# School District of Horicon

# Employee Handbook Appendices

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# **Appendix A**

# **District Academic Calendar**

The school calendar shall be determined by the Board. The determination of the structure of the days, e.g. instructional, in-service, workdays, etc. shall be at the discretion of the Board. The district calendar is approved by the board of education each spring.

# SCHOOL DISTRICT of Horicon 2023-2024 SCHOOL CALENDAR

#### BOE Approved January 16 2023 **BOE Revised June 19, 2023** BOE Revised August 21, 2023

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31						

#### DAILY SCHEDULE FOR STUDENTS

Monday-Friday 4KDG through 5th 8:00 AM - 3:10 PM

Middle & High School 7:50 AM - 3:19 PM

- August New Teacher Orientation 7:30 AM-3:00 PM 21 24 District Retreat 7:30-3:00 pm 28-31 Professional Development
- Professional Development 11 AM-5 PM 30
- 30 District Open House 5-7 PM

#### September

- First Day of School 1
- 4 No School for Students/Staff - Labor Day

#### October

- 17 Parent/Teacher Conferences 4:00-7:30 PM
- Parent/Teacher Conferences 4:00-7:30 PM 19
- 20 No School/Teacher Professional Development

#### November

- End of 1st Quarter (44 days) 3 3 Early Release for Students Lunch Will Be Served Elementary Students Dismissed at 12:20 PM MS/HS Students Dismissed at 12:30 PM 22
  - No School for Students/Staff
- 23 No School for Students/Staff - Thanksgiving
- 24 No School for Students/Staff

#### December

22-29 No School Winter Break

#### January

- No School Winter Break 1
- 2 No School / Professional Development 3
- School Resumes 15
  - No School/ M.L. King Jr Day Teacher Professional Development
- 19 End of 2<sup>rd</sup> Quarter (43 days) Early Release for Students/ Lunch will be served 19 Elementary Students Dismissed at 12:20 PM
- MS/HS Students Dismissed at 12:30 PM
- February 16 No School/Teacher Professional Development No School/ President's Day 19 Teacher Professional Development
- March 5 Parent/Teacher Conferences 4:00-7:30 PM
- 7 Parent/Teacher Conferences 4:00-7:30 PM
- 22 End of 3<sup>rd</sup> Quarter (43 Days)
- Early Release for Students/ Lunch will be served Elementary Students Dismissed at 12:20 PM MS/HS Students Dismissed at 12:30 PM 25-29 No School Spring Break

#### April

#### May

High School Graduation 1:00 PM 18

- 23 Early Release for Students - Sectional Track Meet Host Day. Lunch will be served. Elementary Students Dismissed at 12:20 PM MS/HS Students Dismissed at 12:30 PM
- Last Day of School for Students (40 Days) 24 Early Release for Students/ Lunch will be served Elementary Students Dismissed at 12:20 PM MS/HS Students Dismissed at 12:30 PM Teacher Report & Planning 12:30-3:00 PM
- No School Memorial Day 27 28-29 Teacher Professional Development

#### June

3 Summer School Begins

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# **Appendix B**

# DISTRICT'S VISION AND MISSION STATEMENT

# **Vision Statement**

*"Where everyone discovers success – today, tomorrow, and forever."* 

# **Mission Statement**

"Educate. Engage. Empower. Every Day."

# Appendix C

	<b>LOYEE RIGHTS</b> HE FAIR LABOR STANDARDS ACT
FEI	SERAL MINIMUM WAGE \$7.25 PER HOUR BEGINNING JULY 24, 2009
The law requires e	mployers to display this poster where employees can readily see it.
OVERTIME PAY	At least 11/2 times the regular rate of pay for all hours worked over 40 in a workweek.
CHILD LABOR	An employee must be at least 16 years old to work in most non-farm jobs and at least 18 to work in non-farm jobs declared hazardous by the Secretary of Labor. Youths 14 and 15 years old may work outside school hours in various non-manufacturing, non-mining, non-hazardous jobs with certain work hours restrictions. Different rules apply in agricultural employment.
TIP CREDIT	Employers of "tipped employees" who meet certain conditions may claim a partial wage credit based on tips received by their employees. Employers must pay tipped employees a cash wage of at least \$2.13 per hour if they claim a tip credit against their minimum wage obligation. If an employee's tips combined with the employer's cash wage of at least \$2.13 per hour do not equal the minimum hourly wage, the employer must make up the difference.
NURSING MOTHERS	The FLSA requires employers to provide reasonable break time for a nursing mother employee who is subject to the FLSA's overtime requirements in order for the employee to express breast milk for her nursing child for one year after the child's birth each time such employee has a need to express breast milk. Employers are also required to provide a place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public, which may be used by the employee to express breast milk.
ENFORCEMENT	The Department has authority to recover back wages and an equal amount in liquidated damages in instances of minimum wage, overtime, and other violations. The Department may litigate and/or recommend criminal prosecution. Employers may be assessed civil money penalties for each willful or repeated violation of the minimum wage or overtime pay provisions of the law. Civil money penalties may also be assessed for violations of the FLSA's child labor provisions. Heightened civil money penalties may be assessed for each child labor violation that results in the death or serious injury of any minor employee, and such assessments may be doubled when the violations are determined to be willful or repeated. The law also prohibits retaliating against or discharging workers who file a complaint or participate in any proceeding under the FLSA.
ADDITIONAL INFORMATION	<ul> <li>Certain occupations and establishments are exempt from the minimum wage, and/or overtime pay provisions.</li> <li>Special provisions apply to workers in American Samoa, the Commonwealth of the Northern Mariana Islands, and the Commonwealth of Puerto Rico.</li> </ul>
	Some state laws provide greater employee protections; employers must comply with both.
	<ul> <li>Some employers incorrectly classify workers as "independent contractors" when they are actually employees under the FLSA. It is important to know the difference between the two because employees (unless exempt) are entitled to the FLSA's minimum wage and overtime pay protections and correctly classified independent contractors are not.</li> </ul>
	<ul> <li>Certain full-time students, student learners, apprentices, and workers with disabilities may be paid less than the minimum wage under special certificates issued by the Department of Labor.</li> </ul>

WAGE AND HOUR DIVISION UNITED STATES DEPARTMENT OF LABOR

≋WH₽

1-866-487-9243

TTY: 1-877-889-5827 www.dol.gov/whd

# **Appendix D**

# Request to Drive School Vans Horicon School District

_	First Name	9	Last Name	MI	Date of Birth	Driver License Number		
Yes	No		you ever been convicted of a					
		Are yo	ou currently listed on any nu	ırse abu	se registry?			
Expl	ain "Yes" Ans	swers						
Yes	No	Have	you been a resident in anoth	ner state	e within the previou	us two (2) years? If "Yes" list state(s).		
Yes	No	-	u have any medical disabilit ol over a motor vehicle?	y or dise	ease such as to prev	vent you from exercising reasonable		
	<ul> <li>As a driver of a school district van, I agree to report in writing to the School District of Horicon District</li> <li>Administrator, within 10 days: <ol> <li>Any accident in which I was involved as the operator of any motor vehicle regardless of who was at fault or if citations were issued;</li> <li>Any conviction or operating privilege withdrawal listed under s.343.12(7) Wis. Stats., or Ch. Trans. 112.51 WI Admin. Code that makes the operator ineligible to operate a motor vehicle to transport pupils;</li> <li>Any suspension or revocation of my operating privilege.</li> </ol> </li> </ul>							
	derstand that er background	-		plete in	formation in respec	ct to any material fact on this or any		
	ificantly chan			-		on or a medical condition that has ing reasonable control over a motor		

Applicant's Signature

Date

Office Use Only		
□ Approved	District Administrator or Designee	Date
Denied	District Automistrator of Designee	Date

# Appendix E

WOR	KPLACE VIOLENCE INCI	DENT RE	PORT FORM					
Case Numb	per (to be provided by the SRT)							
Date/Time Incident	5							
	Type of Incide	ent:						
LEVEL #1 LEVEL #2 LEVEL #3 Other	Threatening Behavior Bizarre Behavior	Y Y Y Y	N N N					
Co	omplete, in detail: (additional	pages ma	y be used)					
WHO (list all ind	ividuals involved)?							
WHAT (detailed	description of incident)?							
WHEN (date/tim	e - start & end)?							
WHERE (locatio	n where the incident took place)?							
	Additional inform	nation:						
		Signature of	f Manager/Supervisor/Pers Completing the Rep					
Name of Assig	ned Investigator:	(To be (	Completed by HRO/SRT)					
Date Investigation Completed:( " )								

# Appendix F

SCHOOL DISTRICT OF HORICON 20XX-20XX SCHOOL YEAR TEACHER CONTRACT FOR EMPLOYEES COVERED UNDER SECTION 118.21, WIS. STATS.

#### FULL-TIME CONTRACT

IT IS HEREBY AGREED by and between the Board of Education of the School District of Horicon, Dodge County, Wisconsin, hereinafter designated "Board" and **XXXXXXXXX** a professionally trained teacher legally qualified in the State of Wisconsin, hereinafter designated "Teacher" that the said Teacher shall be employed by the Board and the Teacher is to perform services as set forth below. This contract is subject to any collectively bargained base wage changes as well as Board policies and employee handbook. The parties agree that the Board policies and employee handbook are intended as guidance documents only, and the Board reserves the right to modify them at any time. This Agreement supersedes any and all agreements which may exist between the teacher and the Board. Both parties hereby accept employment upon the terms and conditions hereinafter set forth.

1. COMPENSATION: The teacher shall be paid a total annual wage of **\$XX,XXX.XX** payable in 20 or 24 installments. The teacher must select one of the two options listed.

□ I hereby request that my salary be paid in twenty [20] equal installments [September thru June]

□ I hereby request that my salary be paid in twenty-four [24] equal installments [September thru August] The above is the salary and may be increased during the term of the contract due to an increase in base wages or board approved compensation model changes. The decision to increase base wages or revise the compensation model is in the sole discretion of the District.

2. CONTRACT TERM: This Agreement covers the 20XX-2X school year commencing on or about the 19th day of August, 20XX. The contract shall contain 190 days which shall be designated at the discretion of the Board.

3. EMPLOYMENT RESPONSIBILITIES: The Teacher agrees to teach and supervise as assigned by the School Administrator and is subject to such rules and regulations as have been or may be hereafter adopted by the Board. The Teacher is also subject to the supervision and control of the School Administrator. Additional assignments may be given in areas where the teacher is certified.

The Teacher agrees to devote his or her full time to the duties and responsibilities normally expected of the Teacher's position during the term of this contract. The Teacher shall not engage in any pursuit, or accept any other employment, which interferes with the proper discharge of the Teacher's duties and responsibilities. The Board reserves the right, solely in its own discretion, to determine whether outside pursuits or other employment interferes with the proper discharge of Teacher's duties and responsibilities.

This Agreement is conditioned upon the Teacher's possession of a valid State of Wisconsin teacher's license or certificate as required by the laws of the State of Wisconsin and this agreement shall be invalid and automatically terminated if Teacher fails to fulfill the provisions of Section 118.21(2), Wis. Stats.

#### 4. TERMINATION:

A. The disqualification of the Teacher to continue teaching shall automatically terminate this Agreement. It is further agreed that this Agreement may be terminated by the Board in accordance with the employee handbook and policies of the Board. If the Teacher seeks release from this Agreement, he or she shall submit a written request to the Board and if approved, the Teacher shall be subject to the liquidated damages specified in section 5 of this contract. This Agreement will, in the Board's discretion, expire on the expiration date or the end of any month in which any of the following events occur:

- 1). The death of the teacher; or
- 2). Dismissal by the Board; or
- 3). Mutual agreement of the parties hereto as set forth in section B.

Said teacher will not be dismissed or suspended without "good and sufficient cause."

B. Termination by Mutual Consent: Upon mutual written agreement by the Board and the teacher this contract and the employment of the teacher may be terminated without penalty or prejudice against either the Board or teacher. In this event, the Board shall pay the teacher all remuneration and benefits accrued by, but unpaid during the period of employment immediately prior to such termination.

5. LIQUIDATED DAMAGES: In the event that the Teacher terminates services during the term of this Agreement, the Teacher shall pay the Board liquidated damages in the amount of five hundred dollars (\$500) if the Teacher

terminates services on or after July 1<sub>st</sub>, but before July 15th. The teacher shall pay liquidated damages in the amount of seven hundred fifty dollars (\$750) if the Teacher terminates services on or after July 15th but before but before August 1<sub>st</sub>. The teacher shall pay liquidated damages in the amount of one thousand dollars (\$1,000) if the Teacher terminates services on or after August 1<sub>st</sub> but before August 15th. Two thousand dollars (\$2,000) if the Teacher terminates services after August 15th. The Board reserves the right to waive the payment of liquidated damages on a case-by-case basis.

6. CONTRACT RENEWAL/NON-RENEWAL: Renewal and non-renewal of this Agreement shall be governed by section 118.22 Wis. Stats.

7. EXECUTION OF CONTRACT: This contract is null and void unless executed by the Teacher and filed in the office of the Superintendent of Schools on or before the Xth Day of June, 20XX. *Teachers are encouraged to return executed contract as soon as possible to assist the district in future staffing*.

8. TEACHER covenants he or she is not under contract with any other school district for the period covered by this Agreement.

9. INVALID PROVINGS/SAVINGS CLAUSE: If any article or part of this Agreement is held to be invalid by operation of law or by a tribunal of competent jurisdiction, or if compliance with or enforcement of any part should be restrained by any tribunal, the remainder of the Agreement shall not be affected thereby.

10. LAWS OF COMPETENT JURISDICTION: This Agreement is covered by the laws of the State of Wisconsin. It constitutes the entire agreement between the parties as to issues provided for in this Agreement.

11. MODIFICATIONS: This Agreement supersedes any and all other agreements that may exist between the Teacher and the Board and all modifications to this agreement must be in writing signed by the parties.

12. COMPLETE AGREEMENT: The parties understand and agree that this document contains the entire agreement. The teacher, in accepting this offer, is also acknowledging that the teacher is not in violation of any agreements or commitments to former employers such as, but not limited by enumeration to the following: non-compete clauses, obligation to return property, obligation not to disclose or use information, or other encumbrances that would impair the teacher's ability to perform the duties and responsibilities set forth in this contract.

IT IS FURTHER AGREED that this contract is made and shall remain subject to the provisions of the Wisconsin Statutes, as revised, and to the rules, regulations and policies of the School Board now existing and as may be hereinafter enacted and the Teacher agrees to, in all respects abide by and comply with the same. The Teacher shall take part in extra-curricular activities, in-service, workshops, curriculum study and others assigned by the Principal and approved by the Superintendent.

IT IS FURTHER AGREED that this contract is subject to modification as a result of any collective bargaining agreement between the HEA and the Board of Education as noted in the Negotiation's Agreement.

The parties hereto agree that this agreement constitutes a binding legal contract for the term set forth, the breach of which, by either party, will result in liability for damages to the other. This contract may be modified at any time during the terms hereof by the mutual written agreement of the parties hereto.

IN WITNESS WHEREOF, we have hereunto subscribed our hands at a duly called meeting of the School Board on this Xth Day of April, 20XX.

BOARD OF EDUCATION - SCHOOL DISTRICT OF HORICON

President

Clerk

Treasurer

Teacher

I, the undersigned Teacher, represent to the School Board that I am not now under a contract of employment with another school district for any period covered by this contract. I hereby accept the provisions as set forth in this contract.

# SCHOOL DISTRICT OF HORICON 20XX-20XX SCHOOL YEAR TEACHER CONTRACT FOR EMPLOYEES NOT COVERED UNDER SECTION 118.21, WIS. STATS.

#### PART-TIME CONTRACT XX%

IT IS HEREBY AGREED by and between the Board of Education of the School District of Horicon, Dodge County, Wisconsin, hereinafter designated "Board" and **XXXXXXXX** a professionally trained teacher legally qualified in the State of Wisconsin, hereinafter designated "Teacher" that the said Teacher shall be employed by the Board and the Teacher is to perform services as set forth below. This contract is subject to any collectively bargained base wage changes as well as Board policies and employee handbook. The parties agree that the Board policies and employee handbook are intended as guidance documents only, and the Board reserves the right to modify them at any time. This Agreement supersedes any and all agreements which may exist between the teacher and the Board. Both parties hereby accept employment upon the terms and conditions hereinafter set forth.

1. COMPENSATION: The teacher shall be paid a total annual wage of **\$XX,XXX.XX** payable in 20 or 24 installments. The teacher must select one of the two options listed.

□ I hereby request that my salary be paid in twenty [20] equal installments [September thru June]

 $\Box$  I hereby request that my salary be paid in twenty-four [24] equal installments [September thru August] The above is the salary and may be increased during the term of the contract due to an increase in base wages or board approved compensation model changes. The decision to increase base wages or revise the compensation model is in the sole discretion of the District

2. CONTRACT TERM: This Agreement covers the 20XX-2X school year commencing on or about the 20th day of August, 20XX. The contract shall contain **XX%** of 190 days which shall be designated at the discretion of the Board.

3. EMPLOYMENT RESPONSIBILITIES: The Teacher agrees to teach and supervise as assigned by the School Administrator and is subject to such rules and regulations as have been or may be hereafter adopted by the Board. The Teacher is also subject to the supervision and control of the School Administrator. Additional assignments may be given in areas where the teacher is certified.

The Teacher agrees to devote **XX%** of his or her full time to the duties and responsibilities normally expected of Teacher's position during the term of this contract. The Teacher shall not engage in any pursuit, or accept any other employment, which interferes with the proper discharge of the Teacher's duties and responsibilities. The Board reserves the right, solely in its own discretion, to determine whether outside pursuits or other employment interferes with the proper discharge of Teacher's duties and responsibilities.

This Agreement is conditioned upon the Teacher's possession of a valid State of Wisconsin teacher's license or certificate as required by the laws of the State of Wisconsin and this agreement shall be invalid and automatically terminated if Teacher fails to fulfill the provisions of Section 118.21(2), Wis. Stats.

#### 4. TERMINATION:

A. The disqualification of the Teacher to continue teaching shall automatically terminate this Agreement. It is further agreed that this Agreement may be terminated by the Board in accordance with the employee handbook and policies of the Board. If the Teacher seeks release from this Agreement, he or she shall submit a written request to the Board and if approved, the Teacher shall be subject to the liquidated damages specified in section 5 of this contract. This Agreement will, in the Board's discretion, expire on the expiration date or the end of any month in which any of the following events occur:

- 1). The death of the teacher; or
- 2). Dismissal by the Board; or
- 3). Mutual agreement of the parties hereto as set forth in section B.

Said teacher will not be dismissed or suspended without "good and sufficient cause."

B. Termination by Mutual Consent: Upon mutual written agreement by the Board and the teacher this contract and the employment of the teacher may be terminated without penalty or prejudice against either the Board or teacher. In this event, the Board shall pay the teacher all remuneration and benefits accrued by, but unpaid during the period of employment immediately prior to such termination.

5. LIQUIDATED DAMAGES: In the event that the Teacher terminates services during the term of this Agreement, the Teacher shall pay the Board liquidated damages in the amount of five hundred dollars (\$500) if the Teacher

terminates services on or after July 1<sub>st</sub>, but before July 15<sub>th</sub>. The teacher shall pay liquidated damages in the amount of seven hundred fifty dollars (\$750) if the Teacher terminates services on or after July 15<sub>th</sub> but before but before August 1<sub>st</sub>. The teacher shall pay liquidated damages in the amount of one thousand dollars (\$1,000) if the Teacher terminates services on or after August 1<sub>st</sub> but before August 15<sub>th</sub>. Two thousand dollars (\$2,000) if the Teacher terminates services after August 15<sub>th</sub>. The Board reserves the right to waive the payment of liquidated damages on a case-by-case basis.

6. EXECUTION OF CONTRACT: This contract is null and void unless executed by the Teacher and filed in the office of the Superintendent of Schools on or before the Xth Day of June, 20XX. *Teachers are encouraged to return executed contract as soon as possible to assist the district in future staffing*.

7. TEACHER covenants he or she is not under contract with any other school district for the period covered by this Agreement.

8. INVALID PROVINGS/SAVINGS CLAUSE: If any article or part of this Agreement is held to be invalid by operation of law or by a tribunal of competent jurisdiction, or if compliance with or enforcement of any part should be restrained by any tribunal, the remainder of the Agreement shall not be affected thereby.

9. LAWS OF COMPETENT JURISDICTION: This Agreement is covered by the laws of the State of Wisconsin. It constitutes the entire agreement between the parties as to issues provided for in this Agreement.

10. MODIFICATIONS: This Agreement supersedes any and all other agreements that may exist between the Teacher and the Board and all modifications to this agreement must be in writing signed by the parties.

11. COMPLETE AGREEMENT: The parties understand and agree that this document contains the entire agreement.

The teacher, in accepting this offer, is also acknowledging that the teacher is not in violation of any agreements or commitments to former employers such as, but not limited by enumeration to the following: non-compete clauses, obligation to return property, obligation not to disclose or use information, or other encumbrances that would impair the teacher's ability to perform the duties and responsibilities set forth in this contract.

IT IS FURTHER AGREED that this contract is made and shall remain subject to the provisions of the Wisconsin Statutes, as revised, and to the rules, regulations and policies of the School Board now existing and as may be hereinafter enacted and the Teacher agrees to, in all respects abide by and comply with the same. The Teacher shall take part in extra-curricular activities, in-service, workshops, curriculum study and others assigned by the Principal and approved by the Superintendent.

IT IS FURTHER AGREED that this contract is subject to modification as a result of any collective bargaining agreement between the HEA and the Board of Education as noted in the Negotiation's Agreement.

The parties hereto agree that this agreement constitutes a binding legal contract for the term set forth, the breach of which, by either party, will result in liability for damages to the other. This contract may be modified at any time during the terms hereof by the mutual written agreement of the parties hereto.

IN WITNESS WHEREOF, we have hereunto subscribed our hands at a duly called meeting of the School Board on this Xth Day of April, 20XX.

BOARD OF EDUCATION - SCHOOL DISTRICT OF HORICON

President

Clerk

Treasurer

I, the undersigned Teacher, represent to the School Board that I am not now under a contract of employment with another school district for any period covered by this contract. I hereby accept the provisions as set forth in this contract.

Teacher

Date

# Appendix G

POSITIONS	Salary Range Start	Salary Range End
Custodial Maintenance	\$16.50	\$22.96
Secretaries	\$16.50	\$22.34
Cleaners	\$15.00	\$17.50
Aides	\$15.00	\$21.33
Cooks	\$14.00	\$18.00
Food Servers	\$13.00	\$14.64

# Support Staff Compensation Salary Range

# **Horicon Compensation Model**

The School District of Horicon Professional Teaching Staff will be broken into 3 groups (Supporting Year 1, Supporting Year 2, and Summary Year). At the end of a 3 year evaluation cycle that concludes with the Summary Year, the teacher will receive supplemental compensation in the amount of \$1500.00 provided they have met the required components of the Educator Effectiveness Model (or other district evaluation tool) and have not received any scores of "1" in any Component Area. If the teacher receives a "1" in any Component Area or does not meet the 2.5 average within the total number of components of the EE Model, the teacher will not receive the supplemental compensation of \$1500.00 and will be placed on an additional Summary Year.

**Example:** Teacher A has a base salary of \$50,000.

- Supporting Year 1: \$50,000 + \$250 increase\* = \$50,250.00
- Supporting Year 2: \$50,250 + \$250 increase\* = \$50,500.00
- Summary Year: \$50,500 + \$250 increase\* + \$1500 supplemental compensation = \$52,250.00
- Base Salary for next Supporting Year 1 is \$52,250.00.

\*Yearly increase is determined by the Board of Education and based off of CPI.

Base Salary: \$40,000 (New Base) \$38,090 (Old Base)

<u>Top Salary:</u> \$74,440 (New Cap) \$71,340 (Old Cap) – May receive compensation from CPI but base salary remains the same.

\*\*\* Transitional year 20XX-XX Calendar Contracts only\*\*\*

For the 20XX-2X year as we transition to the three (3) year cycle the following will occur:

- 1. Calculations of total staff salaries at 4.00 % CPI will be distributed to the staff evenly at the amount of \$2,243.89 per teacher.
- 2. The 3-year cycle model is in effect beginning with the 2020-2021 school year.
- 3. Annually the BOE will review the factors relating to the calculation of hourly increases (CPI, STATE AID, Staffing, changes in Benefit costs, Annual performance evaluations, Comparison studies, etc...) and will set individual increases accordingly.

# **ADDITIONAL COMPENSATION Notes:**

The following are opportunities for School District of Horicon Professional Teaching Staff to earn additional supplemental compensation. These areas of supplemental compensation must be presented to and approved by the administration. The teacher must complete the program approval sheet prior to pursuing the compensation opportunity. Current year approved and completed additional compensation program will be applied to the next contract year. Example: Complete MA in December 20XX – Additional compensation applied to the contract for the 20XX-XX school year.

- 1. <u>Master's Degree Recognition</u>: \$2500.00 (compensation addition to the teacher's base salary). All approvals will be considered and approved by administration.
- 2. <u>National Board Certification for Teachers:</u> \$1000.00 (compensation addition to the teacher's base salary). All approvals will be considered and approved by administration.
- 3. <u>Additional Teaching Certification through the DPI:</u> \$1500.00 (compensation when the certification is being used during an academic year). All approvals will be considered and approved by administration and BOE based on its impact related to instruction and learning in the classroom. Example: a 316 Reading certification would clearly benefit instruction and learning.
- <u>Additional Certificate of Expertise in the Area of Education</u>: \$500.00 (supplemental compensation as a stipend when the area of expertise is being used during the academic year Example Trauma Team).
- 5. <u>The BOE will review options relating to CPI range Caps:</u> If the CPI exceeds 3.0 or falls below 1.0 the BOE may review options to maintain equity of raises between years.

# Appendix H

2023-2024 Co-Curricular Pay Schedule			
	Years of Service		
Position	<u>1-3</u>	<u>4-8</u>	<u>9+</u>
Varsity Football Head Coach	\$2,850	\$3,450	\$3,600
Varsity Basketball Head Coach - Boys (1)	\$2,600	\$3,100	\$3,600
Varsity Basketball Head Coach - Girls (1)	\$2,600	\$3,100	\$3,600
Varsity Wrestling Head Coach	\$2,350	\$2,800	\$3,250
Varsity Volleyball Head Coach	\$1,950	\$2,300	\$2,650
Varsity Cross Country Head Coach	\$1,500	\$1,850	\$2,200
Varsity Track Head Coach (2)	\$1,950	\$2,300	\$2,650
Varsity Track Head Coach (2)	\$1,950	\$2,300	\$2,650
Varsity Softball Head Coach	\$1,950	\$2,300	\$2,650
Varsity Baseball Head Coach	\$1,950	\$2,300	\$2,650
Varsity Golf Head Coach	\$1,500	\$1,850	\$2,200
HS Assistant/JV/Freshmen Football Coach (5)	\$2250	\$2,550	\$2,600
HS Assistant/JV/Freshmen Football Coach (5)	\$2250	\$2,550	\$2,600
HS Assistant/JV/Freshmen Football Coach (5)	\$2250	\$2,550	\$2,600
HS Assistant/JV/Freshmen Football Coach (5)	\$2250	\$2,550	\$2,600
HS Assistant/JV/Freshmen Football Coach (5)	\$2250	\$2,550	\$2,600
HS Assistant/JV/Frosh Basketball Coach - Boys (2)	\$1,900	\$2,250	\$2,600
HS Assistant/JV/Frosh Basketball Coach - Boys (2)	\$1,900	\$2,250	\$2,600
HS Assistant/JV/Frosh Basketball Coach - Girls (2)	\$1,900	\$2,250	\$2,600
HS Assistant/JV/Frosh Basketball Coach - Girls (2)	\$1,900	\$2,250	\$2,600
HS Assistant/JV/Freshmen Wrestling Coach	\$1,800	\$2,050	\$2,300
HS Assistant/JV/Freshmen Volleyball Coach (2)	\$1,500	\$1,850	\$2,200
HS Assistant/JV/Freshmen Volleyball Coach (2)	\$1,500	\$1,850	\$2,200
HS Assistant/JV/Freshmen Cross Country Coach	\$1,200	\$1,400	\$1,600
HS Assistant/JV/Freshmen Track Coach (2)	\$1,500	\$1,850	\$2,200
HS Assistant/JV/Freshmen Track Coach (2)	\$1,500	\$1,850	\$2,200
HS Assistant/JV/Freshmen Softball Coach	\$1,500	\$1,850	\$2,200
HS Assistant/JV/Freshmen Baseball Coach	\$1,500	\$1,850	\$2,200
MS Football Coach (2)	\$1,500	\$1,650	\$1,800
MS Football Coach (2)	\$1,500	\$1,650	\$1,800
MS Basketball Coach - Boys (2)	\$1,200	\$1,400	\$1,600
MS Basketball Coach - Boys (2)	\$1,200	\$1,400	\$1,600
MS Basketball Coach - Girls (2)	\$1,200	\$1,400	\$1,600
MS Basketball Coach - Girls (2)	\$1,200	\$1,400	\$1,600
MS Wrestling Coach	\$1,200	\$1,400	\$1,600
MS Volleyball Coach (2)	\$1,200	\$1,400	\$1,600
MS Volleyball Coach (2)	\$1,200	\$1,400	\$1,600
MS Cross Country Coach (Same Position as HS Asst.)	\$1,200	\$1,400	\$1,600
MS Track Coach (2)	\$1,000	\$1,100	\$1,200
MS Track Coach (2)	\$1,000	\$1,100	\$1,200
MS/HS Strength and Conditioning Coach	\$4,000	\$4,000	\$4,000
Academic Bowl Advisor	\$250	\$300	\$350
HS Annual/Yearbook Advisor (If Not Assigned as a Class)	\$1,800	\$2,000	\$2,300
HS Annual/Yearbook Advisor (If Assigned as a Class)	\$900	\$1,000	\$1,100
HS 9-12 Instrumental Advisor (Concerts, Marching Band, Pep Band)	\$1,600	\$1,800	\$2,100
HS Dance Chaperone	\$50	\$50	\$50
MS and Elementary Dance and Party Chaperone	\$40	\$40	\$40
HS Musical Director	\$1,600	\$1,800	\$2,100
HS Musical Assistant Director/Accompanist	\$600	\$700	\$800
HS Musical Assistant Director (4)	\$400	\$450	\$525
HS Musical Assistant Director (4)	\$400	\$450	\$525
HS Musical Assistant Director (4)	\$400	\$450	\$525
HS Musical Assistant Director (4)	\$400	\$450	\$525

Elementary Musical Director (1)	\$500	\$550	\$600
Elementary Musical Assist. Director (2)	\$300	\$350	\$400
MS/HS Play Director (1)	\$1,600	\$1,800	\$2,100
MS/HS Play Assist. Director	\$800	\$900	\$1050
MS/HS Play Assist. Director	\$800	\$900	\$1050
HS Student Council Advisor	\$1,600	\$1,800	\$2,100
HS Forensics Advisor	\$1,000	\$1,100	\$1,200
HS 9-12 Vocal Director	\$600	\$700	\$800
HS Prom Advisor	\$600	\$700	\$800
Senior Class Advisor	\$600	\$700	\$800
HS Spring Art Show Advisor	\$250	\$300	\$350
HS National Honor Society Advisor	\$1,000	\$1,100	\$1,200
FBLA Advisor	\$1,000	\$1,100	\$1,200
FCCLA Advisor	\$1,000	\$1,100	\$1,200
FFA Advisor	\$1,200	\$1,300	\$1,400
Science Olympiad Advisor	\$500	\$500	\$500
MS Student Council Advisor (1)	\$800	\$900	\$1,000
MS Forensics Advisor	\$800	\$900	\$1,000
MS 6-8 Vocal Director	\$600	\$700	\$800
EL/MS 5-8 Instrumental Director (Concerts)	\$1,100	\$1,300	\$1,500
MS Annual/Yearbook Advisor	\$900	\$1,000	\$1,100
Elementary Annual/Yearbook Advisor	\$900	\$1,000	\$1,100
Elementary Science and Art Fair Advisor (2)	\$150	\$150	\$150
EL K-5 Vocal Director	\$900	\$1,100	\$1,300
Math Meet Director (Host)	\$500	\$500	\$500
Forensics Judge (Per Meet)	\$100	\$100	\$100
Forensics Meet Director	\$500	\$500	\$500
HS Academic Bowl Meet Director	\$500	\$500	\$500
Math Meet Coach	\$250	\$300	\$350
HS Baseball - JV or Varsity Supervisor/Scoreboard/Book/Pitch Count	\$50	\$50	\$50
HS Basketball – Supervisor/Scoreboard/Book/Tickets per level	\$25	\$25	\$25
HS Football – JV or Varsity Supervisor/Scorebook/Tickets	\$50	\$50	\$50
HS Softball - JV or Varsity Supervisor/Scoreboard/Book	\$50	\$50	\$50
HS Volleyball – Supervisor/Scoreboard/Book/Tickets per level	\$25	\$25	\$25
HS Volleyball Tri or Quad – Supervisor/Scoreboard/Book/Tickets	\$50	\$50	\$50
HS Wrestling - JV or Varsity Supervisor/Scoreboard/Book/Tickets	\$50	\$50	\$50
MS Basketball Supervisor/Scoreboard/Book	\$35	\$35	\$35
MS Volleyball Supervisor/Scoreboard/Book	\$35	\$35	\$35
MS/HS Sports Announcer (Football, Basketball, Track)	\$50	\$50	\$50
MS Football Scoreboard	\$40	\$40	\$40
HS Events Tickets	\$50	\$50	\$50
HS or MS Track Meet Director	\$100	\$100	\$100
HS or MS Track Meet Clerk of Course	\$75	\$75	\$75
HS or MS Track Meet Score	\$50	\$50	\$50
HS or MS Track Meet Timer (8)	\$50	\$50	\$50
HS or MS Track Meet Events (LJ, TJ, HJ, PV, SP, Disc)	\$50	\$50	\$50

# **Appendix I**

# GRIEVANCE INITIATION INSTRUCTIONS SCHOOL DISTRICT OF HORICON

Complete the original and two copies. Please print or type. Give the original to your immediate supervisor. Keep one copy for your records.

# EMPLOYEE GROUP

EMPLOYEE'S NAME

HOME ADDRESS

SCHOOL

JOB TITLE

1. What is the action or situation about which you have a grievance? (Be specific as to names and locations.)

2. On what date did the above action or situation occur?

3. What provision of the *Employee Handbook* has been violated?

4. What do you think should be done about it, i.e., what is the remedy that you seek?

5. When was this grievance discussed with your immediate supervisor?

Name & Title of your immediate supervisor

NAME

TITLE

6. What other person do you want notified regarding this grievance?

MAILING ADDRESS

That person's role in this grievance:

EMPLOYEE'S SIGNATURE

# **GRIEVANCE APPEAL INSTRUCTIONS** SCHOOL DISTRICT OF HORICON

Complete the original and two copies of this form. Send the original to the next higher authority to hear the grievance. Retain one copy for your records. An appeal must be filed within the time limits provided or it will be dismissed with prejudice.

EMPLOYEE'S NAME	TITLE	DATE OF GRIEVANCE INITIATION
SCHOOL	SHIFT	LOCATION
1. I wish to appeal the griev	ance disposition signed	by:
Name	Title	Date
2. Nature of Grievance:		

3. What provision of the *Employee Handbook* has been violated?

4. Reason for Appeal:

EMPLOYEE'S SIGNATURE

DATE

# Appendix J

# SCHOOL DISTRICT OF HORICON 20XX-20XX SCHOOL YEAR NON-INSTRUCTIONAL STAFF LETTER OF APPOINTMENT

## MAY 1, 20XX

Let this letter of appointment serve as notification that the District is offering you employment for the 20XX-XX school year.

**Employee Name X** 

PositionX

Hours Per Day/WeekX

Hourly Wage X

#### **EMPLOYMENT CONDITIONS:**

- 1. The maximum number of work days for the 20XX-XX school year is **X**, and you are required to report on **X**. The District will provide you with your specific work schedule no less than ten business days prior to the date in which you are required to report.
- 2. This letter of intent is neither a guarantee of work nor a limitation on the number of hours per day or hours in a work week the administration may assign to you. In the rare instances when you may have overtime hours your supervisor/building principal must preauthorize those overtime hours before they are worked. The Board reserves the right to assign you additional hours as educational or operational needs require and to reduce or eliminate your position based upon budgetary or operational needs.
- 3. This assignment may be changed at the School Board's discretion and does not constitute a binding employment contract. As such, you are an at-will employee.
- 4. If any portion of this document conflicts with the District's *Employee Handbook*, policies, rules or procedures, this document shall be subservient.

Please contact me if you have any questions or concerns or if you do not intend to return to your anticipated position for the 20XX-XX school year.

Richard Appel, District Administrator

## THIS LETTER OF APPOINTMENT IS TO BE RETURNED BY JUNE XX, 20XX

		SCHOOL DISTRICT OF	HORICON	
ADMINISTRATI	ADMINISTRATION APPROVAL			
				_
Mr. Ri	chard Appel, District A	Administrator	Date	

# Appendix K

# Standards of Conduct – Harassment & Bullying Complaint Form

If you believe you have been the victim of bullying or harassment as defined by District policy 1662, 3362 and 4362, you must immediately fill out this complaint form completely and turn it into your principal or immediate supervisor, unless the principal is the subject of your complaint in which case you must deliver this form to the District Superintendent. The District will process your complaint(s) in accordance with applicable Board policies and the terms of this *Handbook*.

- 1) Name:
- 2) Address:
- 3) Home phone or number where you can be reached:
- 4) Position & work site:
- 5) Name of Immediate Supervisor:
- 6) Please state date(s) of the event or series of events causing the complaint:
- 7) Please state your complaint including the harm alleged and policy violated:
- 8) Please state specific facts of which you are aware to support your complaint and the names of any witnesses who may be able to corroborate your statements (list all details and attach additional sheets if necessary):

- 9) Please state the remedy sought:
- 10) If you will be represented in pursuing your complaint, please identify that individual or organization (if known):

Name:	
Address:	
Telephone:	
FAX:	
Signature:	Date Submitted:

# Appendix L

# SCHOOL DISTRICT OF HORICON ACCIDENT REPORT

1. GENERAL INFORMATION	
Employee Name	_ Address
Home Phone No	
Sex Date of Birth J	ob Title
	ion of Accident
Employees Work Schedule: Start Time	
Date & Time of Accident	
Data Injuny Roportad	
2. DESCRIPTION OF INJURY/ILLNESS (categorie	s listed on back)
	Type of Injury:
TREATMENT: 1st Aid Medical	
Physician	Address
	_ Address
	Address
Damage to property or equipment:	
3. DESCRIPTION OF INCIDENT (What happene	d and how did it happen?)
Statement of Witness(es):	
What caused the incident? Why did it happer	
Primary Cause	
Contributing Factors	
********	********
For Office Use (State what will be done to prev	ent recurrence)

# **Appendix M**

# **EMPLOYMENT POSTERS**

## **Employee Protections Against Use of Honesty Testing Devices**

English https://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd\_10861\_p.pdf

## **Employee Rights and Responsibilities**

## **Under the Family and Medical Leave Act**

English https://www.dol.gov/whd/regs/compliance/posters/fmlaen.pdf

## **Employee Rights Under the Fair Labor Standards Act**

English https://www.dol.gov/whd/regs/compliance/posters/minwagep.pdf

## Employee Rights under Wisconsin's Business Closing/Mass Layoff Notification Law

English <u>https://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd\_9006\_p.pdf</u> Spanish https://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd\_9006\_s\_p.pdf

## Federal Fair Labor Standards Act

https://www.dol.gov/whd/regs/compliance/posters/wh1385State.pdf

## Hazardous Chemicals in the Workplace?

English https://dsps.wi.gov/Documents/Programs/PublicSafety/SBD6894.pdf

## Hours and Times of Day Minors May Work in Wisconsin

English <u>https://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd\_9212\_p.pdf</u> Spanish <u>https://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd\_9212\_s\_p.pdf</u>

## Notice to Employees About Applying for Wisconsin Unemployment Benefits

English <u>https://dwd.wisconsin.gov/dwd/publications/ui/ucb\_7\_p.pdf</u> Spanish <u>https://dwd.wisconsin.gov/dwd/publications/ui/ucb\_7\_s\_p.pdf</u> Hmong <u>https://dwd.wisconsin.gov/dwd/publications/ui/ucb\_7\_h\_p.pdf</u>

## Notice to Wisconsin Workers with Disabilities Paid at Special Minimum Wage

English https://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd\_9116\_p.pdf

## **Notification Required When Employers Decide to Cease Providing a Health Care Benefit Plan** English <u>https://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd\_11054\_p.pdf</u>

#### Occupational Injuries and Illnesses Summary English https://www.osha.gov/pls/oshaweb/owadisp.show\_document?p\_table=STANDARDS&p\_id=11301

## **OSHA Job Safety and Health**

English <u>https://www.osha.gov/Publications/osha3165.pdf</u> Spanish <u>https://www.osha.gov/Publications/osha3167.pdf</u>

## **Public Employee Safety and Health**

English https://dsps.wi.gov/Documents/Programs/PublicSafety/SBD9301.pdf

## **Retaliation Protection for Health Care Workers**

English https://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd\_12210\_p.pdf

# U.S. DEPARTMENT OF LABOR WORKPLACE POSTER REQUIREMENTS FOR SMALL BUSINESSES AND OTHER EMPLOYERS

https://www.dol.gov/general/topics/posters

Your Rights Under USERRA: The Uniformed Services Employment and Reemployment Act (complete information from Dept. of Labor)

English https://www.dol.gov/vets/programs/userra/USERRA\_Private.pdf#Non-Federal

## Your Rights Under USERRA

The Uniformed Services Employment and Reemployment Rights Act

English https://www.dol.gov/vets/programs/userra/userra\_private.pdf

#### Wisconsin Fair Employment Law

English <u>https://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd\_4531\_p.pdf</u> Spanish <u>https://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd\_4531\_s\_p.pdf</u>

## Wisconsin Family and Medical Leave Act

English <u>https://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd\_7983\_p.pdf</u> Spanish <u>https://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd\_7983\_s\_p.pdf</u>

#### Wisconsin Minimum Wage Rates

English <u>https://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd\_9247\_p.pdf</u> Spanish <u>https://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd\_9247\_s\_p.pdf</u>

# **Appendix N**

# SCHOOL DISTRICT NOTICE OF PRIVACY PRACTICES REQUIRED NOTIFICATION

# THIS NOTICE IS BEING SENT TO YOU AS REQUIRED BY FEDERAL REGULATION. IT DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

# THE DISTRICT'S LEGAL DUTIES

The District is required by law to safeguard the privacy of your protected health information. The District is also required to give you this Notice about our legal duties and privacy practices relating to protected health information. Protected health information is any individually identifiable health information relating to your past, present or future physical or mental health or condition; the provision of health care services to you; or the payment of past, present, or future health services to you, whether that information is written, electronic, oral, or recorded in another medium. The information may be created or received by entities such as health care providers, health plans, or employers.

The District is required to abide by the terms of this Notice currently in effect. The District reserves the right to change our privacy practices and the terms of this Notice for all protected health information the District maintains even if the information was created or received before issuing the revised Notice. If a material revision is made, the District will distribute a copy of the revised Notice.

This Notice takes effect on July 1, 2013, and remains in effect until the District replaces it. You may request a copy of this Notice at any time or you may view it on the District's website www.horicon.k12.wi.us. For more information about our privacy practices, or for additional copies of this Notice, please contact the individual designated at the end of this Notice.

## **USES AND DISCLOSURES**

The District may use and disclose your health information for the following purposes:

**Treatment:** The District may use and disclose your protected health information to provide, coordinate, or manage your health care and any related services with a physician or other health care provider. For example, the District may disclose to a treating neurologist the name of your

treating general physician so that the neurologist may request medical records from the treating general physician.

**Payment:** The District may use and disclose your protected health information to determine and to fulfill coverage responsibilities and to provide benefits under the District's health plan. The District may also use and disclose your protected health information to obtain or provide reimbursement for benefits provided. For example, a third-party administrator may send you a detailed bill or explanation of benefits form, which may include information that identifies you, your diagnosis, and the procedures that you received.

**Healthcare Operations:** The District may use and disclose your protected health information for certain administrative, financial, legal, and quality improvement activities necessary to run our business and to support the core functions of treatment and payment. For example, such activities could include, but are not limited to, underwriting and other activities relating to the creation, renewal, or replacement of a contract for health benefits. Such activities also include sharing your protected health information with third party "business associates" that perform various activities for us.

**Family and Representatives:** The District must disclose your protected health information to you, as described in the Individual Rights section of this Notice. The District may disclose your health information to a family member, friend or other personal representative formally designated by you or by law to the extent necessary for the proper provision or payment of healthcare.

**Persons Involved in Your Care:** The District may use or disclose protected health information to notify, or assist in the notification of (including identifying or locating) a family member, a personal representative of the individual, or another person responsible for the care of the individual of the individual's location, general condition, or death. If you are present, you will have the opportunity to object to such use or disclosure of your protected health information. If you are not present, or the opportunity to agree or object cannot be provided due to incapacity or emergency, the District, in the exercise of professional judgment, may determine whether the disclosure is in your best interest. The District may use professional judgment and our experience with common practice to make reasonable inferences of your best interest in allowing a person to act on your behalf to receive protected health information.

**Business Associates:** The District may disclose protected health information to business associates that perform services on behalf of the District. To protect the privacy of your health information, the District will contractually require business associates to maintain appropriate safeguards to protect your protected health information.

**Abuse or Neglect:** The District may disclose protected health information about an individual whom we reasonably believe to be a victim of abuse, neglect, or domestic violence to a government authority, including a social service or protective services agency, authorized by law to receive reports of such abuse, neglect, or domestic violence.

**Health Oversight Activities:** With certain exceptions, the District may disclose your protected health information to a health oversight agency for oversight activities authorized by law, including audits; civil, administrative, or criminal investigations; inspections; licensure or disciplinary actions; civil, administrative, or criminal proceedings or actions; or other activities necessary for appropriate oversight of specified programs.

**Public Health Activities and Related Purposes:** The District may disclose your protected health information to public health authorities authorized by law to collect or receive such information for the purpose of preventing or controlling disease, injury, or disability, including but not limited to, the reporting of disease, injury, vital events such as birth or death, and the conduct of public health surveillance, public health investigations, and public health interventions. In addition, the District may disclose protected health information to a public health authority or other appropriate government authority authorized by law to receive reports of child abuse or neglect. The District may also disclose your protected health information to a person subject to the jurisdiction of the Food and Drug Administration (FDA) with respect to an FDA-regulated product or activity for which that person has certain responsibilities.

**Required by Law:** The District may use or disclose protected health information to the extent that federal, state or local law requires such use or disclosure and the use or disclosure complies with, and is limited to, the relevant requirements of such law.

**Judicial and Administrative Proceedings:** The District may disclose protected health information in the course of any judicial or administrative proceeding: 1) in response to an order of a court or administrative tribunal, or 2) in response to a subpoena, discovery request, or other lawful process.

**Law Enforcement Purposes:** The District may disclose your protected health information to assist law enforcement officials in the performance of their law enforcement duties and as required or permitted by law.

**Workers' Compensation:** The District may disclose protected health information as authorized by and to the extent necessary to comply with laws relating to workers' compensation or other similar programs that provide benefits for work-related injuries or illness without regard to fault.

**Health and Safety:** The District may, consistent with applicable law and standards of ethical conduct, use or disclose protected health information, if we, in good faith, believe the use or disclosure will avert a serious threat to health or safety of a person or the public.

**Plan Sponsor:** The District may disclose your protected health information to district officials as needed to fulfill our administrative responsibilities relating to the district's Health Care Plan.

**National Security:** The District may use and disclose the protected health information of individuals who are Armed Forces personnel for activities deemed necessary by appropriate military command authorities to assure the proper execution of the military mission, if the appropriate military authority has published by notice the appropriate information. The District BOE Approved 10-16-2023

may also disclose, to authorized federal officials, health information required for lawful intelligence, counterintelligence, and other national security activities. The District may disclose to a correctional institution or law enforcement official having lawful custody of an inmate or other individual protected health information about such inmate or individual upon a showing of necessity.

# **Appendix O**

## **INDIVIDUAL RIGHTS**

Access: You have a right to inspect and obtain a copy of protected health information about you, with exceptions, for so long as the District maintains the information. Requests for access must be made in writing and sent to the contact person at the end of this Notice. Requests for copies must be made in writing and sent to the contact person listed at the end of this Notice. You may request the information in a format other than hard copies and the District will comply with your request if practicable. You will be charged a reasonable cost-based fee for expenses such as copies, labor, postage, and preparation fees for a summary of the health information if you request one. The District may deny requests in certain cases. You have a right to request a review of certain denials of access.

**Restriction:** You have the right to request additional restrictions on the use and disclosure of your protected health information. Any such request must be made in writing and must state the specific restriction requested and to whom that restriction would apply. The District is not required to agree, but if it does, the District will not use or disclose, except in certain emergencies, protected health information in violation of the restriction.

**Confidential Communications:** You have the right to request that the District communicate with you regarding your protected health information by alternative means or at alternative locations. Your request must be in writing and must specify an alternative address or other method of contact. The District will accommodate reasonable written requests if you clearly state that the disclosure of all or part of your protected health information could endanger you.

**Amendment:** You have the right to request that the District amend your protected health information, if that information is in error. Your request must be in writing and state the reason for your request. If your request is denied, you have a right to submit a written statement disagreeing with the denial. The District has the right to issue a rebuttal to your statement, in which case, a copy will be provided to you.

**Accounting:** You have a right to receive an accounting of disclosures of your protected health information made by the District or our business associates for purposes other than treatment, payment or health care operations and certain other activities. The District will provide the first accounting to you in any 12-month period without charge. If you request an accounting more than once in a 12-month period, the District may charge you a reasonable cost-based fee. If the District will charge a fee, it will notify you in advance and provide you an opportunity to withdraw or modify your request for a subsequent accounting in order to avoid or reduce the fee.

**Authorization:** The Plan will obtain your written authorization for uses or disclosures that are not identified by this Notice. Subject to certain limitations, you may revoke any authorization in writing at any time. Your revocation will not affect any use or disclosure permitted by your authorization while it was in effect.

**Electronic Notice:** If you receive this Notice electronically, you may still obtain a paper copy upon request to the contact person listed at the end of this Notice.

# COMPLAINTS

You have the right to file a complaint if you believe your privacy rights have been violated. You may file a complaint by writing to the District's Privacy Officer (*see* Contact Information, below). You may also file a complaint with the Department of Health and Human Services. You will not be retaliated against for filing a complaint.

# CONTACT INFORMATION

For further information about the District's privacy policies, please contact:

# School District of Horicon District Administrator 920-485-2898

If you have concern or complaints regarding the District's privacy policies, please contact:

# School District of Horicon District Administrator 920-485-2898

# Appendix P

## JURY DUTY LEAVE PROCEDURES

- If an employee is notified that he has been selected for jury duty, the employee must provide a copy of the notice to the payroll department, including the dates to be served. This must be done as soon as possible after the notice is received.
- 2. Since jury duty assignments are often canceled, the employee should not enter leave in Aesop for jury duty until he has checked with the court to determine if he is required to report for duty or if the assignment has been cancelled. The employee should call the court as soon as he is allowed to each day, so that the leave is entered in Aesop as soon as possible if required to serve.
- 3. The employee is expected to return to work if dismissed from jury duty with more than two (2) hours left in his normal work day.
- 4. If a substitute teacher is called in, the substitute will be paid for at least a half day. If the employee returns to work, he should immediately return to his normal assignment and the substitute will be sent home or reassigned to other duties.
- 5. If a substitute teacher works four (4) or more hours, the substitute will receive a full day of substitute pay.
- 6. Any time the regular teacher returns to work prior to the end of the day, the substitute teacher may be reassigned other duties to fill out the half or full day.

# Appendix Q

# **Bereavement Leave Chart**

		One Day List
Thus		Sick/Personal/Unpaid/Vacation Support
	ee Day Paid Funeral	Staff Banked Personal
Parent	Step-Grandchild	Aunt
Spouse	Step-Grandparent	Uncle
Domestic Partner	Father-In-Law	Cousin
Child	Mother-In Law	Great-Aunt
Brother	Brother-In-Law	Great-Uncle
Sister	Sister-In Law	Spouse's Aunt
Grandchild	Spouse's Grandchild	Spouse's Uncle
Grandparent	Spouse's Grandparent	Spouse's Cousin
Step-Parent	Spouse's Step Grandparent	Spouse's Great Aunt
Step-Child	Spouse's Step-Brother	Spouse's Great Uncle
Step-Brother	Spouse's Step-Sister	Family Friend
Step-Sister	Spouse's Step-Parent	Neighbor

# Appendix **R**

# Page 2 of "INDIVIDUAL RETIREMENT BENEFIT AGREEMENT"

In the event of the Retiree's death while receiving the retirement benefits, and if Retiree is survived by a spouse, dependent, or designated beneficiary, such person shall be eligible to receive any unused portion of the Retiree's benefits using the same payment schedule as described above.

Primary	Any benefits payable by the School District of Horicon shall be paid in EQUAL SHARES, unless otherwise		
specified, to the following primary beneficiary(ies) who survive me.			
Name Last, First , MiddleRelationshipAddress			

Secondary	In the event the primary beneficiary(ies) die before me, the death benefit shall be paid in equal shares, unless		
otherwise specified, to the following secondary beneficiaries who survive me, if any.			
Name Last, First , MiddleRelationshipAddress			Address

The Board and the Retiree recognize that the retirement language in the *School District of Horicon Employee Handbook* may be modified in the future however the specific benefits provided to the Retiree in this agreement will not be changed.