

## PROVISO AREA FOR EXCEPTIONAL CHILDREN

We are pleased to have you as one of our staff members at Proviso Area for Exceptional Children (PAEC). We view our employees as being valuable assets in providing special education services to those children in need. We hope you enjoy the challenge of being part of a team that keeps PAEC functioning smoothly and effectively.

You may have many questions about your job and your role at PAEC. Your principal/supervisor can explain most of the specifics about your job and exactly what is expected of you. We have prepared this handbook for you to answer some of the more common questions of concern to most employees.

This handbook will answer your questions about what we do, how we do it, and what we expect from all of our employees. We suggest you take time now to read through this handbook. If you have any specific questions that you do not find the answers to here, please ask your principal/supervisor. We also suggest you keep this handbook at your desk, so you can refer to it any time you have a question or problem.

The information contained in this handbook does not comprise all of the policies of the PAEC Governing Board. Employees should also consult the PAEC Policy Manual for additional PAEC Governing Board policies.

We spend a great deal of time and effort finding and hiring people who have the skills and abilities to adequately perform a specific job. We do our best to make sure there is a match between your capabilities and the work you need to accomplish for us.

***However, it should be noted that the information in this employee handbook is not to be considered in any way a contract of employment. Only written agreements expressly approved and authorized for signature by the Governing Board may be construed as creating contractual rights. Employees shall have no expectations of contractual rights other than those set forth in their respective contracts.***

Again, we are pleased to have you on the staff at PAEC. It is only through quality personnel that we have been able to continue our excellent programs for exceptional children since 1957.

PROVISO AREA FOR EXCEPTIONAL CHILDREN

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## HISTORY OF PAEC

The Proviso Area for Exceptional Children was formed in July of 1957. (The PAEC Center Building, consisting of A, B, and C Pods, was built in 1971, with D Pod being added in 1973/74. The PAEC Education Center Building, located next door to PAEC Center, was built in 1998.) Recognizing at that time a need to supply more comprehensive services for exceptional children than any single district could realistically provide, Proviso Township's six (6) elementary school districts and one (1) high school district united to form a special education cooperative, now technically known as "Illinois Special Education Joint Agreement #803". There are currently five (5) elementary school districts and one (1) high school district in the PAEC Cooperative.

The first PAEC classrooms were opened in 1958 and served 82 students at that time. Since then the program has grown to provide a continuum of services which assures each special child an educational program that is appropriate and meets the child's individual needs. The continuum reflects the principle of providing service for each child in that child's least restrictive environment--that which presents the optimal potential for success.

The continuum features consultative services, itinerant/resource services, self-contained classrooms in the regular education public school, self-contained classrooms in a public special education building, and private placement. The placement of students, determined through screening and evaluation as eligible for special education services, is done in accordance with Illinois State Board of Education requirements and PAEC policy. Each child's program is reviewed annually to assure its appropriateness.

PAEC's relationship to its member, or cooperating, school districts is to assist in the identification and servicing of special education students. Although some of the PAEC operations are handled "independently", PAEC is most properly viewed as a branch of the total educational services provided by the school districts that comprise its structure. PAEC cannot exist or function apart from its cooperating districts.

## ORGANIZATION OF PAEC

At the top of the PAEC organizational chart are the residents of the cooperating school districts who elect their respective school board members. The PAEC Governing Board is made up of one elected school board member from each of these six districts.

PAEC is managed by an Executive Director, who is employed by the Governing Board. The Executive Director's primary function is to implement Board policies and facilitate appropriate educational programs. The Governing Board and Executive Director have an Executive Board consisting of the six school district Superintendents.

## EDUCATIONAL MISSION STATEMENT

The mission of PAEC is to provide quality evidence-based programs and services to general and special education students ages 3 to 22 and their families across the PAEC Cooperative. The ultimate goal is to facilitate growth and development for students to achieve priority long-term outcomes and to insure the welfare and human dignity of all students.

The following are PAEC Organization goals that support the PAEC Mission Statement:

To expand and enhance quality social-emotional and behavior interventions within the PAEC Cooperative.

To expand and enhance data management systems in order to support evidence-based practices.

To expand and enhance quality academic interventions within the PAEC Cooperative.

To expand and enhance effective transition planning and post-secondary outcomes.

To improve effective delivery of instruction and services across all educational disciplines.

To improve the health, life safety, and security of all within the designated PAEC facilities.

Continue quality extracurricular programs/activities to positively engage students outside regular school session including: the HOTSTUFF After-School and Summer Programs, Special Olympics, Veteran's Park/PAEC Center After-School Program and CAAEL Athletic League.

Enhance business operations to facilitate cost savings and support programs and services.

## ABSENCE NOTIFICATION

### A. PAEC Central Office Staff

Contact the Central Office receptionist or leave a message on the voice mail (450-2100), and inform your designated work location. You must clearly state your name, your position and reason for your absence. If you have scheduled work appointments, make whatever arrangements are necessary as a result of your absence.

### All PAEC Programs:

#### A. Classroom Teachers and Program Assistants

Contact the PAEC Absence Coordinator (email and phone number listed below) no later than 6:00 a.m. the day of, or before the day of the absence. You must clearly state your first and last name, your position, building location, and reason for your absence. Please state if you are a 1:1 Program Assistant and include the name of the student.

Email: [paecsub@paec803.org](mailto:paecsub@paec803.org)

Text/Call: 708-203-5688

#### B. Principals, Assistant Principals, Supervisors, Social Workers, Psychologists, Speech/Language Therapists, Occupational Therapists, Physical Therapists, Vocational Coordinators

Contact the Central Office receptionist or leave a message on the voice mail (708-450-2100) and inform your designated work location. You must clearly state your name, your position and reason for your absence.

Staff may be required to also leave a text/voice mail or e-mail message for their immediate supervisor as per their instructions.

#### C. School Secretaries

Contact the Central Office receptionist or leave a message on the voice mail (450-2100), and contact your principal/assistant principal to inform them of your absence. You must clearly state your name, your position and reason for your absence. If you have scheduled work appointments, make whatever arrangements are necessary as a result of your absence.

NOTES: (1) When staff call in to say they are *not* coming to work, they ***MUST*** state the reason for their absence (i.e., sick; bereavement; or personal/vacation days which have been pre-approved). Call-ins which *do not* offer an explanation from staff for their absence will be considered unapproved days off and result in disciplinary action.

(2) If you need to leave work for personal reasons at any time during the day, contact your principal/supervisor to explain the reason. If your supervisor is not available, contact the school secretary (Central Office staff should contact the Central Office receptionist). If you are a teacher or program assistant, please contact the school

secretary and the PAEC Absence Coordinator.

### ABUSED AND NEGLECTED CHILD REPORTING

A PAEC employee who has reasonable cause to suspect that a student may be an abused or neglected child shall, as required by law, immediately report such case to the Illinois Department of Children and Family Services (DCFS). Traditional considerations of confidentiality shall not constitute grounds for failure to report such cases.

The employee shall notify the building principal/immediate supervisor that a report has been made to DCFS. The principal/supervisor will then notify the Assistant Director and/or Executive Director. The Executive Director or any other PAEC administrator may not, in any instance, change any report of child abuse or neglect made by an employee to DCFS or make any attempt to interfere in the making of a report to DCFS.



## ALCOHOL AND DRUG FREE WORKPLACE (PAEC Policy 500.45)

All PAEC workplaces shall be free from drugs and alcohol. All employees shall be prohibited from:

- 1) the unlawful manufacture, distribution, dispensation, possession, use or being under the influence of a controlled substance while on PAEC premises, performing work for PAEC, or as part of any PAEC activities; and
- 2) the distribution, consumption, possession of or being under the influence of alcohol while on PAEC premises, performing work for PAEC, or as part of any PAEC activities.

For purposes of this policy a controlled substance is:

- 1) a drug which is not legally obtainable; or
- 2) a legally obtainable drug which is abused by the employee (i.e., being used in a manner different than prescribed or by an individual for whom the drug was not prescribed).

As a condition of employment, all employees shall:

- a) abide by the terms of this policy; and
- b) agree to notify their supervisor of a conviction of any criminal drug statute for a violation occurring on PAEC premises, performing work for PAEC, or as part of any PAEC activities, no later than five (5) days after such a conviction. For the purposes of this notice requirement, a conviction includes a plea of guilty, a finding of guilt, a no contest plea, and/or an imposition of sentence by any judicial body for any violation of a criminal statute involving the unlawful manufacture, distribution, dispensation, possession, or use of drugs in the workplace.

In order to make employees aware of dangers of drug and alcohol abuse, PAEC shall:

- 1) provide each employee each school year with a copy of the PAEC Drug and Alcohol Free Work Place Policy;
- 2) post notice of the PAEC Drug and Alcohol Free Work Place Policy in a place where other information for employees is posted;
- 3) make available materials from local, state and national anti-drug and alcohol abuse organizations;
- 4) notify employees of any available drug and alcohol counseling and rehabilitation and re-entry programs in the community.

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## ALCOHOL AND DRUG FREE WORKPLACE (Continued)

### PAEC Action Upon Violation of Policy

An employee who violates the terms of this policy may be subjected to disciplinary action, up to and including termination and referral for prosecution:

PAEC shall take disciplinary action with respect to an employee convicted of a drug offense in the workplace within thirty (30) days after receiving notice of the conviction.

Alternatively, PAEC may require an employee who violates the terms of this policy to satisfactorily participate in a drug or alcohol abuse assistance or rehabilitation program which has been approved by the Board.

Where PAEC is a current participant in a federal education program in which PAEC is the prime grantee and receives federal funds, the Executive Director shall notify the appropriate federal agency from which PAEC receives grant monies of the employee conviction within ten (10) days after receiving notice of the conviction.

### Review

PAEC shall conduct a biennial review of this policy to determine its effectiveness and implement changes to this policy and program if necessary, and ensure that the sanctions required by this policy are consistently enforced.

LEG. REF.: Drug-Free Workplace Act of 1988, (41 U.S.C. Sec. 701, et seq.)  
Drug-Free Schools and Communities Act of 1986, (20 U.S.C. Sec. 3171, et seq.)  
Drug-Free Schools and Communities Act Amendments of 1989 (P.L. 101-226)

## ATTENDANCE RECOGNITION

PAEC staff are recognized annually, at the beginning of each school year, for their achievements, longevity service at PAEC, and attendance recognition for the previous fiscal year.

Employees who have completed five (5), ten (10), fifteen (15), twenty (20), twenty-five (25), thirty (30), and thirty-five (35) years of service at PAEC are awarded a gift in recognition of their long and loyal service.

An employee shall be awarded one of the following attendance incentives to be paid to the employee by the end of August following each school year:

### Number of Sick Days Used

0 to 0.5	\$400.00
1.0 to 2.5	\$200.00
3.0 to 4.5	\$100.00

NOTE: To be eligible, staff members must be employed within the first five (5) working days of their respective work year. Donations to the sick and bereavement leave pool shall not be considered used sick leave for the purpose of the attendance incentive.

## BARGAINING UNIT CONTRACT

Employees covered by the PAEC Bargaining Unit Contract (Teachers and Program Assistants) shall be provided with a copy of the current contract upon employment. Other employees may request a copy of the contract from the Human Resources Coordinator.

CELL PHONE USE (Personal)

Personal calls and/or other communications should be made before or after work hours, during lunch or break periods, with the exception of an emergency. Personal calls should not be made on PAEC telephones.

## CERTIFICATE/LICENSURE/REGISTRATION RENEWAL

It is the employees' financial responsibility to renew their certificates, licensures and/or registrations, as required and submit written documentation to PAEC (copy from ISBE website).

PAEC will notify the employees when this process needs to be done.

## CONFERENCES

If you wish to attend a conference, seminar or professional meeting, your request should be submitted to your principal/immediate supervisor on PAEC Form 313 (Request to Attend a Conference or Professional Meeting). Complete the top portion of the form, and be as accurate as possible in estimating the conference expenses.

If approved, the original copy of the form will be returned to you. After the conference or meeting, complete the bottom portion of the form and attach the necessary receipts and bills to it. Submit the form to your principal/immediate supervisor for approval of the actual expenses incurred. The form should then be forwarded to the Accounts Payable Office for payment to you.

Out-of-state conference requests must be approved by your principal/immediate supervisor, by the PAEC Executive Director and then by the PAEC Governing Board prior to the conference attendance date(s). The Governing Board normally meets on the third Thursday of every month, so the conference request should be submitted for consideration to your principal/immediate supervisor at least a month prior to that Board meeting.

## DRESS CODE

All employees shall maintain professional appearance in a manner that is not disruptive, distracting, unsafe, unhealthy to other staff, to students, or others present on the school grounds during the employee's work day. "Disruptive" or "distracting" includes clothing that reveals or tightly outlines male or female body parts.

PAEC staff must follow the Dress Code of the District where they are assigned on a daily basis (i.e., the District Dress Code where the employee is assigned supersedes the PAEC Dress Code).<sup>1</sup>

### CLOTHING: Appropriate clothing and footwear must be neat, clean, and without holes

- Men must wear shirts with collars.
- Pants must be worn at the waist.
- Shorts must be worn at knee length or longer.
- Leggings may be worn; however, a covering must be worn to mid-thigh or longer.
- Dresses and skirts must be worn at knee length or longer.
- Shoes must be fully closed with heels two inches or less. Athletic foot wear is permitted.
  
- **The following items are NOT PERMITTED:**
  - Sweatpants (*Physical Education Teachers are allowed to wear sweatpants*).
  - Wind pants (*Physical Education Teachers are allowed to wear wind pants*).
  - Denim (of any color) pants, shorts, capris, or skirts.
  - T-Shirts.
  - Sports jerseys.
  - Bare midriffs.
  - Uncovered tank style tops.
  - Sleeveless shirts/blouses (*short or cap sleeves are permissible*).
  - Text or photos on any clothing items.
  - Outdoor coats, jackets and other outerwear.
  - Hats, sweatbands, sunglasses, and/or other headgear (*except for established religious purposes or documented medical reasons*).
  - Hooded shirts, sweatshirts and sweaters.
  - Visible body piercings (*other than the ears*).
  - Other items of clothing, jewelry, hairstyles, and/or footwear that are disruptive, distracting, unsafe, or unhealthy.

### ELECTRONIC DEVICES: Personal electronic devices cannot be worn or used during work hours

- **Exception:** These items may be used during breaks outside of the classroom setting in designated areas.

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<sup>1</sup> If an employee normally assigned to a District site is re-assigned to PAEC during the workday, the employee's adherence to the District's dress code will suffice for the remainder of the day. However, employees are encouraged to consider removing or changing clothing which may present a safety risk, such as dangling earrings or open-toed shoes. The PAEC Executive Director may agree with a District Superintendent or Principal to modifications of the District dress code for PAEC employees that are necessary for the instruction or supervision of PAEC program students.



*Administrative Staff has discretion to permit periodic deviations from the Dress Code Policy for field trips, themed school days, and/or other school activities. Such deviations shall be provided in writing.*

## EMERGENCY SCHOOL CLOSINGS

### PAEC Buildings:

In the event of an emergency school closing, "phone trees" have been developed in every PAEC operated building. You will be called at home by a staff member and you, in turn, will be responsible for calling another staff member.

Emergency Closings will be posted on the PAEC Website ([www.paec803.org](http://www.paec803.org)) located on the Home Page, listed on the banner at the top of the screen.

The following radio and television stations have been designated to provide emergency PAEC closing information to the general public:

#### AM Radio Stations

WBBM - 780

WGN - 720

#### Television Stations

CBS - Channel 2

NBC - Channel 5

ABC - Channel 7

WGN - Channel 9

FOX - Channel 32

CLTV - (Cable station)

You may also obtain information from the Emergency Closing website:

[www.emergencyclosings.com](http://www.emergencyclosings.com)

### Non-PAEC Buildings:

You will follow the emergency school closing procedures for the school building and district in which you are working.

### NOTE:

The automated emergency phone system will also be activated to contact employees and parents.

## EQUAL EMPLOYMENT

The PAEC Governing Board will comply with all federal and state statutes, laws, rules, and regulations which prohibit discrimination in the employment of personnel or in the provision of programs, services, activities, or benefits, on the basis of race, color, religion, national origin, ancestry, age, sex, marital status, mental or physical disability, unfavorable discharge from military service, or any other unlawful basis.

## EVALUATION

Your job performance will be evaluated by your immediate supervisor according to approved evaluation procedure.

## FAMILY AND MEDICAL LEAVE ACT OF 1993 (FMLA)

FMLA requires covered employers to provide up to twelve (12) weeks of unpaid, job-protected leave, in a one year period, 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 (12) months, and if there are at least 50 employees within 75 miles. The method used by PAEC in determining the "twelve (12) month" period in which employees are entitled to their twelve (12) weeks of leave, is measured backwards from the date the leave is used. Any leave taken in the prior twelve (12) months is considered part of the twelve (12) week FMLA leave. Any period of incapacity requiring absence from work of more than three (3) calendar days that involve continuing treatment by a health provider may also be considered part of the FMLA leave. For additional information, contact the PAEC Human Resources Office or your immediate supervisor.

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

- 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 (not a parent "in law," who has a serious health condition; or
- for a serious health condition that makes the employee unable to perform the employee's job.

"Serious health condition" means an illness, injury, impairment, or physical or mental condition that involves either:

- Any period of incapacity or treatment connected with inpatient care (i.e., an overnight stay) in a hospital, hospice, or residential medical-care facility, and any period of incapacity or subsequent treatment in connection with such inpatient care; **or**
- Continuing treatment by a health care provider which includes any period of incapacity (i.e., inability to work, attend school or perform other regular daily activities) due to:
  - a) A health condition (including treatment therefore, or recovery therefrom) lasting more than three (3) consecutive days, and any subsequent treatment or period of incapacity relating to the same condition, that **also** includes:
    - Treatment two or more times by or under the supervision of a health care provider; **or**
    - One treatment by a health care provider with a continuing regimen of treatment; **or**
  - b) Pregnancy or prenatal care. A visit to the health care provider is not necessary for each absence; **or**
  - c) A chronic serious health condition which continues over an extended period of time, requires periodic visits to a health care provider, and may involve occasional episodes of incapacity (e.g., asthma, diabetes). A visit to a health care provider is not necessary for each absence; **or**

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## FAMILY AND MEDICAL LEAVE ACT OF 1993 (FMLA) (Continued)

- d) A permanent or long-term condition for which treatment may not be effective (e.g., Alzheimer's, a severe stroke, terminal cancer). Only supervision by a health care provider is required, rather than active treatment; **or**
- e) Any absences to receive multiple treatment for restorative surgery or for a condition which would likely result in a period of incapacity of more than three (3) days if not treated (e.g., chemotherapy or radiation treatments for cancer).

### **“Health care provider”** means:

- Doctors of medicine or osteopathy authorized to practice medicine or surgery by the state in which the doctors practice; **or**
- Podiatrists, dentists, clinical psychologists, optometrists and chiropractors (limited to manual manipulation of the spine to correct a subluxation as demonstrated by X-ray to exist) authorized to practice, and performing within the scope of their practice, under state law; **or**
- Nurse practitioners, nurse-midwives and clinical social workers authorized to practice, and performing within the scope of their practice, as defined under state law, **or**
- Christian Science practitioners listed with the First Church of Christ, Scientist in Boston, Massachusetts; **or**
- Any health care provider recognized by the employer or the employer's group health plan benefits manager.

At the employee's or employer's option, certain kinds of paid leave such as sick, personal or vacation days, may be substituted for unpaid leave to cover some or all of the leave. The employer is responsible for designating if an employee's use of paid leave counts as FMLA leave based on information from the employee.

Leave may be taken all at once or on an intermittent or reduced schedule basis, but employers are not required to grant intermittent leave or reduced schedules in cases involving the birth or adoption of a child. The employee is required to provide a 30-day advance leave notice (unless an emergency) and medical certification from health care provider. Taking of leave may be denied or delayed if these requirements are not met.

- The employee ordinarily must provide thirty (30) days notice when the leave is "foreseeable."
- An employer may require medical certification to support a request for leave because of a serious health condition, and may require second or third opinions (at the employer's expense) and a fitness for duty report to return to work. Periodic reports during FMLA leave regarding the employee's status and intent to return to work may also be required.

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## FAMILY AND MEDICAL LEAVE ACT OF 1993 (FMLA) (Continued)

The following are some job benefits and protection features of the Act:

- For the duration of FMLA leave, the employer must maintain the employee's health coverage under any "group health plan".
- Upon return from FMLA leave, most employees must be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms.
- The use of FMLA leave cannot result in the loss of any employment benefit that accrued prior to the start of an employee's leave.

The following are some additional features of the Act:

- The employer can recover the cost of the insurance premiums it paid during the leave if the employee does not return, as long as the failure to return was not because of a serious health condition, or some other circumstance beyond the employee's control.
- Employees are not entitled to accrual of seniority or any other employment benefit during the leave period.
- An employer can require employees to use any accrued (earned) paid vacation leave, personal leave, and medical or sick leave as part of the twelve (12) week period of leave provided for under the Act. If there are not enough accrued days to cover the length of the leave, payroll deductions for insufficient days will be withheld from your salary.
- When intermittent leave is needed to care for an immediate family member or the employee's own illness, and is for planned medical treatment, the employee must try to schedule treatment so as not to unduly disrupt the employer's operation.

FMLA makes it unlawful for any employer to:

- interfere with, restrain, or deny the exercise of any right provided under FMLA;
- discharge or discriminate against any person for opposing any practice made unlawful by FMLA or for involvement in any proceeding under or relating to FMLA.

The following are special provisions for certificated employees employed principally in an instructional capacity:

- If a leave is for a foreseeable planned medical treatment, and the leave would cause the employee to be on leave for greater than 20% of the total number of working days in the period during which the leave would extend, the school may require that the employee elect either:

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## FAMILY AND MEDICAL LEAVE ACT OF 1993 (FMLA) (Continued)

- a) to take leave for periods of a particular duration, not to exceed the duration of the planned medical treatment; or
  - b) to transfer the employee temporarily to an equivalent alternative position which better accommodates the recurring periods of leave.
- If leave is more than five (5) weeks before the end of the term, at least three (3) weeks long, and the return to work would occur during the three (3) weeks prior to the end of the term, the Board can require the employee to continue the leave until the end of the term.
  - If the leave is less than five (5) weeks before the end of the term, more than two (2) weeks long, and the return would occur during the last two (2) weeks of the term, the Board can require the teacher to continue taking leave until the end of the term.
  - If the leave is less than three (3) weeks before the end of the term, and is longer than five (5) working days, the Board can require the leave to extend to the end of the term.
  - The Board will determine what constitutes restoration to an equivalent position based on established Board policies and practices and collective bargaining agreements with respect to all school employees.

FMLA does not affect any Federal or State law prohibiting discrimination, or supersede any State or local law or collective bargaining agreement which provides greater family or medical leave rights.

An individual is not eligible for unemployment or other government compensation while on FMLA leave.

### PAEC Procedures Regarding FMLA

If you plan on using the FMLA, and the reason for the leave is foreseeable, you must give PAEC at least thirty (30) days notice before the leave is to begin. Your immediate supervisor should be notified immediately. If 30 days notice is not practicable, the notice must be given within two (2) business days of when the need becomes known to you. Failure to give the required notice may result in a delay in granting the requested leave until at least thirty (30) days after the date you provide notice. Sample letters that can be used are included in this handbook. The letter must go to the PAEC Executive Director. The PAEC Executive Director may then recommend your FMLA leave as long as you are eligible, to the PAEC Governing Board for the Board's approval.

Also included within the following pages is a "Certification of Health Care Provider" form. If you plan on using the FMLA leave due to illness or serious condition to yourself or a relative (spouse, parent, or child), this form must be completed and returned to the PAEC Human Resources Coordinator. You are allowed 15 days to obtain the medical certification. Until PAEC receives this form, your leave request will either be denied or you will not be restored to your position at the end of the leave until you have met this requirement. Please be aware that any period of incapacity requiring absence from work of more than three (3) calendar days and involves continuing treatment by a health provider, may be considered part of the FMLA leave.

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## FAMILY AND MEDICAL LEAVE ACT OF 1993 (FMLA) (Continued)

Upon the approval of the PAEC Governing Board of your FMLA leave, a completed copy of the form “Employer Response to Employee Request for FMLA” will be returned to you with applicable information regarding your leave contained in it. Information regarding your salary payments and applicable benefits will be attached. You will need to contact the PAEC Human Resources Coordinator if you have questions, concerns, or need more information regarding your leave.

Before you begin your leave, you must make contact with the PAEC Human Resources Coordinator to arrange or confirm the accounting for any available sick, personal or vacation days (if applicable) that you will apply to your FMLA leave days. In the event you do not have sufficient paid days to use for your leave, arrangements need to be made for your paychecks to include pay deducts for these insufficient days.

Upon returning to work after the leave, medical certification must be given by your health care provider approving your fitness to return to work.

You must contact your immediate supervisor and the PAEC Human Resources Coordinator in the event the circumstances and/or timeframe of your leave changes from the original FMLA approved.

Any vacation and/or personal leave that you have accrued will be applied against your FMLA leave if it is taken for birth, adoption or foster care; or to care for an ill spouse, son/daughter or parent, or because of a serious health condition to yourself. In addition, accrued sick leave will be applied when FMLA is used to care for an ill spouse, son/daughter, or parent, or because of a serious condition to yourself.

An employee who is disabled due to pregnancy (a doctor’s certificate is necessary) may elect not to exhaust sick leave during their disability period [most physicians allow six (6) weeks after birth as a “disability” period, or eight (8) weeks if it is a Caesarean section birth].

If you make a contribution towards your medical insurance coverage through payroll deduction, this contribution will continue during your leave. If you continue to receive payroll checks during your FMLA leave, the medical insurance payroll deductions will continue. If you do not receive payroll checks during your leave, you must pay your monthly portion of the insurance cost by the first of every month. If you are delinquent after thirty (30) days, you will have your insurance benefits terminated.

If you do not return to PAEC after your FMLA leave, you are required to reimburse PAEC for the actual cost of the insurance premiums that PAEC paid on your behalf.



**SAMPLE**

*TO: Executive Director*

*FROM:*

*RE: Family and Medical Leave Act*

**MEMORANDUM**

I would like to request a leave under the Family and Medical Leave Act for the purpose of \_\_\_\_\_. I am requesting the leave begin on \_\_\_\_\_ and end on \_\_\_\_\_. I will/will not be using accrued sick leave/personal days during this duration.

Thank you for your consideration regarding this request.

DT/Imt  
Debbie-ins/FMLAsample

cc: PAEC Governing Board  
PAEC Human Resources Coordinator



**SAMPLE**

*TO: Executive Director*

*FROM:*

*RE: Family and Medical Leave Act*

MEMORANDUM

I am expecting a child during the 1<sup>st</sup>/2<sup>nd</sup>/3<sup>rd</sup>/4<sup>th</sup> (select one) week of \_\_\_\_\_.  
(month/year)

FROM

\_\_\_\_\_  
(approximate date of birth or the date specified by your doctor: select one)

UNTIL

\_\_\_\_\_  
(approximate date of return based on total FMLA eligible days\* or based on the number of weeks you plan on returning after delivery: select one)

I am requesting this leave \_\_\_\_\_ use of my sick days/personal days,  
with/without (select one)

but knowing that my insurance benefits will be kept intact.

Thank you for your consideration regarding this request.

\*May be up to 60 work days.

DT/lmt Debbie-ins/FMLAsample

cc: PAEC Governing Board  
PAEC Human Resources Coordinator

Certification of Health Care Provider for  
Employee's Serious Health Condition  
(Family and Medical Leave Act)

U.S. Department of Labor  
Wage and Hour Division



OMB Control Number: 1235-0003  
Expires: 2/28/2015

**SECTION I: For Completion by the EMPLOYER**

**INSTRUCTIONS to the EMPLOYER:** The Family and Medical Leave Act (FMLA) provides that an employer may require an employee seeking FMLA protections because of a need for leave due to a serious health condition to submit a medical certification issued by the employee's health care provider. Please complete Section I before giving this form to your employee. Your response is voluntary. While you are not required to use this form, you may not ask the employee to provide more information than allowed under the FMLA regulations, 29 C.F.R. §§ 825.306-825.308. Employers must generally maintain records and documents relating to medical certifications, recertifications, or medical histories of employees created for FMLA purposes as confidential medical records in separate files/records from the usual personnel files and in accordance with 29 C.F.R. § 1630.14(c)(1), if the Americans with Disabilities Act applies.

Employer name and contact: \_\_\_\_\_

Employee's job title: \_\_\_\_\_ Regular work schedule: \_\_\_\_\_

Employee's essential job functions: \_\_\_\_\_

Check if job description is attached: \_\_\_\_\_

**SECTION II: For Completion by the EMPLOYEE**

**INSTRUCTIONS to the EMPLOYEE:** Please complete Section II before giving this form to your medical provider. The FMLA permits an employer to require that you submit a timely, complete, and sufficient medical certification to support a request for FMLA leave due to your own serious health condition. If requested by your employer, your response is required to obtain or retain the benefit of FMLA protections. 29 U.S.C. §§ 2613, 2614(c)(3). Failure to provide a complete and sufficient medical certification may result in a denial of your FMLA request. 29 C.F.R. § 825.313. Your employer must give you at least 15 calendar days to return this form. 29 C.F.R. § 825.305(b).

Your name: \_\_\_\_\_  
First Middle Last

**SECTION III: For Completion by the HEALTH CARE PROVIDER**

**INSTRUCTIONS to the HEALTH CARE PROVIDER:** Your patient has requested leave under the FMLA. Answer, fully and completely, all applicable parts. Several questions seek a response as to the frequency or duration of a condition, treatment, etc. Your answer should be your best estimate based upon your medical knowledge, experience, and examination of the patient. Be as specific as you can; terms such as "lifetime," "unknown," or "indeterminate" may not be sufficient to determine FMLA coverage. Limit your responses to the condition for which the employee is seeking leave. Please be sure to sign the form on the last page.

Provider's name and business address: \_\_\_\_\_

Type of practice / Medical specialty: \_\_\_\_\_

Telephone: ( \_\_\_\_\_ ) Fax: ( \_\_\_\_\_ )

**PART A: MEDICAL FACTS**

1. Approximate date condition commenced: \_\_\_\_\_

Probable duration of condition: \_\_\_\_\_

**Mark below as applicable:**

Was the patient admitted for an overnight stay in a hospital, hospice, or residential medical care facility?

No  Yes. If so, dates of admission:

\_\_\_\_\_

Date(s) you treated the patient for condition:

\_\_\_\_\_

Will the patient need to have treatment visits at least twice per year due to the condition?  No  Yes.

Was medication, other than over-the-counter medication, prescribed?  No  Yes.

Was the patient referred to other health care provider(s) for evaluation or treatment (e.g., physical therapist)?

No  Yes. If so, state the nature of such treatments and expected duration of treatment:

\_\_\_\_\_

2. Is the medical condition pregnancy?  No  Yes. If so, expected delivery date: \_\_\_\_\_

3. Use the information provided by the employer in Section I to answer this question. If the employer fails to provide a list of the employee's essential functions or a job description, answer these questions based upon the employee's own description of his/her job functions.

Is the employee unable to perform any of his/her job functions due to the condition:  No  Yes.

If so, identify the job functions the employee is unable to perform:

\_\_\_\_\_

4. Describe other relevant medical facts, if any, related to the condition for which the employee seeks leave (such medical facts may include symptoms, diagnosis, or any regimen of continuing treatment such as the use of specialized equipment):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PART B: AMOUNT OF LEAVE NEEDED**

5. Will the employee be incapacitated for a single continuous period of time due to his/her medical condition, including any time for treatment and recovery? \_\_\_\_\_No \_\_\_Yes.

If so, estimate the beginning and ending dates for the period of incapacity: \_\_\_\_\_

6. Will the employee need to attend follow-up treatment appointments or work part-time or on a reduced schedule because of the employee's medical condition? \_\_\_\_\_No \_\_\_Yes.

If so, are the treatments or the reduced number of hours of work medically necessary?  
\_\_\_No \_\_\_Yes.

Estimate treatment schedule, if any, including the dates of any scheduled appointments and the time required for each appointment, including any recovery period:

\_\_\_\_\_

Estimate the part-time or reduced work schedule the employee needs, if any:

\_\_\_\_\_hour(s) per day; \_\_\_\_\_days per week from \_\_\_\_\_through \_\_\_\_\_

7. Will the condition cause episodic flare-ups periodically preventing the employee from performing his/her job functions?  
\_\_\_\_\_No \_\_\_Yes.

Is it medically necessary for the employee to be absent from work during the flare-ups?  
\_\_\_No \_\_\_Yes. If so, explain:

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

Based upon the patient's medical history and your knowledge of the medical condition, estimate the frequency of flare-ups and the duration of related incapacity that the patient may have over the next 6 months (e.g., 1 episode every 3 months lasting 1-2 days):

Frequency : \_\_\_\_\_times per \_\_\_week(s) \_\_\_\_\_month(s)

Duration: \_\_\_\_\_hours or \_\_\_day(s) per episode

**ADDITIONAL INFORMATION: IDENTIFY QUESTION NUMBER WITH YOUR ADDITIONAL ANSWER.**

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







**SECTION III: For Completion by the HEALTH CARE PROVIDER**

**INSTRUCTIONS to the HEALTH CARE PROVIDER:** The employee listed above has requested leave under the FMLA to care for your patient. Answer, fully and completely, all applicable parts below. Several questions seek a response as to the frequency or duration of a condition, treatment, etc. Your answer should be your best estimate based upon your medical knowledge, experience, and examination of the patient. Be as specific as you can; terms such as "lifetime," "unknown," or "indeterminate" may not be sufficient to determine FMLA coverage. Limit your responses to the condition for which the patient needs leave. Page 3 provides space for additional information, should you need it. Please be sure to sign the form on the last page.

Provider's name and business address: \_\_\_\_\_

Type of practice / Medical specialty: \_\_\_\_\_

Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax:( \_\_\_\_\_ ) \_\_\_\_\_

**PART A: MEDICAL FACTS**

1. Approximate date condition commenced: \_\_\_\_\_

Probable duration of condition: \_\_\_\_\_

Was the patient admitted for an overnight stay in a hospital, hospice, or residential medical care facility?  
\_\_\_No \_\_\_Yes. If so, dates of admission: \_\_\_\_\_ Date(s) you

treated the patient for condition: \_\_\_\_\_ Was medication, other than over-the-counter medication, prescribed? \_\_\_No \_\_\_Yes.

Will the patient need to have treatment visits at least twice per year due to the condition? \_\_\_No \_\_\_Yes

Was the patient referred to other health care provider(s) for evaluation or treatment (e.g., physical therapist)?  
\_\_\_ No \_\_\_Yes. If so, state the nature of such treatments and expected duration of treatment:

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

2. Is the medical condition pregnancy? \_\_\_No \_\_\_Yes. If so, expected delivery date: \_\_\_\_\_

3. Describe other relevant medical facts, if any, related to the condition for which the patient needs care (such medical facts may include symptoms, diagnosis, or any regimen of continuing treatment such as the use of specialized equipment):

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

**PART B: AMOUNT OF CARE NEEDED:** When answering these questions, keep in mind that your patient's need for care by the employee seeking leave may include assistance with basic medical, hygienic, nutritional, safety or transportation needs, or the provision of physical or psychological care:

4. Will the patient be incapacitated for a single continuous period of time, including any time for treatment and recovery?  
\_\_\_\_\_No \_\_\_Yes.

Estimate the beginning and ending dates for the period of incapacity: \_\_\_\_\_

During this time, will the patient need care? \_\_\_No \_\_\_Yes.

Explain the care needed by the patient and why such care is medically necessary:

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5. Will the patient require follow-up treatments, including any time for recovery? \_\_\_\_\_No \_\_\_Yes.

Estimate treatment schedule, if any, including the dates of any scheduled appointments and the time required for each appointment, including any recovery period:

---

Explain the care needed by the patient, and why such care is medically necessary: \_\_\_\_\_

---

6. Will the patient require care on an intermittent or reduced schedule basis, including any time for recovery? \_\_\_\_\_  
No \_\_\_Yes.

Estimate the hours the patient needs care on an intermittent basis, if any:

\_\_\_\_\_hour(s) per day; \_\_\_\_\_days per week from \_\_\_\_\_through \_\_\_\_\_

Explain the care needed by the patient, and why such care is medically necessary:

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7. Will the condition cause episodic flare-ups periodically preventing the patient from participating in normal daily activities?  
\_\_\_\_\_ No \_\_\_\_\_ Yes.

Based upon the patient's medical history and your knowledge of the medical condition, estimate the frequency of flare-ups and the duration of related incapacity that the patient may have over the next 6 months (e.g., 1 episode every 3 months lasting 1-2 days):

Frequency: \_\_\_\_\_ times per \_\_\_\_\_ week(s) \_\_\_\_\_ month(s)

Duration: \_\_\_\_\_ hours or \_\_\_\_\_ day(s) per episode

Does the patient need care during these flare-ups? \_\_\_\_\_ No \_\_\_\_\_ Yes.

Explain the care needed by the patient, and why such care is medically necessary: \_\_\_\_\_

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

**ADDITIONAL INFORMATION: IDENTIFY QUESTION NUMBER WITH YOUR ADDITIONAL ANSWER.**

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

\_\_\_\_\_  
**Signature of Health Care Provider**

\_\_\_\_\_  
**Date**

**PAPERWORK REDUCTION ACT NOTICE AND PUBLIC BURDEN STATEMENT**

If submitted, it is mandatory for employers to retain a copy of this disclosure in their records for three years. 29 U.S.C. § 2616; 29 C.F.R. § 825.500. Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. The Department of Labor estimates that it will take an average of 20 minutes for respondents to complete this collection of information, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding this burden estimate or any other aspect of this collection information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S-3502, 200 Constitution Ave., NW, Washington, DC 20210.  
**DO NOT SEND COMPLETED FORM TO THE DEPARTMENT OF LABOR; RETURN TO THE PATIENT.**

# EMPLOYEE RIGHTS AND RESPONSIBILITIES UNDER THE FAMILY AND MEDICAL LEAVE ACT

## Basic Leave Entitlement

FMLA requires covered employers to provide up to 12 weeks of unpaid, job-protected leave to eligible employees for 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, 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.

## Military Family Leave Entitlements

Eligible employees whose spouse, son, daughter or parent is on covered active duty or call to covered active duty status may use their 12-week leave entitlement to address certain qualifying exigencies. Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings.

FMLA also includes a special leave entitlement that permits eligible employees to take up to 26 weeks of leave to care for a covered servicemember during a single 12-month period. A covered servicemember is: (1) a current member of the Armed Forces, including a member of the National Guard or Reserves, who is undergoing medical treatment, recuperation or therapy, is otherwise in outpatient status, or is otherwise on the temporary disability retired list, for a serious injury or illness\*; or (2) a veteran who was discharged or released under conditions other than dishonorable at any time during the five-year period prior to the first date the eligible employee takes FMLA leave to care for the covered veteran, and who is undergoing medical treatment, recuperation, or therapy for a serious injury or illness.\*

**\*The FMLA definitions of "serious injury or illness" for current servicemembers and veterans are distinct from the FMLA definition of "serious health condition".**

## Benefits and Protections

During FMLA leave, the employer must maintain the employee's health coverage under any "group health plan" on the same terms as if the employee had continued to work. Upon return from FMLA leave, most employees must be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms.

Use of FMLA leave cannot result in the loss of any employment benefit that accrued prior to the start of an employee's leave.

## Eligibility Requirements

Employees are eligible if they have worked for a covered employer for at least 12 months, have 1,250 hours of service in the previous 12 months\*, and if at least 50 employees are employed by the employer within 75 miles.

**\*Special hours of service eligibility requirements apply to airline flight crew employees.**

## Definition of Serious Health Condition

A serious health condition is an illness, injury, impairment, or physical or mental condition that involves either an overnight stay in a medical care facility, or continuing treatment by a health care provider for a condition that either prevents the employee from performing the functions of the employee's job, or prevents the qualified family member from participating in school or other daily activities.

Subject to certain conditions, the continuing treatment requirement may be met by a period of incapacity of more than 3 consecutive calendar days combined with at least two visits to a health care provider or one visit and

a regimen of continuing treatment, or incapacity due to pregnancy, or incapacity due to a chronic condition. Other conditions may meet the definition of continuing treatment.

## Use of Leave

An employee does not need to use this leave entitlement in one block. Leave can be taken intermittently or on a reduced leave schedule when medically necessary. Employees must make reasonable efforts to schedule leave for planned medical treatment so as not to unduly disrupt the employer's operations. Leave due to qualifying exigencies may also be taken on an intermittent basis.

## Substitution of Paid Leave for Unpaid Leave

Employees may choose or employers may require use of accrued paid leave while taking FMLA leave. In order to use paid leave for FMLA leave, employees must comply with the employer's normal paid leave policies.

## Employee Responsibilities

Employees must provide 30 days advance notice of the need to take FMLA leave when the need is foreseeable. When 30 days notice is not possible, the employee must provide notice as soon as practicable and generally must comply with an employer's normal call-in procedures.

Employees must provide sufficient information for the employer to determine if the leave may qualify for FMLA protection and the anticipated timing and duration of the leave. Sufficient information may include that the employee is unable to perform job functions, the family member is unable to perform daily activities, the need for hospitalization or continuing treatment by a health care provider, or circumstances supporting the need for military family leave. Employees also must inform the employer if the requested leave is for a reason for which FMLA leave was previously taken or certified. Employees also may be required to provide a certification and periodic recertification supporting the need for leave.

## Employer Responsibilities

Covered employers must inform employees requesting leave whether they are eligible under FMLA. If they are, the notice must specify any additional information required as well as the employees' rights and responsibilities. If they are not eligible, the employer must provide a reason for the ineligibility.

Covered employers must inform employees if leave will be designated as FMLA-protected and the amount of leave counted against the employee's leave entitlement. If the employer determines that the leave is not FMLA-protected, the employer must notify the employee.

## Unlawful Acts by Employers

FMLA makes it unlawful for any employer to:

- interfere with, restrain, or deny the exercise of any right provided under FMLA; and
- discharge or discriminate against any person for opposing any practice made unlawful by FMLA or for involvement in any proceeding under or relating to FMLA.

## Enforcement

An employee may file a complaint with the U.S. Department of Labor or may bring a private lawsuit against an employer.

FMLA does not affect any Federal or State law prohibiting discrimination, or supersede any State or local law or collective bargaining agreement which provides greater family or medical leave rights.

**FMLA section 109 (29 U.S.C. § 2619) requires FMLA covered employers to post the text of this notice. Regulation 29 C.F.R. § 825.300(a) may require additional disclosures.**



For additional information:  
1-866-4US-WAGE (1-866-487-9243) TTY: 1-877-889-5627  
[WWW.WAGEHOUR.DOL.GOV](http://WWW.WAGEHOUR.DOL.GOV)

U.S. Department of Labor | Wage and Hour Division



WHD Publication 1420 · Revised February 2013

## FIRE AND TORNADO EMERGENCY PLANS

### FIRE PLAN

1. If you discover smoke or fire in your building, pull the fire alarm immediately. Do not go looking for the custodians or principal.
2. When the fire alarm sounds, all staff and students should proceed out of their rooms according to their pre-assigned fire routes. Do not stop to obtain outer clothing after the alarm sounds. Staff should close classroom doors after everyone is out, and windows should be closed if it does not cause a serious delay. Teachers should carry their attendance folders and/or grade books so that roll may be checked later.
3. Students should form a line and all staff and students should walk to the nearest unobstructed exit and leave the building in an orderly fashion. No one should run. Non-ambulatory people should have a helper(s) assigned to assist them out of the building. Staff and students are to remain silent in case of the need for instruction from emergency personnel.
4. Each class should proceed to a pre-determined area inside the assigned building.
5. Each teacher, or person in charge, should make an accurate check of all students under his/her responsibility. Teachers must immediately report missing children to the principal. Teachers should keep a record of all children picked up by parents.
6. In the event that the fire department does not allow the students to re-enter their school, the principal will instruct the teachers to move to their designated emergency shelter area. PAEC Center staff and students would go to the PAEC Education Center (PEC) (1636 S. 10<sup>th</sup> Avenue) and PEC staff and students would go to PAEC Center (1000 Van Buren Street). If no PAEC location is available, students and staff will utilize Garfield School, 1514 S. 9th Ave., Maywood.

### TORNADO PLAN

1. In the event of a tornado warning (a tornado sighting within 25 miles), an announcement will be made informing all staff and students to report to their pre-designated tornado station.
2. IF TIME PERMITS: (a) all inside doors that lead to corridors should be opened; (b) window blinds should be drawn to help protect against broken glass; and (c) the lights should be turned off and all electrical appliances disconnected.
3. Teachers should take attendance folders and/or grade books to account for all students at their stations.
4. School buses should **not** leave school premises during this emergency.

NOTE: Each school should have its own specific fire and tornado emergency plan. If you have not received a copy of that plan, please contact your principal/supervisor.

## FORMS

There are a variety of forms used at PAEC. Forms are available in the PAEC Center Building copy room in A-Pod. Contact your principal/immediate supervisor or building secretary for a listing of these forms and how to use them. If you need to request a form that is not available at your work location, call the PAEC Central Office (450-2100) or check the PAEC website under information – employee resources as some forms are available there to download and print.

## HOLIDAYS

The following holidays are observed at PAEC and a day off will be allowed unless they fall on a Saturday or Sunday:

1. Independence Day
2. Labor Day
3. Columbus Day
4. Veteran's Day
5. Thanksgiving
6. Christmas
7. New Year's Day
8. Martin Luther King's Birthday
9. Presidents' Day
10. Casimir Pulaski Day
11. Memorial Day

For holidays that fall on a Saturday or Sunday, a day off will be allowed either before or after the actual holiday.

## HOURS

Your hours of work depend on your position and building or district assignment. Specific information will be provided by your principal/immediate supervisor. All staff are expected to report to work on time and to continue to work until the end of their work day. Any deviation from the assigned hours needs to be approved in advance by the principal/immediate supervisor.



## INSURANCE: MEDICAL, DENTAL AND LIFE

Full-time regular employees will receive: (a) hospitalization and major medical coverage, (b) dental coverage, and (c) life insurance coverage. For individual dental, life and HMO coverage, full premium payments will be made by PAEC. Individual PPO coverage will require a payroll contribution from the employee. Refer to the current Collective Bargaining Agreement (CBA) for rates. Temporary full-time employees hired on or after April 1<sup>st</sup> are not eligible for insurance benefits.

Employee contributions towards health insurance shall be tax sheltered following the Board's establishment of a 125 plan.

For full-time employees hired during the 1990-91 school year, and who have not sustained a break in their service, PAEC shall pay eighty-five percent (85%) of the dependent coverage premium and the full-time employee shall pay the fifteen percent (15%).

For full-time certificated/licensed employees hired for the 1991-92 school year and thereafter, PAEC shall pay fifty percent (50%) of the dependent coverage premium for the first two years of employment, and then eighty-five percent (85%) thereafter. The full-time certificated/licensed employee shall pay the remaining premium.

Full-time non-certificated employees hired for the 1991-92 school year and thereafter, shall be responsible for full payment of the dependent premium for the first two years of employment. Thereafter, PAEC shall pay thirty-five percent (35%) of the dependent premium and the full-time non-certificated employee shall pay the remaining premium.

For full-time employees hired for the 1991-92 school year, employment must begin prior to November 1st and continue through the end of the school year in order to count as a year of employment for purposes of increasing, or obtaining, a Board contribution towards the dependent premium.

For twelve (12) month full-time certificated administrative employees, PAEC shall pay one hundred percent (100%) of the dependent coverage premium.

The Board shall provide each full-time regular employee with life insurance in the amount equal to the employee's salary rounded to the next highest thousand. At age 75, the life insurance amount is decreased to 65% of salary, to 45% of salary at age 80, and 30% of salary at age 85. The maximum life insurance benefit is \$100,000.

The medical, dental and life insurance benefits will begin on the first of the month following the employee's employment date; however, if an employee starts on the actual 1<sup>st</sup> day of the month, benefits will begin on that date.

(Continued)

## INSURANCE: MEDICAL, DENTAL AND LIFE (Continued)

All regular full-time employees who work through the last day of their normal work year will be entitled to insurance benefits through August 31st. For those regular full-time employees who are not returning the following work year, insurance benefits will discontinue effective September 1st, unless they contact the PAEC Business Office and request continuance of the insurance program at their own cost (COBRA). Generally, this benefit can continue up to eighteen (18) months following an employee's termination, but must usually be discontinued if the employee enrolls in another health plan.

Employees who terminate their service prior to the completion of their normal work year will have their insurance benefits terminated at the end of the month that reflects their last actual work date. If an employee works all the work days of a month, their coverage will end at the end of the month (last day of month).

Part-time employees are not eligible for medical, dental and life insurance benefits.

### Fitness Program

The Fitness Program is a flexible membership program that gives you unlimited access to a nationwide network of fitness centers. With more than 8,000 participating gyms on hand, you can work out at any place or at any time. Choose a gym close to home and/or one near your office. To search for a gym, please connect to [www.bcbsil.com](http://www.bcbsil.com), click "Log In" to create an account, go to "Quick Links" and click on the Fitness Center tab or call 888-762-2583.

Other program perks are:

\*No long-term contract requires. Membership is month to month. Monthly fees are \$25 per month per member, with a onetime enrollment fee of \$25.

\*Automatic withdrawal of monthly fee.

\*Online tools for locating gyms.

## INSURANCE: MEDICAL DEPENDENT COVERAGE

The following information summarizes the procedures under the current Board policy. However, these procedures are subject to change by the plan administrator without further notice. Employees should check with the PAEC Human Resources Office to inquire with respect to any changes.

Dependents can be covered on the same date a new PAEC employee's medical insurance coverage begins. If an employee does not have a dependent at the time of employment and acquires one at a later date, the employee may enroll the dependent(s) for coverage if it is done within thirty-one days of acquiring the dependent(s). Coverage will be effective on the enrollment date. However, if the first eligible dependent is a newborn or adopted child, coverage will be retroactive to the date of acquisition.

If an employee has one or more dependents at the time his/her medical insurance takes effect, and the employee does not enroll the dependent(s) for coverage at that time, those dependents are not automatically eligible for later insurance coverage except in situations where spouses lose their jobs and consequently lose their medical insurance coverage (see paragraph below). However, a newborn child can be added under dependent coverage if enrolled within 31 days after birth.

Employees who do not include their spouses as dependents on their medical insurance coverage may do so at any time during the year IF their spouses lose their job and consequently lose the medical insurance coverage they had. Verification of the above conditions are required.

After dependent coverage becomes effective, the PAEC Human Resources Office must be informed of any newly acquired dependents as well as any dependents who are no longer eligible due to a change in their status (e.g., change in dependent child's student or work status; or change in employee's marital status).

In May of each year PAEC has an Open Enrollment week, at which time employees can decide to switch from their current medical insurance plan to the alternative medical insurance. During the open enrollment week (one week only in May), dependent coverage can also be added if it had not been included during the employee's initial employment. The effective date of the change(s) will be September 1<sup>st</sup> of the current year.

## INSURANCE: VISION

Employees covered under each of PAEC's two medical insurance plans have limited vision care coverage. The full-time employee shall pay one-hundred percent (100%) of the cost of the premium. Please check with the Human Resources Office for additional information.

## INSURANCE: DISCOUNTS ON VALUE-ADDED HEALTH CARE PRODUCTS AND SERVICES FOR FULL-TIME EMPLOYEES

Through the BlueExtras discount program, all Blue Cross and Blue Shield of Illinois (BCBSIL) members are eligible to save money on value-added health care products and services that help support healthy lifestyles. These discounts are for health care products and services not usually covered by your health care benefit plan. There are no claims to file, no referrals or pre-authorizations, and no additional fees to participate – it's just one more benefit of being a BCBSIL member.

For additional information about the products and services offered through BlueExtras, log into Blue Access® for Members (BAM) at [www.bcbsil.com](http://www.bcbsil.com). Click on the My Coverage tab, and then the BlueExtras Discount Program link.

## INSURANCE FORMS

The following information summarizes the procedures under the current Board policy. However, these procedures are subject to change by the plan administrator without further notice. Employees should check with the PAEC Human Resources Office to inquire with respect to any changes.

Employees who are enrolled in the E.B.C. self-insured medical and/or dental programs administered by Blue Cross/Blue Shield (BC/BS) and Met Life Dental will find that most hospitals, doctors, dentists, and pharmacists will file a claim directly (electronically) with Blue Cross/Blue Shield (BC/BS) and Met Life Dental, thus eliminating the need for you to file any insurance claim forms. If this does **NOT** occur, you need to complete a medical or dental form and send it to Blue Cross/Blue Shield (BC/BS) and Met Life Dental. The forms are located at your Building School Secretary's Office and in the PAEC Human Resources Office.

No medical insurance forms are required for employees enrolled in the Health Maintenance Organization (HMO) program.

The PAEC dental plan is a PPO plan with dental claims being administered by Met Life. PAEC does not offer dependent coverage for dental.

Home delivery service of prescription drugs is used to obtain three months (90 days) of prescription medications at one time by mail at specified co-payment rates noted in the health care benefit book.

Prescription Home Delivery: Employees who are eligible to have home delivery of their prescription(s) must complete the required forms for PPO or HMO which are located at the PAEC Human Resources Office. Generally, employees must call an "800" number to see if their prescription is on the "Home Delivery" menu. If it is, an original prescription must accompany the first prescription request; thereafter, refills may be obtained by simply calling another "800" number. When refills are no longer available, another original prescription must be submitted with another request form.

## INSURANCE: PLAN BOOKLET

Newly employed full-time staff members receive a copy of the plan booklets for the medical, dental and life plan offered by PAEC. Copies of the plan booklets are available in the PAEC Human Resources Office.

## JOB RESPONSIBILITIES

Employees are expected to fulfill their responsibilities as specified within their Contract or Letter of Agreement, and as itemized under their job description.

All employees shall be provided with a copy of their job description upon employment, when revised, or upon request.

## JURY DUTY

Full-time regular employees who are required to serve on jury duty during the school year shall receive full salary during the period of such service and will retain the jury duty pay.

Employees must notify the principal/immediate supervisor at least five (5) days prior to serving jury duty and must follow the appropriate absence procedure each day they are on continued jury duty service. Upon returning from jury duty, the employee must submit to the principal/immediate supervisor copies of the daily "certificates" received from the court which verify the jury duty dates of attendance. These "certificates" are forwarded to the PAEC Payroll Coordinator.

If confirmation of jury duty attendance is not received at the PAEC Business Office within fourteen (14) days of the final jury duty date, a payroll deduction will be made for absences which occurred during that period of time.

## LANE CHANGE

A certificated or licensed/registered employee who has completed the necessary graduate course work for a salary lane change must have official transcripts submitted to the PAEC Business Office by October 15th in order for the salary change to be effective the beginning of the school year.

Official transcripts received between October 16th through February 28th will result in a salary change for the second half of the school year only if transcripts are received by February 28th.

Official transcripts cannot be issued to an employee. They should be sent to:

PAEC  
1000 Van Buren Street  
Maywood, Illinois 60153-1989  
Attn: Business Manager

Submit a "Lane Change Request" (PAEC Form 900) to the Business Office as soon as you have completed the necessary course work for a salary lane change.

In order for certificated and licensed/registered employees to move horizontally on their salary schedule, classes must be taken which are:

1. at the graduate level;
2. from a North Central Association approved institution;
3. earned subsequent to the last degree earned;
4. directly or indirectly related to the present or a future assignment as determined by the Executive Director.



## LEAVE, EXTENDED SICK: FULL TIME EMPLOYEES

In case of illness or disability, and when all available individual accumulated sick leave or such other leave that may be available under the Family and Medical Leave Act of 1993, if any, is exhausted, full-time employees may request an extended sick leave without pay or benefits.

Employees requesting an extended sick leave without pay/benefits shall submit an appropriate statement from their physician which substantiates their medical condition necessitating their absence, as well as the employee's anticipated date of return.

No leave shall exceed more than the remaining days of the employee's work year in which the request is made.

An application for the leave must be submitted in writing to the Executive Director not later than five (5) working days prior to the requested date of the leave. The request must include an anticipated date of return.

After exhausting individual accumulated sick leave and leave available under the Family and Medical Leave Act of 1993, insurance benefits provided by the Governing Board will cease the last day of the month in which the leave begins. The employee shall be allowed to continue to participate in the Group Life and Health Plan by paying the monthly premium to the Human Resources Office by the first day of each month for which the employee seeks coverage.

A full-time employee who becomes disabled due to pregnancy may elect not to exhaust sick leave before requesting extended sick leave without pay/benefits. However, such employee shall be responsible for the cost of continued participation in the Group Insurance Program after exhausting leave available, if any, under the Family and Medical Leave Act of 1993.

## LEAVE OF ABSENCE: NON-CERTIFICATED EMPLOYEES

Upon the recommendation of the Executive Director, leave of absence without pay may be granted for parental purposes by the Governing Board to full-time non-certificated employees when they have completed at least two consecutive years of full-time service with PAEC. In order to be eligible for the first year's service credit, an employee must have begun employment at PAEC prior to November 1st of the employee's initial work year.

Upon the recommendation of the Executive Director, leave of absence without pay may be granted by the Governing Board to full-time program assistants for the purpose of completing student teaching. The leave shall be for the time necessary for the program assistant to complete the student teaching. Program assistants who are subsequently employed as teachers shall not be granted seniority as a teacher for time employed as a program assistant. However, program assistants shall retain their accumulated sick leave.

An application for leave must be submitted to the Executive Director at least ninety (90) calendar days before the requested date of commencement of the leave. The Executive Director may waive the ninety (90) calendar days in emergency cases. Prior to the approval of any leave request, the Executive Director may require that the employee submit proper documentation, such as a statement from a physician, approval by the proper agency of adoption, or a letter from an institution of higher learning.

In those cases where eligible employees utilize parental leave, (a) they may elect not to exhaust their sick leave, and (b) the leave may be for the remaining portion of the school year and upon request, one additional year. The request for the additional year may be made at the time the leave begins or by March 1st of the year the employee is on leave. No leave shall exceed the remainder of the current school year plus one (1) additional school year. In no event shall any eligible employee be granted an unpaid leave of absence in excess of two (2) years.

Notification of intention to return to the employ of PAEC from an unpaid leave of absence shall be made in writing to the Executive Director ninety (90) days prior to the first day of the second semester if leave is taken during the first semester, or by March 1st prior to the end of the school year if leave is taken the second semester. Failure to notify the Executive Director in writing of an intention to return shall be interpreted as a resignation without further action by the Governing Board.

Employees returning from a leave of absence, and who are paid from a salary schedule, shall be placed on the salary schedule at the same place they occupied at the beginning of the leave and shall be given the same longevity they received at the beginning of the leave.

Except where a leave granted by the Governing Board also qualifies as a leave under the Family and Medical Leave Act of 1993, any insurance benefits provided by the Governing Board will cease the last day of the month in which the leave begins. The employee shall be allowed to continue to participate in the Group Insurance Plan while on leave by paying the monthly premium to the PAEC Human Resources Office by the first day of each month for which the employee seeks coverage.

## LEAVE OF ABSENCE: TENURED CERTIFICATED EMPLOYEES

Upon the recommendation of the Executive Director, leave of absence without pay for an extended period of time may be granted by the Governing Board to tenured certificated employees. An application for leave must be submitted in writing to the Executive Director at least ninety (90) calendar days before the requested date of the commencement of the leave. The Executive Director may waive the ninety (90) calendar days in emergency cases.

Prior to the approval of any leave request, the Executive Director may require that the employee submit proper documentation, such as a statement from a physician, admission in an institution of higher learning or approval by the proper agency of adoption.

An employee who utilizes parental leave may elect not to exhaust his/her sick leave before taking a leave of absence.

The leave shall be for the remaining portion of the employee's work year and upon request, one additional year. The request for the additional year may be made at the time the leave begins or by March 1st of the year the employee is on leave. No leave shall exceed the remainder of the employee's current work year plus one (1) additional work year. In no event shall any employee be granted an unpaid leave of absence in excess of two (2) years.

Notification of intention to return to the employ of the school district from an unpaid leave of absence shall be made in writing to the Executive Director by November 1st if leave is taken during the first semester, or by March 1st prior to the end of the work year if leave is taken the second semester. Failure to notify the Executive Director in writing of an intention to return shall be interpreted as a resignation without further action by the Governing Board.

Employees returning from a leave of absence shall be placed on the salary schedule at the same place they occupied at the beginning of the leave unless they begin the leave after February 1st. In the latter case, employees shall be granted a full year's credit on the salary schedule if they worked the entire first semester. Employees shall be returned to a position for which they are certificated, approved or licensed/registered.

Except where a leave granted by the Governing Board also qualifies as a leave under the Family and Medical Leave Act of 1993, insurance benefits provided by the Governing Board will cease the last day of the month in which the leave begins. The employee shall be allowed to continue to participate in the Group Life and Health Plan by paying the monthly premium to the PAEC Human Resources Office by the first day of each month for which the employee seeks coverage.

## LONGEVITY

A certificated employee beginning employment prior to November 1st will be given a full year's service credit towards tenure, upon completion of the work year.

Employees eligible for longevity credit on their respective salary schedule will be given a full year's longevity credit if they start before November 1st.

Employees who are paid on a salary schedule and begin employment prior to November 1st will be paid on the next step the following fiscal year, when they complete the current work year.

Program assistants who are subsequently employed as teachers shall receive longevity credit at the rate of one (1) year for every two (2) full years of employment as program assistant.

## LOST: PERSONAL ITEMS/PAEC CHECKS/KEYS & KEYCARDS

### Lost Personal Items

PAEC is not responsible for any lost personal items a staff or student incurs.

PAEC employees who take the responsibility of safekeeping a student's money/valuables are personally responsible if the items are lost or are not returned to the student.

NOTE: PAEC employees are expected to take home all personal belongings during the summer months.

### Lost PAEC Checks

Any fee charged to PAEC as a result of an employee losing a check (Payroll, Accounts Payable, or Activity Fund check), will be charged to that employee.

### Lost Keys and Key Cards

If you receive a PAEC key or key card and subsequently lose it, a fee equivalent to the cost of the key or key card will be charged.

### Access to PAEC Buildings on Holidays

PAEC Buildings are not open during school holidays or other holidays. Reference can be made to the PAEC calendar for these days.

Employee security key cards are not valid or programmed for entrance on those days and employees should not attempt to use them. In the event of a card failure, if someone were to gain access to a building on a holiday, the alarm will go off and PAEC will incur financial charges for a building alarm call.

Please note that on numerous holidays, we have had PAEC staff attempt to come into the buildings on holidays using their key cards. If there are no cars in the parking lot, please do not attempt to enter the building with a key card. If you need to be sure that the building is closed, go to the main entrance and use the night bell. If someone is in the building, they will answer.

## MEDICARE: CERTIFICATED EMPLOYEES

All certificated employees hired after March 31, 1986, are required to contribute to the hospital insurance (Medicare) tax portion of the Federal Insurance Contributions Act (F.I.C.A.).

PAEC is responsible for withholding employee and employer contributions on all wages paid to these individuals.

Employees contributing to Medicare will be eligible for Medicare benefits when they retire at the Medicare designated retirement age.

## MILEAGE REIMBURSEMENT FOR LOCAL TRAVEL

Employees using their vehicles for approved school business are eligible for local travel mileage reimbursement. Reimbursement for mileage begins after employees reach their first work location of the day. Mileage reimbursement will not be paid for the initial trip to a first work location or the final trip home from the last work location of the day.

PAEC Form 361 (Mileage Report) should be completed and submitted to the employee's principal/immediate supervisor for approval. Mileage reports should be submitted at least on a quarterly basis.

All mileage incurred during a fiscal year (July 1<sup>st</sup> through June 30<sup>th</sup>) should be submitted for payment during that fiscal year. PAEC attempts to have a final Governing Board meeting during the last week of June in order to approve and pay all bills for that fiscal year. Any mileage which has not been submitted prior to or for this Board meeting may not be paid as budget funds may not be available.

Employees will be reimbursed at the IRS's mileage reimbursement rate and will be informed of the annual rate as it changes.

## MILITARY RESERVE LEAVE

Military reserve leave will be granted to any employee who is a member of the U.S. Armed Services Active Reserve or National Guard for temporary field training or emergency duty. The employee will be allowed time off for that period of time. Under the Military Leave of Absence Act (5 ILCS 325), any full-time employee of the State of Illinois who is a member of any reserve component of the United States Armed Forces or of any reserve component of the Illinois State Militia, shall be granted leave from his/her public employment for any period actively spent in military service. During these leaves, the employee's seniority and other benefits shall continue to accrue. The employee shall also continue to receive his/her regular compensation as a public employee. A copy of the individual's military orders confirming the leave dates must be submitted to the Human Resources Office prior to the leave being taken.



## ORGANIZATIONAL DUES OR FEES

The Governing Board shall make available a maximum of \$75.00 per certificated/licensed/registered employee and Program Assistant each school year for membership dues. The following is a list of professional organizations approved for reimbursement:

- American Speech Language Hearing Association (ASHA)
- American Vocational Association (AVA)
- Association for Supervision and Curriculum Development (ASCD)
- Chicago Association for the Education of Young Children (CAEYC or NAEYC - National)
- Council for Exceptional Children (CEC)
- Illinois Association for Autism and Developmental Disabilities
- Illinois Association and Health Physical Education and Recreation
- Illinois Association for Persons with Severe Handicaps (TASH)
- Illinois Association of School Social Workers
- Illinois Reading Association
- Illinois School Psychologist's Association
- Illinois Speech and Hearing Association
- Illinois Teachers of the Hearing Impaired (ITHI)
- Illinois Teachers of Physically Handicapped (ITPH)
- Orton Dyslexia Society

This list is not all-inclusive. New organizations may be added if deemed appropriate at the discretion of the Administration.

Final approval for reimbursement will be at the discretion of the PAEC Administration.

## OUTSIDE EMPLOYMENT

Employees shall not at any time engage in any employment that would:

- affect their usefulness as employees at PAEC.
- make time and/or energy demands upon individuals which could interfere with their effectiveness in performing their regular assigned duties.
- compromise or embarrass PAEC.
- adversely affect their employment status or professional standing.
- conflict in any way with assigned duties.

Employees shall not engage in any other employment or in any private business during the hours necessary to fulfill appropriate assigned duties.

Employees will not perform duties related to an outside job using any PAEC facilities, equipment or materials.

NOTE REGARDING TUTORING: Employees interested in tutoring and who wish to be included on a list of private tutors, should contact the Assistant Director. Private tutoring cannot take place in any school building, and the tutors must make their own arrangements for places to conduct tutoring.

## OUTSIDE SPEAKING ENGAGEMENTS/PRESENTATIONS

Staff wishing to make a professional presentation at any local, state or national level, must notify their immediate supervisor of their intention prior to applying and/or accepting the speaking engagement.

The proposal will be reviewed by PAEC Administration and a decision will be given regarding permission or denial.

## OVERTIME: NON-CERTIFICATED EMPLOYEES

For overtime payroll calculations for non-certificated employees, the PAEC work week begins on Sunday and ends on Saturday.

Compensation of time and a half will be awarded for work after forty (40) hours per week. Any overtime work requires prior approval from the employee's principal/immediate supervisor, Executive Director or designee.

The compensation may take the form of money or time off, both at time and a half. If time off is requested, approval is required from the Executive Director or designee.

## PART-TIME BENEFITS

Part-time employees are not eligible for benefits. The only exception (under Section 5/24-6 of The School Code of Illinois) are employees who are eligible to participate in the Illinois Municipal Retirement Fund (IMRF) under the "600 Hour Standard":

those individuals employed in a non-certificated position normally requiring performance of duty for 600 hours or more in a twelve (12) month period.

These IMRF eligible employees are also eligible for sick leave benefits under the same section of the Illinois School Code. Part-time employees are granted at least 10 days in each school year. These days would be prorated for less than a full year's employment.

## PAYCHECKS/PAYDAY

Paychecks will be delivered to most individual work sites. The PAEC Business Office will inform you of any deviations to this procedure. If you work in more than one building, contact the Payroll Office to designate the building you would prefer your check be sent.

Paychecks are distributed on the 15th and last day of each month. If either one of these days falls on a weekend or a holiday, every attempt will be made to distribute the checks on the prior work date. If you wish to have your payroll checks directly deposited to your checking/savings account, contact the PAEC Payroll Office. It is strongly recommended that you choose direct deposit for the security and convenience it will provide you.

Full-time employees whose normal work schedule is less than twelve (12) months shall have the following payroll option:

1. 10 month employees: 20 or 24 payroll option
2. 11 month employees: 20 or 24 payroll option

NOTE: Employees selecting the twenty-four (24) payroll option will have their summer checks distributed or mailed to them no later than June 30<sup>th</sup>.

Once a payroll option has been selected, it cannot be changed until the start of the following school year, and changes requested must be submitted in writing to the PAEC Business Manager.

Written requests for changes must be received no later than the first (1<sup>st</sup>) institute day of the school year in order to be valid for that school year.

## PAYROLL DEDUCTIONS

PAEC is required by law to subtract money from your paycheck each pay period to pay payroll taxes. The largest amounts subtracted are usually to cover federal and state income taxes. Sometimes these figures might go up or down, depending on the amount of your check, the number of deductions you claim for tax purposes, or because of new laws.

PAEC is also required by law to take retirement deductions from those employees eligible for either the TRS or IMRF Retirement Programs. In addition, all active members of TRS are required to make contributions toward the cost of retired members' health benefits. This deduction is shown on the employee's payroll stub under the "insurance" deduction field and is entitled TRIP.

Certificated employees hired after March 31, 1986, will have a Medicare deduction taken from their paychecks, while non-certificated employees will have Social Security (FICA) deductions taken from their checks.

Some employees participate in specific benefit programs that require employee contributions. This type of benefit is always voluntary, so if you have not applied for one of them and are therefore not covered by it, there will be no deduction from your check. The most popular programs for which there are paycheck deductions are the following:

- Credit Union
- Medical Insurance - Dependent Coverage and/or Individual PPO Coverage
- Tax Shelter Annuity - 403(b)
- Teachers Union

Deductions will only be taken upon written request from an employee.

At times other mandatory deductions are necessary, such as garnishment of wages or the fair share cost provision of the Teacher/Program Assistant Union Contract. PAEC will attempt to notify you as quickly as possible when it is required to take such a deduction from your check.

If you have any questions about the deductions that appear on your paycheck stub, please contact the Payroll Department (450-2122).

## PERSONAL LEAVE

Each regular full-time employee shall be entitled to two (2) full days per fiscal year for personal business or emergency use without loss of pay or deduction of sick leave. A full time employee beginning after the start of the normal work year will be entitled to prorated sick leave. Personal leave shall be taken in increments of at least one-half days. Full-time temporary employees hired on or after April 1<sup>st</sup> are not eligible for personal leave.

Employees will be required, except in an emergency, to submit written requests for personal business leave on PAEC Form 312 (Leave Report) at least two (2) days prior to the anticipated absence. The Executive Director must approve any requests for emergency uses of personal days that do not receive prior approval; employees must make such a request on PAEC Form 312 on their first day back to work following their absence.

A personal business day may not be used immediately before or immediately after a holiday or school recess unless in the judgment of the Executive Director a valid reason for granting a personal business day exists.

Personal leave days will not be used for any strike or job action.

The employee's balance of personal leave shall be provided on the employee's pay stub once per month.

Unused personal business leave shall be allowed to accumulate as sick leave in the following fiscal year, effective every July 1st.

**NOTE:** If a regular full-time employee exhausts his/her personal leave days for the fiscal year, that employee may use up to two (2) sick leave days as personal leave days. Such days may be used only in accordance with all other requirements for the use of personal leave set forth above. If the employee has exhausted his/her sick leave days, no additional day shall be available to the employee.



## PERSONNEL FILES

Employees shall have the right to inspect their official personnel files which are housed in the PAEC Central Administrative Office. Requests to review this file must be made in writing to the Executive Director or his/her designee. The employee's request will be honored within seven (7) work days. Any time a file is reviewed by an employee, the Executive Director or his/her designee shall be present.

Having reviewed the personnel file, employees may submit a request to the Executive Director or his/her designee that a portion be removed or corrected. If there is no mutual agreement on a change in the record, the employee may submit his/her own version, which then becomes part of the record.

Material may be added or removed from the file with permission from the Executive Director or his/her designee. Copies of materials to be added to the file will be given to the employee. Materials removed from the file shall be forwarded to the employee. An employee will be given an opportunity to affix his/her signature to a copy of a document evidencing disciplinary action before placement of the document in the file. If the employee fails to avail himself/herself of such opportunity within two (2) days, the document will be placed in the file.

PAEC will charge 25¢ per page as a copy charge.

## PHYSICAL EXAMINATIONS

New employees, at their own expense, shall have a physical examination by a physician licensed or licensed nurse practitioner in Illinois or any other state to practice medicine and surgery, to determine the employee's physical ability to perform the duties as assigned by the PAEC Administration. The physical examination must take place sixty (60) or fewer days preceding the employee's submission of the physical exam report to the PAEC Central Office. The physical examination shall also provide evidence of the employee's freedom from all communicable diseases (including tuberculosis).

At any time, the Governing Board may require an examination of any employee to determine the physical or mental fitness of the employee to perform assigned duties or to determine what accommodations may be necessary for the employee to perform essential job functions. Such examinations shall be performed by a licensed physician who may be chosen by the employee from a list of at least three designated by the Governing Board, and the expenses thereof shall be paid from school funds.

## RETIREMENT: EARLY INCENTIVE FOR CERTIFICATED EMPLOYEES

A certificated employee may elect to retire at the end of a specified school term and request that the PAEC Governing Board approve the payment of a retirement incentive, if the following conditions apply: (a) the employee is at least fifty-five (55) years of age; (b) the employee has completed twenty (20) consecutive years of full-time employment with PAEC and its member districts; (c) the employee is eligible for retirement under the Illinois Teachers' Retirement System; and (d) retirement must occur not later than June 2017. Approved leaves will not be considered a break in employment and will not be counted towards years of full-time employment. If the Board approves the retiring certificated employee's request for a retirement incentive, the Board shall provide the incentive which is applicable, as follows:

The number of certificated employees who may be awarded a retirement incentive in any year may be limited at the Board's option to thirty percent (30%) of those eligible, with the right to participate being allocated among those applying on the basis of seniority in PAEC employment. A request for a retirement incentive which is submitted but not approved by the Board due to limitations imposed by the Board shall be considered by the Board during the following year in the order of receipt.

Further, the number of employees who may be awarded a retirement incentive in any year for whom the retirement requires a Board payment in order to avoid an early retirement penalty under the Illinois Teachers' Retirement System may be limited at the Board's option to ten percent (10%) of those eligible, with the right to participate to be allocated among those applying on the basis of seniority in PAEC employment.

Retirement in June 2016. For retirement at the end of the 2015-2016 school year, the eligible certificated employee shall provide a written request for a retirement incentive to the Board by no later than January 15, 2015 to receive increases in his/her last two (2) years of 5%, or by January 15, 2016 to receive an increase in his/her last year of 5%. In either case, the certificated employee's compensation for the last year(s) of employment shall not be determined by the salary schedule. Instead, the certificated employee's prior year's compensation shall be recalculated by increasing the certificated employee's total creditable earnings, including salary and stipends, by five percent (5%).

Retirement in June 2017. For retirement at the end of the 2016-2017 school year, the eligible certificated employee shall provide a written request for a retirement incentive to the Board by no later than January 15, 2015 to receive increases in his/her last three (3) years of 5%, or by January 15, 2016 to receive an increase in his/her last two (2) years of 5%, or by January 15, 2017 to receive an increase in his/her last year of 5%. In either case, the certificated employee's compensation for the last year(s) of employment shall not be determined by the salary schedule. Instead, the certificated employee's prior year's compensation shall be recalculated by increasing the certificated employee's total creditable earnings, including salary and stipends, by five percent (5%).

A certificated employee will not be eligible to participate in the retirement incentive program if she/he did not provide an irrevocable notice of intent to retire as required by this Section and/or she/he received an increase in creditable earnings in excess of six percent (6%) for a school year used to calculate the certificated employee's retirement annuity.

(Continued)

## RETIREMENT: EARLY INCENTIVE FOR CERTIFICATED EMPLOYEES (Continued)

Once the request for a retirement incentive is approved by the Board, the certificated employee's retirement on the date specified in the request shall be deemed irrevocable. In the event that the certificated employee no longer performs a stipend duty, the amount attributable to the stipend for that school year will be subtracted from the creditable earnings that would have otherwise been paid. Any certificated employee who resigns his/her position prior to the approved retirement date shall forfeit any remaining retirement incentives that would otherwise have been paid to the certificated employee and, in addition, shall pay to the Board any retirement incentive paid to date that exceeds what the certificated employee would have been compensated without a retirement incentive.

However, in its sole discretion, the Board may waive the deadline for submitting the written request for the retirement incentive; any such waiver shall be non-precedential in effect.

Lump Sum Benefit in Lieu of Contribution Towards Post-retirement Health Insurance. In addition to the benefit described above and in lieu of a contribution towards post-retirement health insurance, the Board shall make one lump sum payment as a non-elective contribution to a 403(b) account designated by the certificated employee in an amount calculated as set forth below. The Board's contribution will be made more than thirty (30) days after the retiring certificated employee's last paycheck and no later than sixty (60) days after her/his last workday. Both parties intend that the payment will not be TRS creditable earnings.

The amount of the Board's contribution to the certificated employee's designated 403(b) account for this benefit shall be calculated as follows:

\$200.00 x the lesser of sixty (60) months or the number of full calendar months until the certificated employee would reach age 65.

In the event that the Equal Employment Opportunity Commission or court of competent jurisdiction rules that the termination of the benefits formerly provided under this subsection after five (5) years or at the time the retiree reaches age 65 is not permitted under state or federal law, including but not limited to the *Illinois Human Rights Act*, the *Age Discrimination in Employment Act of 1967*, and the *Older Workers Benefit Protection Act of 1990*, either the Board or the Union may provide written notice to renegotiate retirement benefits. Bargaining will begin within sixty (60) days. The parties agree to negotiate for sixty (60) days at which time, if no agreement has been reached, the Board may suspend paying its contributions to the certificated employee's Section 403(b) accounts pursuant to this subsection.

Up to seventy (70) accumulated PAEC sick leave days in excess of one hundred seventy (170) days which are not used for TRS credit at the time of retirement from PAEC, shall be reimbursed by the Governing Board at a rate of \$50.00 per day. Payment shall be made as a post-retirement severance payment during the month of August, following the end of the school year during which retirement becomes effective.

Retiring certificated TRS members, who receive more than twelve (12) sick days per year, shall have their sick days decreased to a total of twelve (12) sick days in each of the final four (4) years of employment prior to retirement.

## RETIREMENT: NON-CERTIFICATED EMPLOYEES

Upon reaching fifty-five (55) years of age, completing twenty (20) consecutive years of full-time employment with PAEC, and becoming eligible for retirement under the Illinois Municipal Retirement Fund (IMRF), a non-certificated employee may elect to retire at the end of a specified school term, but not later than June 2017, and request that the Board approve the payment of a retirement incentive. Approved leaves will not be considered a break in employment and will not be counted towards years of full-time employment.

The number of non-certificated employees who may be awarded a retirement incentive in any year may be limited at the Board's option to thirty percent (30%) of those eligible, with the right to participate to be allocated among those applying on the basis of seniority in PAEC employment.

A request for a retirement incentive which is submitted but not approved by the Board due to limitations imposed by the Board under this subsection shall be considered by the Board during the following year in the order of receipt.

Retirement in June 2016. For retirement at the end of the 2015-2016 school year, the eligible non-certificated employee shall provide a written request for a retirement incentive to the Board by no later than January 15, 2015 to receive increases in his/her last two (2) years of 5%, or by January 15, 2016 to receive an increase in his/her last year of 5%. In either case, the non-certificated employee's compensation for the last year(s) of employment shall not be determined by the salary schedule. Instead, the non-certificated employee's prior year's compensation shall be recalculated by increasing the non-certificated employee's total creditable earnings, including salary and stipends, by five percent (5%).

Retirement in June 2017. For retirement at the end of the 2016-2017 school year, the eligible non-certificated employee shall provide a written request for a retirement incentive to the Board by no later than January 15, 2015 to receive increases in his/her last three (3) years of 5%, by January 15, 2016 to receive an increase in his/her last two (2) years of 5%, or by January 15, 2017 to receive an increase in his/her last year of 5%. In either case, the non-certificated employee's compensation for the last year(s) of employment shall not be determined by the salary schedule. Instead, the non-certificated employee's prior year's compensation shall be recalculated by increasing the non-certificated employee's total creditable earnings, including salary and stipends, by five percent (5%).

A non-certificated employee will not be eligible to participate in the retirement incentive program if she/he did not provide an irrevocable notice of intent to retire as required by this Section and/or she/he received an increase in IMRF earnings in excess of six percent (6%) for a school year used to calculate the non-certificated employee's retirement annuity.

Once the request for a retirement incentive is approved by the Board, the non-certificated employee's retirement on the date specified in the request shall be deemed irrevocable. In the event that the non-certificated employee no longer performs a stipend duty, the amount attributable to the stipend for that school year will be subtracted from the IMRF earnings that would have otherwise been paid.

(Continued)

RETIREMENT: EARLY INCENTIVE FOR NON-CERTIFICATED EMPLOYEES (Continued)

Any non-certificated employee who resigns his/her position prior to the approved retirement date shall forfeit any remaining retirement incentives that would otherwise have been paid to the non-certificated employee and, in addition, shall pay to the Board any retirement incentive paid to date that exceeds what the non-certificated employee would have been compensated without a retirement incentive.

However, in its sole discretion, the Board may waive the deadline for submitting the written request for the retirement incentive; any such waiver shall be non-precedential in effect.

Lump Sum Benefit in Lieu of Contribution Towards Post-retirement Health Insurance. In addition to the benefit described above and in lieu of a contribution towards post-retirement health insurance, the Board shall make one lump sum payment as a non-elective contribution to a 403(b) account designated by the non-certificated employee in an amount calculated as set forth below. The Board's contribution will be made more than thirty (30) days after the retiring non-certificated employee's last paycheck and no later than sixty (60) days after her/his last workday. Both parties intend that the payment will not be IMRF creditable earnings.

The amount of the Board's contribution to the non-certificated employee's designated 403(b) account for this benefit shall be calculated as follows:

\$200.00 x the lesser of sixty (60) months or the number of full calendar months until the non-certificated employee would reach age 65.

In the event that the Equal Employment Opportunity Commission or court of competent jurisdiction rules that the termination of the benefits formerly provided under this subsection after five (5) years or at the time the retiree reaches age 65 is not permitted under state or federal law, including but not limited to the *Illinois Human Rights Act*, the *Age Discrimination in Employment Act of 1967*, and the *Older Workers Benefit Protection Act of 1990*, either the Board or the Union may provide written notice to renegotiate retirement benefits. Bargaining will begin within sixty (60) days. The parties agree to negotiate for sixty (60) days at which time, if no agreement has been reached, the Board may suspend paying its contributions to the non-certificated employee's Section 403(b) accounts pursuant to this subsection.

Up to 70 accumulated PAEC sick leave days which cannot be used for IMRF credit at the time of retirement from PAEC shall be reimbursed by the Board to the non-certificated employee at the rate of \$40.00 per day. Payment shall be made as a post-retirement severance payment during the month of August following the school year that retirement becomes effective.

## RETIREMENT PROGRAM: ILLINOIS MUNICIPAL RETIREMENT FUND (IMRF)

Participation in IMRF is compulsory for non-certificated employees who work at least 600 hours per year. The employee's contribution to the retirement plan is 4 1/2% of the employee's gross earnings (handled through payroll deduction). These funds are sheltered and never subject to Illinois Income Tax and only subject to Federal Income Tax when they are withdrawn or used.

Approximately 80% of the pension benefits received by retired IMRF members are paid from the contributions made by PAEC. PAEC also pays for all disability and death benefits and most of the survivor pension benefits.

In order to qualify for an IMRF Pension, an employee must have at least eight (8) years of service credit and be at least fifty-five (55) years of age, and not working in a position requiring IMRF coverage.

For employees with one or more years of service who are actively employed (or on leave of absence or disability), death benefits are equal to one year's earnings plus a refund of the member's IMRF contributions plus interest earned on contributions. If an employee has less than one year's service, the employee's beneficiary will receive a refund of the employee's IMRF contributions with interest earned on contributions.

For a description of IMRF disability benefits, contact the PAEC Human Resources Office and/or IMRF for additional information.

To apply for IMRF pension benefits, contact IMRF. (1-800-ASK-IMRF) or [www.imrf.org](http://www.imrf.org)

If you terminate your employment with PAEC and wish to apply for withdrawal of your IMRF funds, complete IMRF Form 5.10 (Application for Separation Fund), which is available at the PAEC Payroll Office (See Payroll Coordinator) and also at the IMRF website ([www.imrf.org](http://www.imrf.org)). The form may be submitted on-line, faxed or mailed.

If you terminate employment and withdraw your IMRF funds prior to age 55, your IMRF refund will not include interest on your contributions. In addition, depending on your age, you may pay an additional 10% tax as well as Federal Income Tax on the entire amount, UNLESS:

The IMRF funds are "rolled over" into an Individual Retirement Account (IRA) plan or other eligible retirement savings account within 60 days from the issuance date of the IMRF check.

(Continued)

RETIREMENT PROGRAM: ILLINOIS MUNICIPAL RETIREMENT FUND (Continued)

A member age 55 or more, when terminating IMRF service, is subject to income tax on the taxable amount. The income tax may be deferred by rolling over the taxable amount in an IRA or other eligible retirement savings account.

NOTE: Upon termination, IMRF funds can be withdrawn at any time unless you have eight years of IMRF service AND you are age 55 or older AND your IMRF service qualifies you for a monthly pension of \$30 or more. If you meet all of these requirements, you cannot withdraw your funds unless you directly rollover your contributions into another qualified retirement plan to purchase service credit.

For additional information, contact your local IMRF Office:

ILLINOIS MUNICIPAL RETIREMENT FUND  
2211 York Road  
Suite 400  
Oak Brook, IL 60523-2337  
(630) 368-1010  
(800) 275-4673 (Monday-Friday 7:30 a.m. to 5:30 p.m.)  
Website: [www.imrf.org](http://www.imrf.org)

NOTE: The above information is only a general summary of IMRF benefits and is not intended to be all-inclusive. For full details of benefits, contact the IMRF office or IMRF website. Any changes to the above information should be reported to you through the IMRF office or its newsletter and on it's website..



## RETIREMENT PROGRAM: TEACHERS' RETIREMENT SYSTEM (TRS)

Participation in the Teachers' Retirement System is compulsory at the time of employment for all individuals certificated under the provisions of The School Code of Illinois and employed under one of the following conditions in the public schools outside Chicago:

- Full-time and part-time employees
- Substitute teachers

Members are required to contribute nine point four (9.4) percent of their gross creditable earnings toward their retirement (this is handled through payroll deduction). The 9.4% is used for the following purposes:

- Retirement annuity: 7½%
- Automatic annual increases in annuity: ½%
- Death Benefits: 1%
- Funding of ERO Program: 0.4%

These funds are sheltered and NOT subject to Federal Income Tax until they are withdrawn or used.

Employer contributions for TRS members are paid by the State of Illinois and also by PAEC. The State is responsible for many of the pension benefits received by retired TRS members. PAEC pays 0.58% on all TRS salaries.

The system provides two types of death benefits:

- The beneficiary receives the refund of any remaining contributions (plus interest) made by the TRS member.
- Survivor benefits are made to eligible dependents (or TRS member's estate); or a named non-dependent (organization, trust, any person).

Members who become disabled may be eligible for disability benefits. For additional information, contact the PAEC Human Resources Office, the TRS Website, or call TRS at 1-800-877-7896.

Members who plan to retire should contact the system's Springfield office four (4) weeks before the retirement date.

A TRS member may apply for a refund of contributions provided an official resignation was submitted and accepted by the employer. A refund of your TRS contributions can be requested via e-mail at [members@trs.illinois.gov](mailto:members@trs.illinois.gov). TRS refunds do not include the 1% death benefit taken from the employee's gross creditable earnings, nor do TRS refunds include interest on the member's contributions or for the TRIP program. If you terminate employment and withdraw your TRS funds prior to age 59 1/2, you will pay a 10% penalty as well as Federal Income Tax on the entire amount, UNLESS:

- The TRS funds are "rolled over" into an Individual Retirement Account (IRA) plan or another qualified pension plan within 60 days from the issuance of the TRS check.
- The refund is made to members who separated from service in or after the year in which they turned age 55.

(Continued)

RETIREMENT PROGRAM: TEACHERS' RETIREMENT SYSTEM (Continued)

TRS will send you an application by regular mail. TRS will process your refund for payment when four (4) months have passed since your final day of work and will be costly to repay if you return to a TRS position.

When members withdraw service by taking a refund of contributions, they give up all rights to benefits that the system may provide.

For additional information regarding the Teachers' Retirement System, contact one of the following TRS offices:

Teachers' Retirement System  
PO BOX 19253  
2815 West Washington  
Springfield, Illinois 62794-9253

Teachers' Retirement System  
4200 Commerce Court, Suite 101  
Lisle, Illinois 60532-3611

Toll Free: (800) 877-7896  
TRS Website: [www.trs.illinois.gov](http://www.trs.illinois.gov)  
Forms Order Line: (800) 877-7896 Option 2

Office hours are Mondays through Fridays, 8:30 AM to 4:30 PM, except state holidays.

- NOTES: (1) The above information is only a general summary of TRS benefits and is not intended to be all inclusive; for full details of benefits, contact one of the above listed TRS offices or visit the TRS website.
- (2) All active members of TRS are required to make contributions toward the cost of retired teacher health benefits at the rate of 1.07% (2015-16 rate) of salary. This contribution is not a retirement contribution, but a separate contribution of health insurance. As a result, this contribution will be included in the employee's payroll stub under the insurance deduction field. (TRS only acts as a service agent for the Department of Central Management Services for the collection of the health contributions.) This contribution is tax-exempt and will be excluded from the employee's taxable income. PAEC as your employer is required to contribute .80% (2015-16 rate) of employee TRS salaries.

## SAFETY

PAEC believes the safety and health of its employees are primary considerations in the operation of its school programs. PAEC is committed to providing a safe and healthy environment in which all of its employees can work.

PAEC is committed to an employee safety program that will eliminate employee injuries, property damage, and work interruptions resulting from unsafe conditions and work habits. In order to realize these objectives PAEC encourages all employees to promote safety and accident prevention and to make safety in the school a primary concern. PAEC has instituted a co-op wide safety committee that meets periodically during the school year to review employee accidents and incidents.

All employees are responsible for following safe work practices and for immediately reporting to their principal/immediate supervisor any condition that is potentially dangerous. Staff should become familiar with and observe safe work procedures during the course of their work activities.

The following are some safety practices and policies PAEC would like to emphasize:

Do not try to move, lift, or carry anything heavy by yourself. If you need assistance, contact the school custodian.

Keep work areas clean and orderly at all times.

Report any injury, no matter how minor, to your principal/immediate supervisor or building secretary within 24 hours of the occurrence. Should you have an injury or feel ill while at work, contact your supervisor immediately.

If hurt on the job, it is required that a formal accident/injury report (“Employee’s Report of Injury”) be completed by the employee, and a Supervisor's Investigation Report (Form G-136) be completed by the employee's supervisor--no matter how minor the injury. The formal injury report should be forwarded to the Human Resources Office, which is responsible for filing a report with the Worker's Compensation insurance carrier. All reports must be received in the Human Resources Office within 24 hours of the accident/injury.

Should you notice anything that seems to be a safety hazard, an unsafe act or unsafe condition, please report it to your supervisor immediately.

Employees who have a School Security or Safety concern should contact the School Principal. If that concern is not reconciled, the Executive Director should be contacted.

## SALARY SCHEDULES

In order for certificated and licensed/registered employees to move horizontally on their salary schedule, classes must be taken which are:

1. at the graduate level;
2. from a North Central Association approved institution;
3. earned subsequent to the last degree earned;
4. directly or indirectly related to the present or a future assignment as determined by the Executive Director.

The salary schedule for certificated employees represents total compensation made up of the base salary and the 9.4% payment sheltered by PAEC from its funds to TRS on the employees' behalf.

The salary schedule for non-certificated employees represents total compensation made up of the base salary and the four and one-half percent (4½%) payment sheltered by PAEC from its funds to IMRF on the employees' behalf so long as IMRF requirements are satisfied.

Certificated and licensed/registered employees' salaries will be determined on the basis of their years of experience and educational background. One (1) year's credit may be given on the salary schedule for each year of certificated and/or professional related service, and for each ten (10) months of military service (not to exceed two (2) years credit for military service). Previous experience shall be considered and evaluated by the Executive Director. Partial credit, when transferring disciplines, will be decided in consultation with the Executive Director and approved by the Governing Board. A newly appointed certificated employee having more than a half-year of experience shall be awarded a full year of credit for such service.

NOTE: Individuals starting employment after the beginning of the work year will have their salaries prorated according to the remaining days in that work year.

## SCHOOL CALENDAR: NON-PAEC BUILDINGS

PAEC employees working in non-PAEC Buildings will follow the school calendar of the district under which they are working (unless otherwise notified by the PAEC Executive Director or Assistant Director).

Employees who work in multiple districts will follow the school calendar established between themselves and their supervisor at the beginning of the work year.

## SEXUAL HARASSMENT (PAEC Policy 500.14)

A learning and working environment that is free from any form of sexual harassment is essential and shall be maintained. Sexual harassment will not be tolerated. It will be a violation of the PAEC Governing Board policy for any member of the PAEC staff to harass another individual in the work place. Violation of this policy shall be considered grounds for disciplinary action.

Sexual harassment consists of unwelcomed sexual advances, sexual advances to students by staff, whether welcome or unwelcome, requests for sexual favors, and other inappropriate verbal or physical conduct of a sexual nature when made by any member of the school staff, to a student, or to another staff member under any of the following conditions:

- Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment or education;
- Submission to or rejection of such conduct by an individual is used as the basis for employment or academic decisions affecting that individual;
- Such conduct has the purpose or effect of substantially interfering with an individual's professional or academic performance or creating an intimidating, hostile, or offensive employment or educational environment.

Sexual harassment, as defined above, may include, but is not necessarily limited to:

- Uninvited sex-oriented verbal "kidding" or demeaning sexual innuendoes, leers, gestures, teasing, sexually explicit or obscene jokes, remarks or questions of a sexual nature;
- Graphic or suggestive comments about an individual's dress or body;
- Displaying sexually explicit objects, photographs or drawings;
- Unwelcome (or welcome where a student is the target) touching, such as patting, pinching, or constant brushing against another's body; or
- Suggesting or demanding sexual involvement whether or not accompanied by implied or explicit threats concerning one's grades, educational opportunities, employment status, or similar personal concerns.

The prompt reporting of sexual harassment is encouraged. Any person who alleges sexual harassment by any staff member in a PAEC program may complain directly to his/her immediate supervisor, building principal, Assistant Director, or to the Executive Director. Reporting sexual harassment will not reflect adversely upon the individual's status or affect future employment, work assignments, or grades.

(Continued)

SEXUAL HARASSMENT (Continued)

The rights to confidentiality, both of the complainant and of the accused, will be respected consistent with the Governing Board's legal obligation and with the necessity to investigate allegations of misconduct and to take corrective action when this conduct has occurred.

A substantiated charge against a PAEC staff member will subject such staff member to disciplinary action up to and including discharge.

## SICK LEAVE

Sick leave shall be interpreted to mean personal illness, quarantine at home, or serious illness or death in the immediate family\*.

Each full-time employee shall be entitled to sick leave according to the following schedule:

- 11 Month certificated staff: 14 days per year
- 12 Month certificated administrative staff: 15 days per year
- 12 Month non-certificated staff: 14 days per year
- Remaining staff: 12 days per year

A full time employee beginning after the start of the normal work year will be entitled to prorated sick days.

Sick leave not used in the school year of service for which it was granted shall accumulate up to three hundred forty (340) days. In addition, the employee will be awarded his/her allotment for the current year.

For certificated employees, up to seventy (70) PAEC sick leave days in excess of 170 days which are not used for Teachers' Retirement System credit at the time of retirement from PAEC shall be reimbursed by the Board at a rate of \$50 per day. For non-certificated employees, any accumulated sick leave days which cannot be used for Illinois Municipal Retirement Fund credit at the time of retirement from PAEC shall be reimbursed by the Board at the rate of \$40 per day. Payment to employees will be made as a post-retirement severance during the month of August, following the end of the school year during which retirement becomes effective.

Employees shall be notified in writing at the beginning of each school year as to the number of sick days accumulated. Thereafter, employees can request such information from their immediate supervisor/principal. The employee's balance of sick leave shall be provided on the employee's pay stubs once per month.

The entire sick leave granted for each school year shall be available for use on the first day of the school year.

A physician's certificate as a basis for pay during leave after an absence of three (3) consecutive days of personal illness may be required. A physician's certificate may be necessary as a basis for pay during a leave, but if so, it will be done at PAEC's expense.

NOTES: (1) If a regular full-time employee exhausts his/her personal leave days for the fiscal year, that employee may use up to two (2) sick leave days as personal leave days. Such days may be used only in accordance with all other requirements for the use of personal leave. If an employee has exhausted his/her sick leave days, no additional day shall be available to the employee.

(2) IMRF employees who work 600 or more hours per year are considered full-time employees for sick day purposes only. If they work less than six hours per day, they will receive a prorated share of sick days (see "Part-Time Benefits").

\*"Immediate family", as defined in the Illinois School Code, Section 5/24-6, includes parents, spouse, brothers, sisters, children, grandparents, grandchildren, parents-in-law, brothers-in-law, sisters-in-law, and legal guardians.

## SICK LEAVE AND BEREAVEMENT POOLS



***NOTE: This ONLY applies to Union employees.***

The purpose of the Sick Leave Pool is to provide an adequate number of days to be used by the employees when the need for sick days exceeds the number of days accumulated by an employee.

The purpose of the Bereavement Pool is to provide an adequate number of days to be used by the employees in the event of the death of a family member. The family shall include spouse, children, parents, parent-in-law, siblings-in-law, grandparents, grandparents-in-law, aunts, aunts-in-law, uncles, uncles-in-law, cousins, cousins-in-law, and/or other individuals considered important by the employee.

Sick Leave and Bereavement Pools will be managed by the Board of the PAEC Council. Decisions granting the use of days from the pool must have the approval of a majority of the Sick Leave/Bereavement Board.

Refer to the current PAEC Bargaining Unit Contract for eligibility and operational guidelines.

## SIGN-OUT PROCEDURE

Employees leaving a PAEC building for any business reason should sign out at the receptionist's and/or building secretary's area, stating their destination, time of departure, and expected return time.

Employees in non-PAEC buildings should follow the sign-out procedure of the building in which they are located.

NOTE: It is assumed that the employee's principal/supervisor has pre-approved the sign-out.

## SMOKING/TOBACCO USE

Illinois law, specifically the Smoke Free Illinois Act (Public Act 95-0017), prohibits, without exception, the use of tobacco on all school property. Tobacco shall mean cigarette, cigar, pipe, or tobacco in any other form, including smokeless tobacco which is any loose, cut, shredded, ground, powdered, compressed or leaf tobacco that is intended to be placed in the mouth without being smoked.

Tobacco may not be used at any time or any place including, without limitation, grounds outside of school buildings, before or after regular school hours, or on days when school is not in session. The prohibition applies to all school vehicles, school buildings and grounds, and is not limited to buildings and grounds where students are present.

## SUMMER SCHOOL

If summer school services are approved by the Governing Board, summer school openings will be posted by April 15th and preference will be given to current PAEC employees. A copy of the posting will be sent to each worksite. No later than May 15<sup>th</sup>, the Administration will post a tentative list of employees selected for summer school employment, pending Board approval. The Administration may add employees to the list at any time thereafter.

## SUPPLY REQUISITIONS

If you need office and/or work supplies, contact your principal/supervisor or building secretary. Central Office employees should contact the Central Office receptionist for general office supplies.

If you are requested to order supplies, complete PAEC Form 910 (Supply Requisition) and submit it to your principal/supervisor for approval. The form is forwarded to the Accounts Payable Office, which mails a purchase order to the vendor and returns the supply requisition form to the principal/supervisor.

When the actual supplies are received, the principal/supervisor or designee must verify the order with the supply requisition form.

1. If the order is intact, the supply requisition should be signed at the bottom of the form and returned to the Accounts Payable Office with the packing slip attached.
2. If there are discrepancies in the order (e.g., items to be returned; back ordered items; broken items), the discrepancies should be noted on the supply requisition and the form returned to the Accounts Payable Office with the packing slip attached.
3. If any items are to be returned, you should make the appropriate arrangements with the vendor (return policies vary with each vendor). You should pack the merchandise and have it prepared to be picked up at the designated location. Make sure all notations and receipts are attached to the supply requisition when forwarding it to the Accounts Payable Office.

If any questions or problems arise concerning the order, contact your immediate principal/supervisor.

If you have received prior approval from your principal/supervisor to make a purchase using your own funds, complete PAEC Form 363 (Board Bills Reimbursement). You should be reimbursed after the next scheduled Board meeting, if the form is approved and received in time at the Accounts Payable Office.

## TARDINESS PROCEDURE

PAEC's tardiness procedure for all employees is:

1. Employees who are late for work will be given verbal warnings for the first two abuses. The principal/supervisor will maintain a log of each employee's tardiness.
2. The third tardiness abuse will result in a written notice to the employee, documenting the two previous verbal warnings, and informing the employee that the next tardiness abuse may result in a one day's work suspension without pay.
3. The fourth tardiness abuse will result in a written notice to the employee, and a one day's work suspension without pay.
4. A fifth tardiness abuse will result in a written notice to the employee, and a two day's work suspension without pay.
5. A sixth tardiness abuse will result in a written notice to the employee, and (a) if the employee is non-certificated or non-tenured/certificated, a recommendation will be made for the employee's termination to the PAEC Governing Board; or (b) if the employee is tenured and certificated, a Remediation Plan will be initiated immediately.

### DEFINITIONS:

- (1) Tardiness: Late by five (5) minutes or less.
- (2) Tardiness Abuse: Late by more than five (5) minutes, or continued/chronic tardiness.

### NOTE:

- (1) In all tardiness situations, the principal/supervisor may request a payroll deduction for the actual time lost from work by the employee. Tardiness abuse will result in a pay deduction.
- (2) This tardiness procedure has received the approval of the West Suburban Teachers Union, Local #571, AFT, AFL-CIO.

## TAX SHELTER ANNUITY (TSA) PROGRAM

Tax Shelter Annuities (TSA) are a significant retirement income vehicle enabling many employees of public schools to defer taxation on retirement savings until future years. Generally, the contributions you make to the TSA plan are excluded from your current income; i.e., you do not have to include these contributions (and any earnings on them) in your taxable income until the year(s) the TSA funds are withdrawn, and that is usually after you retire and very likely in a lower income tax bracket.

The PAEC #803 School District has contracted with the Omni Group to act as a third party plan administrator for the district's 403(b) Tax Sheltered Retirement Plan.

According to the IRS, PAEC #803 School District, as plan sponsor, has certain administrative and regulatory responsibilities. Some of those responsibilities include confirming that all contributions and transactions are within the allowable guidelines. The Omni Group, as PAEC's compliance partner, will assist us in making sure that the responsibilities are complete.

The Omni Group will be able to assist you with general questions regarding the district's 403(b) plan. Specific account information should continue to be obtained from your investment providers.

If you are not currently participating in the 403(b) plan and would be interested in more information, please contact the Human Resources Office at 708/450-2119 or the Payroll Office at 708/450-2122. A listing of approved 403(b) investment companies is also available at either office.

The PAEC #803 School District and the Omni Group look forward to partnering with you to provide you the best benefit opportunities.

## TRANSCRIPTS

All certificated, licensed and registered employees shall submit to the PAEC Personnel Office an official transcript from every college or university they have attended. Official transcripts cannot be issued to the employee. Please request they be sent to:

PAEC  
1000 Van Buren  
Maywood, IL 60153-1989  
ATTN: Business Manager



## TRANSPORTING STUDENTS IN STAFF VEHICLES

No student can be transported in a staff vehicle except in an extreme emergency, such as a life-threatening situation.

## TUITION REIMBURSEMENT

Tuition reimbursement for approved classes is available to full-time certificated and licensed/registered employees, and to full-time Program Assistants.

1. Eligible employees need to submit PAEC Form 320 (Pre-Approval for Reimbursement of College/University Course Work) to the Executive Director prior to the actual start date of the class.

The types of classes eligible for reimbursement include:

For certificated and licensed/registered employees: Classes must be graduate course work beyond a degree, and must be in a field pertinent to PAEC activities.

Any full-time program assistant who has completed one-half (1/2) of the coursework required by his/her college for a four (4) year degree in teacher education or a four (4) year degree that leads to another professional certificate under Article 21 of the *Illinois School Code* (e.g., social worker, psychologist, speech and language pathologist), and who receives the approval of the Executive Director prior to enrolling in further coursework leading to a degree/certification in an area that would make him/her employable by PAEC.

2. By October 15th of the school year following completion of the class(es), PAEC Form 321 (Approval for Reimbursement of College/University Course Work) must be submitted to the PAEC Business Office, along with a receipt or cancelled check attached to the form which confirms the cost of the class taken. A separate copy of PAEC Form 321 should be submitted for each class that had been pre-approved. Failure to submit PAEC Form 321 by October 15th will result in the inability of the employee to receive reimbursement.
3. Employees requesting reimbursement must have official college transcripts sent to PAEC by October 15th of the school year following completion of the class(es). Official transcripts cannot be issued to the employee. Please request they be sent to:

PAEC  
1000 Van Buren  
Maywood, Illinois 60153-1989  
Attn: Business Manager

4. Failure to be actively employed by PAEC in a certificated or licensed/registered capacity or actively employed as a Program Assistant during the period of September 1 through December 15 of the year following completion of the course work shall not entitle the employee to reimbursement.

(Continued)

## TUITION REIMBURSEMENT (Continued)

5. Reimbursement will be for actual tuition costs, providing the employee receives a grade of "B" or better, and provided the amount in the Tuition Reimbursement Fund allows the employees full reimbursement. The method for determining reimbursement within the Fund will be to divide the Fund by the total number of semester credit hours for which reimbursement has been requested and approved. Each employee's approved coursework will be multiplied by this credit hour rate (not to exceed the per semester credit hour charge for the University of Illinois, Chicago Campus, effective on September 1st for the fund year) and that amount will be paid to the requesting employee. If the fund is not exhausted by the limitation of reimbursement to the UIC hourly rate, those employees incurring a greater charge per credit hour shall be reimbursed on a pro rata basis, until the remainder of the fund for the designated year is exhausted. However, no reimbursement paid to any employee will exceed the employee's documented tuition costs.
6. Eligible employees may submit for reimbursement a maximum of twelve (12) semester credit hours during each school year and nine (9) semester credit hours during each summer.
7. Reimbursement shall be prorated for full-time employees who work a partial year.

Two separate funds have been designated by the PAEC Governing Board for tuition reimbursement purposes: (A) Teacher and Program Assistant Fund and (B) Central Office Fund.

- NOTES:
1. If a pre-approved class is dropped or cancelled and another class is to be taken in its place, another tuition pre-approval form (PAEC Form 320) needs to be submitted to the Executive Director.
  2. If an "Incomplete" in a course is received and that course will not be completed during the same school year it was taken, the employee needs to submit a request for extension of tuition reimbursement on that particular class. A memo to the attention of the Business Manager should be submitted stating the expected date of completion of that particular class.
  3. For reimbursement purposes, one college quarter hour is the equivalent of two-thirds (2/3) semester hours.

## VACATION

Employees eligible for vacation shall receive vacation days based on a July 1st through June 30th fiscal year.

All vacation requests shall be submitted to the employee's supervisor and Executive Director for approval at least two weeks in advance. Vacation requests should be submitted on PAEC Form 312 (Leave Report). All earned vacation must be used prior to September 1 of the following fiscal year; if the vacation is not used by September 1, it will be lost.

Vacation shall be taken in increments of at least one-half days.

The following personnel are eligible for vacation:

<u>Certificated Personnel</u>	<u>Earned Vacation Leave</u>
Eleven (11) month employees	10 days **
Principals	10 days **
Assistant Principals	8 days **
Twelve (12) month employees (Central Office Administrators)	20 days 1/2 winter vacation (noncumulative) 1/2 spring vacation (noncumulative)

### Educational Support Personnel (Non-Certificated):

Full-time twelve (12) month employees with less than five (5) years of service	10 days **
Full-time twelve (12) month employees, after completion of five (5) years of service but less than thirteen (13) years of service*	15 days
Full-time twelve (12) month employees after completion of thirteen (13) years of service*	20 days

NOTE: A full-time 10 or 11 month employee who becomes a full-time 12 month employee will have the 12 month starting date used when determining vacation calculation.

\*Employees must complete the necessary employment years by July 1<sup>st</sup> (the first day of the fiscal year) in order to receive the next highest number of vacation weeks.

\*\* 5 days may be used after the first six months of employment; any exception requires the approval of the Executive Director

If employment is for less than a full year, a prorated amount will be calculated.

Holidays falling during the period of approved vacation time are not considered as vacation time.

## WOMEN'S HEALTH & CANCER RIGHTS ACT

*The Women's Health & Cancer Rights Act* requires group health plans that provide coverage for mastectomy to provide coverage for certain reconstructive services. These services include: (a) reconstruction of the breast upon which the mastectomy has been performed, (b) surgery/reconstruction of the other breast to produce a symmetrical appearance, (c) prostheses, and (d) physical complications during all stages of mastectomy, including lymphedemas.

In addition, the plan may not interfere with a woman's rights under the plan to avoid these requirements, or offer inducements to the health provider, or assess penalties against the health provider, in an attempt to interfere with the requirements of the law. However, the plan may apply deductibles and copays consistent with the other coverage provided by the plan.

This law applies to PAEC's E.B.C. Blue Cross Blue Shield of Illinois HMO and PPO Plans.

## WORK ORDERS

Employees should submit a written work order (PAEC Form 800) to their principal/supervisor for the repair of equipment, special cleaning and general maintenance needed in the work area.

In emergency situations, the custodian or principal/supervisor can be verbally informed.

## WORKER'S COMPENSATION

An employee who is injured on the job must complete an "Employee's Report of Injury" form within 24 hours of the accident/injury and return the form to the principal/supervisor. The form must be completed even if the injury is minor and no medical treatment is sought. In the event the employee is hospitalized or incapacitated, the form must be submitted as soon as possible following the accident or injury.

The principal/supervisor must complete a Supervisor's Investigation Report within 24 hours of the accident/injury and return it to the PAEC Human Resources Office.

The PAEC Human Resources Office will complete Form 45 (Insurance Carrier First Report of Injury or Illness) and submit it to the Worker's Compensation Cooperative Insurance Carrier. The Worker's Compensation Cooperative Insurance Carrier determines whether an injury is eligible for reimbursement through its program; PAEC only submits the required reports to the Worker's Compensation Cooperative Insurance Carrier.

**NOTE:** Employees should verify with the doctor/hospital that is treating them that the medical bill(s) are sent to the Worker's Compensation Cooperative Insurance Carrier, not to their regular medical insurance carrier. The doctor can call the PAEC Human Resources Office to get the Worker's Compensation Insurance Carrier's contact information and a claim number.

### Worker's Compensation Attendance and Payroll Information for PAEC Employees

If an employee is off work due to a Worker's Compensation accident/injury, the following applies to that employee's attendance and payroll:

- If the employee's work-related injury which required medical treatment during the workday on the date of the injury and/or following two (2) workdays, the employee will not be charged sick or personal leave days for time absent for purposes of receiving medical treatment on such days, or not being physically able to work, provided the employee provides a statement from his/her physician which (1) confirms that the employee has been examined by the physician regarding the work injury, (2) describes the nature and extent of the injury, and (3) states that the employee's absence from work is necessitated by the work injury. The physician's statement must be submitted within three (3) days of the accident or injury, unless the employee has been admitted into a hospital or is otherwise incapacitated (physically or mentally) due to the severity of the injury. In such case where the employee is hospitalized or incapacitated, the physician's statement must be submitted as soon as possible following the accident or injury.
- The employee will continue to receive his/her full salary from PAEC if he/she is absent from work due to a compensable injury confirmed by the PAEC Worker's Compensation Insurance Carrier. Any TTD (Temporary Total Disability) benefits paid to the employee while he/she is absent from work will be retained by PAEC. No deduction of sick days from the employee will be made for employee absence days needed for medical treatments, tests or doctor visits covered and/or compensated by Worker's Compensation as long as a physician's statement is provided to PAEC supporting each absence day and these days are confirmed and approved by PAEC's Worker's Compensation Insurance Carrier. If these physician statements are not provided and/or absence days not approved, then sick or personal days will be charged to the employee or pay deducts will be taken.

# Supervisor's Investigation Report

The unsafe acts of persons and the unsafe conditions that cause accidents can be corrected only when they are known specifically. It is your responsibility to find and name them and to suggest the remedy in this report.

District Name and Number:		School or building name:	
Location of accident: <i>(stairs, hall, office, outside, etc.)</i>		Date and hour of accident:	
Name of injured person:	Injured employee's department:	Injured employee's job or position:	
Describe the injury:			
Describe the accident <i>(State what the injured employee was doing and the circumstances leading to the accident.)</i>			
Unsafe condition <i>(Describe as oily floor, poor light, lack of guards on belts and gears, broken steps, etc.)</i>			
Unsafe act--Unsafe work procedure <i>(Describe using known facts, or a specific items contributing to the accident, etc.)</i>			
Suggested Improvement <i>(As a supervisor, what do you propose that might prevent a repeat accident.)</i>			
Supervisor	Reviewed and approved by	Date report prepared	
<b>(attached any additional information or pictures)</b>			





# SCHOOL EMPLOYEES LOSS FUND (SELF)



## Supervisor's Investigation Report (cont'd)

Each accident regardless of whether it results in a personal injury, property damage, or a near miss should be investigated to determine the actual cause and to take proper action to prevent recurrence.

The accident should be investigated by the supervisor of the injured employee. The investigation should be conducted as soon as possible to get the most accurate information. **Your purpose is to obtain facts and prevent recurrence – not place blame.**

### Steps to Follow

1. If available, obtain notice of event. (IL Form 45)
2. Go to the scene immediately.
3. Find out what happened, obtain witness names.
4. Determine accident CAUSES.
5. Develop and implement corrective action to prevent repeat accident.
6. Complete all sections of the form.
7. Report to management.
8. Send completed forms to the SELF claims administrators, Sedgwick at fax 614-601-9515

This Guide is to stimulate questioning in determining the DIRECT and INDIRECT accident causes.

Questions To Ask	If The Causes Appear To Be	
	Conditions	Actions
WHY	<ul style="list-style-type: none"> <li>- did it exist?</li> <li>- had no one noticed and corrected it?</li> </ul>	<ul style="list-style-type: none"> <li>- was it being done?</li> <li>- was it being done this way?</li> <li>- was it (job or detail) necessary?</li> </ul>
WHAT	<ul style="list-style-type: none"> <li>- caused it to exist?</li> <li>- caused it to be involved?</li> </ul>	<ul style="list-style-type: none"> <li>- was its purpose?</li> <li>- other way could it be done?</li> <li>- details could be eliminated?</li> <li>- instructions were not followed?</li> </ul>
WHERE	<ul style="list-style-type: none"> <li>- was it?</li> <li>- was its source?</li> <li>- else does it exist?</li> <li>- can I find out?</li> </ul>	<ul style="list-style-type: none"> <li>- should it be done?</li> <li>- else is it being done?</li> </ul>
WHEN	<ul style="list-style-type: none"> <li>- did it occur?</li> <li>- do similar conditions occur?</li> </ul>	<ul style="list-style-type: none"> <li>- should it be done?</li> </ul>
WHO	<ul style="list-style-type: none"> <li>- was responsible for it?</li> <li>- can give me answers?</li> <li>- should take corrective action?</li> </ul>	<ul style="list-style-type: none"> <li>- is best qualified to do it?</li> <li>- can give me answers?</li> <li>- can show me what was being done?</li> </ul>
HOW	<ul style="list-style-type: none"> <li>- should it be corrected?</li> <li>- can it be avoided in the future?</li> </ul>	<ul style="list-style-type: none"> <li>- is the best way to do it?</li> <li>- can it (job or detail) be improved?</li> </ul>



# SCHOOL EMPLOYEES LOSS FUND (SELF)



## Employee's Report of Injury

### Information About You

District Name & # \_\_\_\_\_

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

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

Phone #: \_\_\_\_\_

Marital Status: S  M  D  W  Sex: M  F

Children under 18 (sex and age): \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Average Weekly Wage: \_\_\_\_\_

Length of Employment: \_\_\_\_\_ Days & Hours Worked: \_\_\_\_\_

Other Employment: \_\_\_\_\_

### Information About the Accident

Date of Accident: \_\_\_\_\_ Time: \_\_\_\_\_

Place of Accident: \_\_\_\_\_

What were you doing before the accident? \_\_\_\_\_

What happened? \_\_\_\_\_

Witnesses Name , if any: \_\_\_\_\_

Who did you report the injury to? \_\_\_\_\_

What date did you report it? \_\_\_\_\_

## Information About the Injury

What part of your body was injured? \_\_\_\_\_ Any  
other part or parts injured? \_\_\_\_\_ What kind  
of injury (strain, cut, broken bone)? \_\_\_\_\_

Exact location of pain(s): \_\_\_\_\_

## Information About the Treatment

What doctor is treating you (name, address, phone #)? \_\_\_\_\_

Who is your family doctor? \_\_\_\_\_

What clinic is treating you? \_\_\_\_\_

What hospital is treating  
you? \_\_\_\_\_

What treatment are you getting (medication, physical therapy, rest, etc.)? \_\_\_\_\_

Has the doctor told you to be off work? \_\_\_\_\_

## General Information

Have you ever injured the same part of your body before? \_\_\_\_\_ Explain:

Have you ever injured any other part of your body before? \_\_\_\_\_ Explain:

Do you have any serious illness (Diabetes, High Blood Pressure, etc.)? \_\_\_\_\_ Explain:

Have you understood the questions you have answered? \_\_\_\_\_ Signed:

Date

**Return this form to your Supervisor**