IN-STAFF: LICENSED EMPLOYEES

DP327 NEG states: "In the event of declining enrollment, the discontinuance or substantial reduction of a particular service or program, the shortage of anticipated revenue, school consolidation, or other unforeseen circumstances, it may become necessary to initiate a RIS"

School Name: \_\_\_\_\_

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

#### **Reason(s) for Declaring RIS**

Check all that apply (*not employee-specific*):

- Declining Program or school enrollment
- Reduction/loss of service or program
- Reduction/loss of funding
- School Consolidation i.e. new school or boundary change- (circle one or identify reason)
- Other (Please explain): \_\_\_\_\_

Explain why your school/department will have a RIS: \_\_\_\_\_

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*The attached documentation constitutes only suggestions and recommendations. These suggestions should not be construed as constituting any additional employee rights or imposing any additional obligations on the Jordan School District.*

Principal's Signature: \_\_\_\_\_

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

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**RIS Recommendation**

I am requesting the following licensed employee be declared a Reduction in Staff (RIS) :

Employee Name: \_\_\_\_\_ SS# XXX-XX-\_\_\_\_\_

License Information:

ARL     ATP-Special Ed     Level 1     Level 2     Level 3

List Endorsements: \_\_\_\_\_  
\_\_\_\_\_

Clearly explain why this teacher was determined to be a RIS. *\*If you have other licensed employees who exhibits similar performance, clearly explain why you have chosen this teacher:* \_\_\_\_\_

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**Check all that apply and attach documentation (REQUIRED):**

Teachers on probation **can not** be a RIS

- Employee Evaluation (JPAS or Interim)
- Mentor teacher assignment (if applicable)
- Consulting educator assignment (if applicable)
- Remediation strategies suggested/implemented (if applicable)
- Signed letters(s) of concern and/or reprimand (if applicable)
- Statement if another reason: \_\_\_\_\_  
\_\_\_\_\_

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RIS Approved     RIS Denied    Area Administrator Signature \_\_\_\_\_    Date \_\_\_\_\_

RIS Approved     RIS Denied    H.R. Administrator Signature \_\_\_\_\_    Date \_\_\_\_\_