

EXPLANATION: HB 5 IN THE 2014 GENERAL ASSEMBLY ESTABLISHED REQUIREMENTS FOR NOTIFICATION OF SECURITY BREACHES. FORMS TO PROVIDE NOTICE HAVE BEEN DEVELOPED AND ARE LOCATED ON THE KENTUCKY FINANCE & ADMINISTRATION CABINET WEBSITE.

FINANCIAL IMPLICATIONS: NONE ANTICIPATED

EXPLANATION: RECENTLY ENACTED 702 KAR 1:170 INCORPORATES THE KDE "DATA SECURITY AND BREACH NOTIFICATION BEST PRACTICE GUIDE." THIS PROCEDURE HAS BEEN UPDATED TO PROVIDE SUGGESTED INVESTIGATIVE STEPS.

FINANCIAL IMPLICATIONS: POSSIBLE COST OF INVESTIGATION

POWERS AND DUTIES OF THE BOARD OF EDUCATION

01.61 AP.11

### **Notice of Security Breach & Investigation Procedures**

#### **PROTECTION AND PREVENTION**

The District will take reasonable security measures in accordance with KRS 61.931 - KRS 61.933, to guard against the foreseeable loss or exposure of personal information that it maintains or possesses.

"Personal information" is defined as an individual's first and last name or first initial and last name; personal mark; or unique biometric or genetic print or image, along with any data element listed below:

- Account number, credit or debit card number, that, in combination with any required security code, access code, or password would permit access to an account;
- Social Security number;
- Taxpayer identification number that incorporates a Social Security number;
- Driver's license number, state identification card number, or other individual identification number issued by any agency;
- Passport number or other identification number issued by the United States government; or
- Individually identifiable health information as defined in 45 C.F.R. sec. 160.103 except for education records covered by the Family Educational Rights and Privacy Act, as amended, 20 U.S.C. sec. 1232g.

Personal information does not include information that is lawfully made available to the general public pursuant to state or federal law or regulation.

A "security breach" refers to:

- an unauthorized acquisition, distribution, disclosure, destruction, manipulation, or release of unencrypted or unredacted records or data that compromises or is reasonably believed to compromise the security, confidentiality, or integrity of personal information and results in the likelihood of harm to one (1) or more individuals; or
- an unauthorized acquisition, distribution, disclosure, destruction, manipulation, or release of encrypted records or data containing personal information along with the confidential process or key to unencrypt the records or data that compromises or is reasonably believed to compromise the security, confidentiality, or integrity of personal information and results in the likelihood of harm to one (1) or more individuals.

A security breach does not include the good-faith acquisition of personal information by an employee, agent, or nonaffiliated third party of the agency for the purposes of the agency if the personal information is used for a purpose related to the agency and is not disclosed to others without authorization.

### Notice of Security Breach & Investigation Procedures

#### INITIAL ASSESSMENT/INVESTIGATION OF SECURITY INCIDENT AND NOTICE

When the District receives information or notice prompting a reasonable belief that an event compromising the security of personal information maintained by the District or nonaffiliated third party on behalf of the District may have occurred, the District shall conduct a reasonable initial assessment or investigation to determine whether the event constitutes a “security breach” under the above definition.

Once it is determined that a security breach relating to personal information has occurred, the District shall within seventy-two (72) hours: 1) notify the Commissioner of the Kentucky State Police, the Auditor of Public Accounts, the Kentucky Attorney General and the Education Commissioner and 2) begin a reasonable and prompt investigation to determine whether the security breach has resulted or is likely to result in the misuse of personal information.

#### FOLLOW-UP INVESTIGATION/ASSESSMENT IF SECURITY BREACH CONFIRMED

If it is determined after initial investigation that a security breach has occurred, the District shall complete an investigation and assessment of the incident to determine whether the security breach has resulted or is likely to result in the misuse of personal information, which may include the following:

- Depending on the nature of the breach and sensitivity of information, take reasonable near-term steps to mitigate further unauthorized disclosure of personal information and risk of harm.
- Consider designating a lead investigator and investigative team with expertise keyed to the event (e.g. utilization of available District IT professionals if breach involves electronically maintained information, internet, or web resources).
- Interview relevant individuals to learn about the circumstances surrounding the incident and review logs, tapes or other resources.
- Identify individual(s) affected by the breach.
- Determine what personal information has been compromised and how disclosed.
- If applicable, identify affected machines, devices, and IT resources and preserve backups, images and hardware where possible.
- Estimate the likely impact of the compromised data’s exposure.
- Utilize professional assistance and consultation as necessary, analyze the likely cause of the breach.
- Coordinate internal and external communications related to the incident. Emphasize maintaining confidentiality during investigative stages of response activities.
- Seek involvement of law enforcement if there is reason to believe criminal activity has occurred.

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The District shall implement, maintain, and update security procedures and practices, including taking any appropriate corrective action, to protect and safeguard against security breaches.¶  
Once it is determined by the District or the District is notified of a security breach relating to personal information the following shall take place as soon as possible, but within seventy-two (72) hours of the determination:¶

**Notice of Security Breach & Investigation Procedures**

**NOTIFICATION**

Upon conclusion of the investigation, if it is determined that a security breach has occurred and that misuse of personal information has occurred or is likely to occur, the District shall within forty-eight (48) hours notify the Commissioner of the Kentucky State Police, the Auditor of Public Accounts, the Attorney General, the Commissioner of Education, and the Commissioner of the Department of Libraries and Archives. Within thirty-five (35) days of providing these notices, the District shall notify all individuals impacted by the security breach as provided by law.<sup>1</sup>

These notices shall be delayed upon written request of a law enforcement agency that the notices would impede an investigation. Security Breach Forms are located on the Kentucky Finance & Administration Cabinet website:

<http://finance.ky.gov/SERVICES/FORMS/Pages/default.aspx>.

If the investigation determines that misuse of personal information has not occurred or is not likely to occur, the above agency contacts shall be provided notice of the determination. In this case, notice to affected individuals is not required, but the District should maintain records reflecting and supporting the determination.

**CONTRACTS WITH NONAFFILIATED THIRD PARTIES - INFORMATION SECURITY**

On or after January 1, 2015, agreements calling for the disclosure of “personal information” to nonaffiliated third parties shall require the third party contracting with the District to follow information breach and security standards at least as stringent as those applicable to the District.

Contracts with such third parties shall specify how costs of data breach investigations and notices are to be apportioned.

**OTHER PRIVATE INFORMATION**

In the case of breach of information made private by law that does not fall within the definition of “personal information”, the District may engage in similar investigative, response, or notification activities as provided above. Alternatively, the District may, after reasonable investigation, provide notice to the individual whose restricted personal information has been acquired by an unauthorized person. Notification will be made in the most expedient time frame possible and without unreasonable delay, except when a law enforcement agency advises the District that notification will impede criminal investigation. Notification should be provided to the individual within three (3) working days of discovery of the breach but no later than thirty (30) working days.

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<#>Notify the Commissioner of the Kentucky State Police, Auditor of Public Accounts, Attorney General and the Commissioner of Education; and¶  
<#>Begin conducting a reasonable and prompt investigation in accordance with the security and breach investigation and practices in accordance with state law.¶

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**Notice of Security Breach & Investigation Procedures**

**OTHER PRIVATE INFORMATION (CONTINUED)**

Depending on the number of people to be contacted, notification may be in the form of a face-to-face meeting, phone call, posting on a Web site or sending a written notice to each affected person's home. Notice should include the specific information involved and, when known, an estimate of how long it has been exposed, to whom the information has been released and how the breach occurred. In addition, the individual should be advised whether the information remains in the physical possession of an unauthorized person, if it has been downloaded or copied, and/or, if known, whether it was used by an unauthorized person for identify theft or fraud purposes.

**REFERENCES:**

<sup>1</sup>KRS 61.933

KRS 61.931; KRS 61.932

[702 KAR 1:170](#)

[Data Security and Breach Notification Best Practice Guide](#)

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**Magnet and Gifted and Talented and IB Ratios and Allocations**

**Magnet Schools:** Dixie Magnet, Maxwell Spanish Immersion Magnet, and Lexington Traditional Magnet.

**Magnet Programs:** Bryan Station Middle Spanish Immersion and Bryan Station Senior Spanish Immersion, Tates Creek High School International Baccalaureate Program.

**Gifted/Talented Programs:** Accelerated Cluster Program at Meadowthorpe Elementary, Accelerated Cluster Program at Ashland Elementary, Accelerated Cluster Program at Tates Creek Elementary, Winburn Middle Accelerated Cluster, Tates Creek Middle Accelerated Cluster, SCAPA Bluegrass, SCAPA Lafayette, Henry Clay Liberal Arts Accelerated Cluster and MSTC at Paul Laurence Dunbar.

**International Baccalaureate Program:** Tates Creek Elementary, and Middle Schools.

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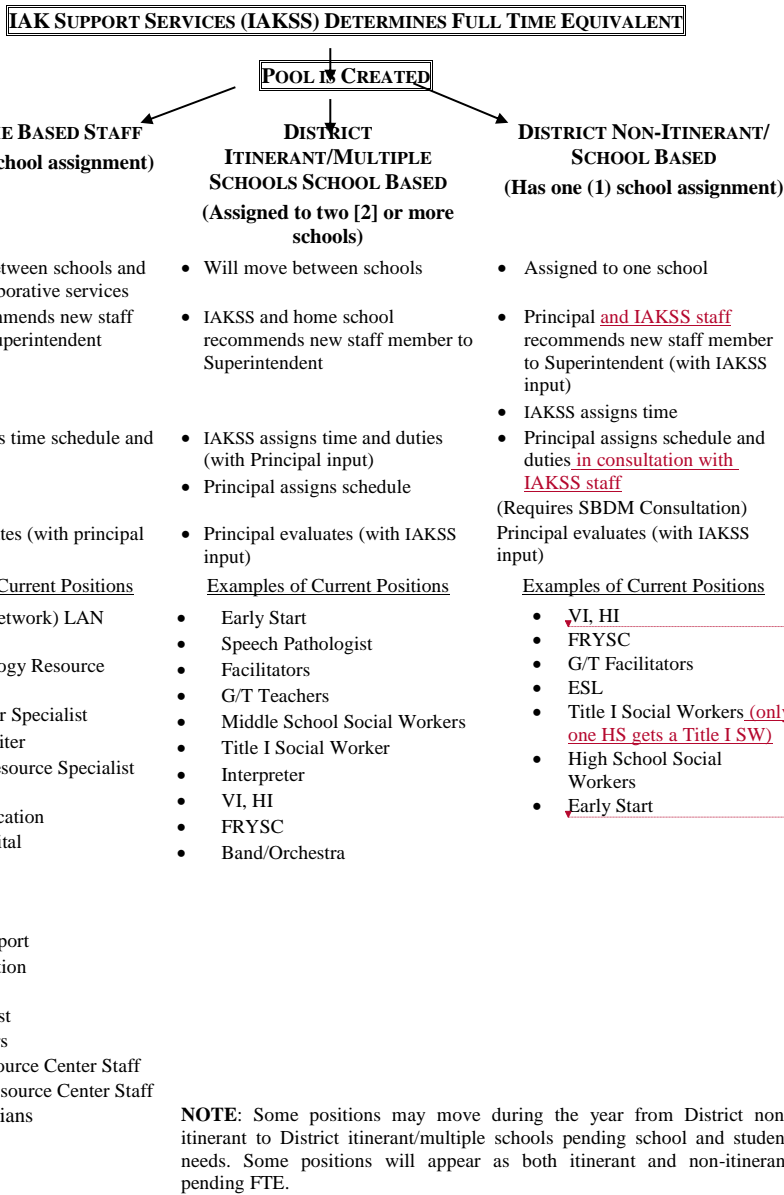
ELEMENTARY GIFTED AND TALENTED, MAGNET SCHOOLS AND PROGRAMS	
<b>Dixie Magnet</b> Primary 24:1 Intermediate 28:1	<b>Maxwell</b> Primary 24:1 Intermediate 28:1
Elementary Accelerated Cluster: Primary 24:1 Intermediate 28:1	
MIDDLE SCHOOLS	
<b>Lexington Traditional Magnet</b> Magnet Allocation = 1 Foreign Language Teacher	<b>Bryan Station Middle</b> Allocation = 1 Foreign Language Teacher <b>Bryan Station's Spanish Immersion</b> Staffed at 29:1
<b>Tates Creek Middle</b> Teachers Middle Accelerated Cluster program staffed at 29:1	<b>Winburn</b> Magnet Allocation = 1.2 Foreign Language Teachers Accelerated Cluster program staffed at 29:1
<b>SCAPA</b> Teachers/Consultants = 5.8 positions	

**Magnet and Gifted and Talented and IB Ratios and Allocations**

<b>HIGH SCHOOLS</b>	
<b>Bryan Station’s Spanish Immersion</b> Staffed at 30:1	<b>Lafayette</b> SCAPA Teachers/Consultants = 4.4 positions 1 G/T Facilitator shared with SCAPA Bluegrass (0.8 assigned to the school with 0.2 assigned to G/T IAKSS)
<b>Paul Laurence Dunbar</b> 1 G/T Facilitator (0.8 assigned to the school with 0.2 assigned to G/T IAKSS) .67 G/T Enrollment counted toward G/T staff and .50 G/T enrollment counted toward regular staff Program staffed at 30:1	<b>Henry Clay</b> 1 G/T Facilitator (0 .8 assigned to the school with 0.2 assigned to G/T IAKSS) .67 G/T Enrollment counted toward G/T staff and .50 G/T enrollment counted toward regular staff Program staffed at 30:1
<b>INTERNATIONAL BACCALAUREATE PROGRAM</b>	
<b>Tates Creek Elementary</b> Primary 24:1 Intermediate 28:1	<b>Tates Creek Middle</b> 0.5 Foreign Language Teacher 0.5 Arts and Humanities Teacher 1 IB Facilitator
<b>Tates Creek High School</b> International Baccalaureate Allocation = 0.5 Foreign Language Teacher 0.5 Counselor 1 IB Facilitator	

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### Itinerant/Non-Itinerant District Staffing



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<#>Facilitators¶  
<#>Interpreter¶

Deleted: <#>Band/Orchestra¶

**Itinerant/Non-Itinerant District Staffing**

**PAF PROCESS**

*Principal/ IAKSS /Human Resources verifies vacancy for District itinerants.*

<b>IAKSS/ HOME BASED STAFF</b>	<b>DISTRICT ITINERANT/ MULTIPLE SCHOOLS - SCHOOL BASED</b>	<b>DISTRICT NON- ITINERANT/SCHOOL BASED</b>
<ul style="list-style-type: none"> <li>• IAKSS staff making recommendation requests PAF from Budget/ Staffing office</li> <li>• IAKSS hiring staff completes PAF</li> <li>• Budget/Staffing office obtains approval from Budget Manager</li> <li>• PAF is submitted to Superintendent for hiring</li> </ul>	<ul style="list-style-type: none"> <li>• IAKSS staff making recommendation requests PAF from Budget/Staffing office (with Principal input)</li> <li>• IAKSS staff completes PAF (obtains Principal input)</li> <li>• Budget Manager signs PAF after consulting with Principal</li> <li>• PAF is submitted to Superintendent for hiring</li> </ul>	<ul style="list-style-type: none"> <li>• Principal and IAKSS staff making recommendation confer to confirm vacancy</li> <li>• Principal completes vacancy separation notice (<a href="#"><u>IAKSS staff for SW</u></a>)</li> <li>• Budget/Staffing office obtains approval from designated IAKSS staff</li> <li>• Principal (<a href="#"><u>IAKSS staff for SW</u></a>) completes the PAF and submits to <a href="#"><u>Budget and Staffing</u></a></li> <li>• <a href="#"><u>Budget and Staffing submits completed PAF to Human Resources</u></a></li> <li>• PAF is submitted to Superintendent for hiring</li> </ul>

**BEST PRACTICE**

1. IAKSS will make every effort to work with the school to make District program teachers full-time in a school, if the school council has the budget to support extra FTEs (i.e., Title I .6 and SBDM .4 = full time in school).

The following factors will be considered in all situations:

- Impact on other school(s) and the instructional program
  - Number of years the staff member has been employed in the District
  - Availability of candidates
  - Budget
  - Teacher’s/Principal’s preference for placement
2. A collaborative process will be utilized in selection of candidates and hiring of staff.
  3. Communication between school and IAKSS may occur in many forms (writing, informed conversations, shared observational information, etc.).



**Itinerant/Non-Itinerant District Staffing**

**BEST PRACTICE (CONTINUED)**

4. Collaborating with IAKSS, hiring staff and Human Resources staff shall be required when considering "critical shortage" personnel (ESL, Special Education, Gifted/Talented).
5. "Home School" shall refer to the school where the staff person spends the majority of his/her assigned time. Under certain circumstances, exceptions may be granted due to availability of space, relative work load, or other considerations. Exceptions shall be jointly decided upon by the designated IAKSS contact person and the principals whose schools are being served.
6. A collaborative process will be used with all evaluations. Principals and Central staff will work together to provide effective formative and summative evaluations. The assigned evaluator/supervisor will request information from other principals and District staff to assist with an effective and thorough evaluation process.

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PERSONNEL

- CERTIFIED PERSONNEL -

**Hiring**

The following procedures shall apply in the recruitment, selection, and employment of all certified personnel hired in the District.

**RECRUITMENT**

Recruiting shall be the responsibility of the Superintendent/designee. Efforts shall be made to recruit a quality staff to include, but not be limited to:

1. Working through placement bureaus of regional and state colleges and universities;
2. Working with state educational associations and the state department of education;
3. Advertising through appropriate media.

**POSTING**

Vacancies shall be posted on the Kentucky Department of Education and District web sites.

**CERTIFIED VACANCIES**

The Superintendent/designee shall notify the Chief State School Officer of the vacancy at least thirty (30) days prior to filling the position. When such a vacancy needs to be filled in fewer than thirty (30) days to prevent disruption of necessary instructional or support services, a waiver may be requested from the Chief State School Officer. If the waiver is approved, the appointment shall not be made until the person selected has been approved by the Chief State School Officer.

Deleted: All postings at the local level shall be made within five (5) working days of each certified vacancy opening.¶

**APPLICATIONS**

All applications for positions shall be made utilizing electronic forms furnished by the Department of Human Resources.

The Superintendent/designee shall review each application for completeness and shall send an e-mail notice to each applicant indicating (a) the date of the review and (b) any additional materials requested.

**CRIMINAL RECORD INQUIRY**

The District shall make appropriate inquiries with law enforcement agencies to ascertain if an applicant has a criminal record. The applicant shall submit with the application his/her check or money order in the required amount made payable to the "Fayette County Board of Education." To complete this requirement, the applicant recommended for hire shall be finger-printed by the Department of Human Resources.

**EEOC COMPLIANCE**

The Equal Employment Opportunity Commission recordkeeping regulations require the District to maintain records in chronological order of the name, address, sex and race of all persons who have applied for employment, including the dates on which such applications are made.

**Hiring****ELIGIBILITY VERIFICATION**

The United States Immigration and Naturalization Service (INS), Immigration Reform and Control Act of 1986, requires that eligibility for employment in the United States shall be verified. Accordingly, the applicant shall file with the Department of Human Resources the required documents for verification as specified by the INS. The applicant shall advise the Department of Human Resources, in advance, of the need to determine appropriate alternative documents if s/he is unable to provide the required documents.

**SUPPORTING MATERIALS**

*Certification* - Certified personnel shall hold valid certification issued by the state of Kentucky and shall file the certificate with the Department of Human Resources. Individuals who are to complete the beginning teacher internship shall file a valid Confirmation of Employment/Statement of Eligibility.

The Department of Human Resources shall review the files of all certified employees appointed to positions and provide the appropriate administrator with a listing of any credentials that are incomplete.

*References* - Beginning teachers shall include in their list of references the names of their supervising or cooperating teacher and college coordinator of student teaching. Experienced personnel should include the name of their present principal and/or supervisor. The applicant shall provide specific and correct names, mailing addresses (including ZIP code), and email addresses for all references.

For other applicants, three (3) confidential references are required. The applicant shall provide specific and correct names, addresses (including ZIP code), and email addresses for all references.

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**EXPIRATION OF CERTIFICATION/LICENSURE**

When an employee's required certification/license has expired, the following process shall be implemented:

1. The employee will be notified in writing of the expired certificate/license and temporary placement and guidelines.
2. When an employee has allowed a certification/license to expire, the employee will be temporarily placed in a non-certificate/license required position for thirty (30) days to allow for follow up on renewal of the certificate/license.
3. When the period of thirty (30) days has lapsed and certificate/license has not been renewed/updated, the employee will be terminated.
4. The employee may reapply when the certificate/license has been renewed; however the District will be under no obligation to rehire the individual.
5. The employee's salary will be adjusted to the thirty (30) temporary placement job salary, and the District will be under no obligation to retroactively pay the individual once the certificate/licenses has been renewed/updated.
6. If the employee is able to renew/update the certificate/license before the thirty (30) day timeline, they will be placed in a position similar to the one previously held; however, there is no guarantee of placement in the same position or at the same location.

**Hiring****ADDITIONAL DOCUMENTS**

In the event employment is offered to the applicant, s/he shall submit the following additional required support documents/items or take the appropriate additional action, as specified:

Health Certificate - Prior to beginning work, employees are required to submit a health certificate. The certificate shall verify a completed medical examination within the ninety (90) day period immediately prior to the employment date.

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ADA Form - The Special Notice to Disabled Individuals shall be available to employees who wish to volunteer information concerning any personal physical or mental disability in accordance with the Rehabilitation Act and Americans with Disabilities Act.

Tax Exemption Certificates - The W-4 (federal) and K-4 (Kentucky) tax exemption certificates shall be completed for income tax purposes.

**Deleted:** Kentucky Teacher Retirement System (KTRS) - Certified employees entering the profession, or reentering after having withdrawn funds from the KTRS, shall apply for membership in the KTRS.¶

Employment Eligibility Verification - The Form I-9 shall be completed for employment eligibility.

Job Description - New employees shall sign their job description, which shall delineate the general duties and responsibilities of the position. (Job descriptions shall not be considered all-inclusive descriptions of the job, but shall indicate the general parameters of the duties and responsibilities of the position.)

**SELECTION FACTORS**

The Superintendent/designee shall screen applicants based on the following factors:

1. Certification (when required for the position)
2. Educational background
3. Previous work experience
4. Recommendations
5. Results from required testing

**HIRING OF RELATIVES OF THE PRINCIPAL/HIRING MANAGER**

The Superintendent shall not employ a relative of a member of the Board.

A relative of the Superintendent shall not be employed except as provided by KRS 160.380.

The Superintendent shall not employ a relative of any employee to work under the direct or indirect supervision of that employee. "Relative" means father, mother, brother, sister, husband, wife, son, daughter, aunt, uncle, (including subcategories of in-law, half and step relatives).

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**Deleted:** If the best qualified applicant for a teaching position is related, by blood or by marriage, to the Principal/Hiring Manager, the following procedure shall be implemented before any commitment of employment is made:¶

**Hiring****COMPLETION OF EMPLOYMENT PROCESS**

For SBDM schools, hiring shall follow statutory guidelines and the provisions of Policy 02.4244, and the Superintendent shall complete the hiring process. Decisions on It's About Kids Support Services and District-wide personnel shall be made by the Superintendent/designee. The Superintendent shall inform the Board of the appointment of all personnel.

**HIRING OF RETIRED PERSONNEL**

Re-employment on a full-time basis of persons previously retired from the District shall not be a standard practice. In an emergency situation, however, consideration and employment of retired personnel is acceptable, as long as it can be demonstrated that the individual is the best qualified person for a particular vacancy.

**SCREENING/INTERVIEW**

Interview teams, as appointed by the Superintendent/designee, shall determine those applicants to be interviewed in accordance with the needs of the school system.

The first phase of applicant screening for basic qualifications shall be conducted by the Department of Human Resources. Interview teams led by the school Principal, hiring manager, and/or the SBDM council, as appropriate under law, which include subject area specialists and principals, shall review and evaluate only those applicants who have successfully completed the credential screening by the Department of Human Resources.

The Division of Human Resources shall make available to the Principal and SBDM councils information regarding qualified applicants.

Applicants may be requested to provide additional information or to undergo further interviews regarding position-specific qualifications.

The Principal shall communicate the candidate selected for employment to the Department of Human Resources for validation and presentation to the Superintendent. In schools operating under SBDM, the Principal shall confer with the Council before submitting the selection.

**Deleted: HIRING OF RELATIVES (CONTINUED)**

<#>The Principal/Hiring Manager shall submit to the Director of Human Resources the applicant's name and relationship.¶  
<#>The Director shall advise the Superintendent in writing of the applicant who has been recommended.¶  
<#>The Superintendent shall approve or disapprove the recommendation and so advise the Director.¶  
<#>The Director shall advise the Principal/Hiring Manager of the Superintendent's decision.¶  
<#>If approved for employment by the Superintendent, the applicant shall be reported to the Board at the next meeting.¶  
<#>The applicant may begin work after receipt of written notice from the Superintendent.¶

**Hiring**

**SCREENING/INTERVIEW (CONTINUED)**

The Department of Human Resources shall prepare and distribute necessary forms and instructions to all administrators responsible for interviewing and placement of District employees. However, the official offer of employee shall be made by the Division of Human Resources.

**USE OF CONSULTANTS**

Consultant contracts must be approved in accordance with Board policy 01.11.

Consultants are those individuals retained by the District via contract to provide services to the District or an individual school that present District staff are unable to provide. The kinds of assistance sought from consultants may include, but are not necessarily limited to, services such as: conducting fact-finding studies, surveys, and research; providing counsel and/or training in areas requiring special expertise; and, assisting the District with policy development and/or program recommendations.

Before entering into any agreement with a consultant, the District shall obtain from the consultant a written proposal that details, at a minimum, the following information regarding the consultant and services to be provided:

1. The qualifications held by the consultant, which offer proof of the individual’s experience and expertise in the appropriate service area;
2. The specific measurable objectives to be accomplished;
3. The specific tasks to be performed;
4. The target dates for completion of tasks;
5. The method to be used to report results to the District and/or to deliver any “product,” e.g., plans, recommendations, training, etc.; and;
6. Total costs.

Written contracts, based on the above proposal, shall be required in all cases where a consultant is employed by the District. Such contracts shall specify the full amount to be expended for the contracted services, including amounts for travel and related expenses.

Employees that have retired under the Kentucky Teachers’ Retirement System (KTRS) may be used as consultants on a limited basis, but only in keeping with requirements of KTRS.

**CONTRACT**

Personnel hired by the Superintendent shall be notified of their contractual obligations electronically through Applitrack. Electronic contracts must be signed and returned to the Department of Human Resources within thirty (30) days of receipt.

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PERSONNEL

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**Criminal Records Release Authorization**

**In order to obtain required state and national background checks, District employees and student teachers assigned within the District must report to the Department of Human Resources in the Application Center, At that time, their fingerprints will be recorded electronically and sent to the appropriate officials for processing. The cost of this service will be \$40.00 (forty dollars).**

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PERSONNEL

**Request for Protected Health Information**

This form may be used to grant release of a patient's protected health information by the health care provider for an employee or student for purposes other than treatment, payment or health care operations.

I, \_\_\_\_\_, hereby authorize \_\_\_\_\_  
*Name of Employee, Student 18 or older, or Parent/Guardian*      *Name of Physician/Practice*  
to use and/or disclose my protected health information described below to \_\_\_\_\_  
*School District*

My protected health information will be used or disclosed upon request for the following purposes (name and explain each purpose): \_\_\_\_\_

This authorization for use and/or disclosure applies to the following information (please mark those that apply):

- Any and all records in the possession of the above-named physician or physician's practice, including mental health, HIV, and/or substance abuse records. (Please cross out any item you do not authorize to be released.)
- Records regarding treatment for the following condition or injury \_\_\_\_\_ on or about \_\_\_\_\_.
- Records covering the period of time \_\_\_\_\_ to \_\_\_\_\_.
- Other (Specify and include dates.) \_\_\_\_\_.

I understand that I have the right to revoke this authorization, in writing, at any time by sending such written notification to above-named physician/practice. I also understand that my revocation is not effective to the extent that the persons I have authorized to use and/or disclose my protected health information have acted in reliance upon this authorization.

I understand that I do not have to sign this authorization and that the above-named physician/practice may not condition treatment or payment on whether I sign this authorization.

I understand that information used or disclosed pursuant to this authorization may be subject to re-disclosure by the recipient and no longer protected by federal laws and regulations regarding the privacy of my protected health information. **NOTE:** Redisclosure of HIV information shall comply with KRS 214.181 and KRS 214.625, which impose additional limitations on release of such information.

This authorization expires on the following date or event: \_\_\_\_\_.

I certify that I have received a copy of this authorization.

\_\_\_\_\_  
*Signature of Patient or Legally Recognized Representative*      *Date*

\_\_\_\_\_  
*Name of Patient or Legally Recognized Representative*      *Legally Recognized Representative's Authority*



**Notice of Privacy Practices**

**THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.**

Fayette County Public Schools ("FCPS"), as your group health plan, is required by federal law (the Health Insurance Portability and Accountability Act of 1996 or "HIPAA") to protect your personal health information by keeping it private and following certain rules that dictate whether and when FCPS can use or disclose your health information. Additionally, the law requires that FCPS maintain and provide upon request this Notice of Privacy Practices to inform its health plan members of their rights regarding health information and legal duties of FCPS and privacy practices with respect to protected health information.

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FCPS is required to follow the terms of the Notice currently in effect. However, FCPS reserves the right to change the terms of this Notice and apply those changes to all protected health information currently maintained by FCPS. If this Notice is changed, you will be notified of the changed Notice within 60 days after the change is made, and a copy of the new Notice will thereafter be available upon request through the office of the Privacy Official.

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For further information about this Notice, your rights and legal duties of FCPS regarding your health information, please contact FCPS Privacy Official, 1126 Russell Cave Rd., Lexington, KY 40505, 859-381-4118.

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**PROTECTED HEALTH INFORMATION**

Protected health information is any written and oral health information about you, including demographic data that can be used to identify you. This is health information that is created or received by FCPS and that relates to your past, present or future physical or mental health or condition. It includes but is not limited to your name, age, address, a history of your illness or condition, injury or symptoms, tests given, x-rays taken and laboratory work conducted, and treatment provided to you. This Notice describes how your protected health information may be used or disclosed and what controls you may exercise over the use of your health information.

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**USES AND DISCLOSURES OF PROTECTED HEALTH INFORMATION**

FCPS may use your protected health information for purposes of providing treatment, obtaining payment for treatment, and operating the health plan. Your protected health information may be used or disclosed only for these purposes unless FCPS has obtained your authorization or the use or disclosure is otherwise permitted by the HIPAA privacy regulations or state law. Disclosures of your protected health information for the purposes described in this Notice may be made in writing, orally, or by facsimile. Listed below are descriptions of specific ways in which FCPS may use and disclose your protected health information.

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**TREATMENT**

FCPS may use and disclose your protected health information to coordinate or manage your health care and any related services. For example, FCPS may disclose your protected health information to physicians or other health care providers who may be treating you or consulting with respect to your care. FCPS may also disclose your protected health information to others who may be involved in your medical care such as health care workers, family members, or clergy.

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**Notice of Privacy Practices**

**PAYMENT**

Your protected health information will be used, as needed, to obtain payment for the health care services provided to you. This may include communications to your insurance carrier or the Kentucky Office of Public Employee Health Insurance. For example, FCPS may need to disclose information to your insurance carrier to determine your eligibility for certain benefits or whether a particular service is covered under your plan. FCPS may also need to disclose protected health information to authorize payment of certain services provided to you.

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**OPERATIONS**

FCPS may use or disclose your protected health information as necessary for the operation of the health plan. For example, FCPS may use your protected health information in order to conduct utilization reviews. FCPS may also use your protected health information in order to evaluate the effectiveness of the health plan. Additionally, FCPS may use your protected health information for the purpose of renewing or replacing a health insurance contract or health benefits. Some other uses and disclosure for health care operations may include: activities related to improving health care or reducing health care costs; underwriting and other insurance related activities; business planning and/or development; and internal grievance resolution.

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**TREATMENT ALTERNATIVES**

FCPS may use or disclose your protected health information to tell you about or recommend possible treatment options or alternatives that may be of interest to you.

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**HEALTH RELATED BENEFITS AND SERVICES**

FCPS may use or disclose your protected health information to tell you about health related benefits or services that may be of interest to you.

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**INDIVIDUALS INVOLVED IN YOUR CARE OR PAYMENT OF YOUR CARE**

FCPS may use or disclose your protected health information to a friend or family member who is involved in your medical care or the payment of your medical care. FCPS may also tell your family or friends your location at the time of your care or that information may be communicated to an entity assisting in a disaster relief effort in order to communicate your condition status and location to your family. If you want any of this information restricted, then you must communicate that to FCPS using the appropriate procedure.

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**AS REQUIRED BY LAW**

FCPS will disclose your protected health information when required to do so by federal, state, or local law. This may include reporting of communicable diseases, wounds, abuse, disease/trauma registries, health oversight matters and other public policy requirements. FCPS may be required to report this information without your permission.

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**TO AVERT A SERIOUS THREAT TO HEALTH OR SAFETY**

FCPS may use and disclose protected health information to avert a serious threat to health or safety. FCPS may use and disclose protected health information for the following public activities and purposes: to prevent, control or report disease, injury or disability as permitted by law; to report vital events such as birth or death as permitted or required by law; to conduct public health surveillance, investigation and interventions as permitted or required by law; to collect or report adverse events and product defects; to notify a person who has been exposed to a communicable disease or who may be at risk of contracting or spreading a disease as authorized by law.

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### Notice of Privacy Practices

#### HEALTH OVERSIGHT ACTIVITIES

FCPS may disclose protected health information to a health oversight agency authorized by law for audits, investigations, inspections, and licensure. Health oversight agencies generally oversee the health care system, government health programs (such as Medicare and Medicaid), and the enforcement of civil rights laws.

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#### IN CONNECTION WITH JUDICIAL AND ADMINISTRATIVE PROCEEDINGS

FCPS may disclose your protected health information in the course of any judicial or administrative proceeding in response to an order of a court or administrative tribunal as expressly authorized by such order. In certain circumstances, FCPS may disclose your protected health information in response to a subpoena to the extent authorized by state law if we receive satisfactory assurances that you have been notified of the request or that an effort was made to secure a protective order.

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#### FOR LAW ENFORCEMENT PURPOSES

FCPS may disclose protected health information if asked to do so by a law enforcement official under the following circumstances: If you have incurred certain injuries or wounds that are legally required to be reported; in response to a court order, subpoena, warrant, summons, investigative demand, or similar process; to identify or locate a suspect, fugitive, material witness, or missing person; under certain limited circumstances when you are the victim of a crime; if FCPS suspects criminal conduct on its premises; in emergency circumstances to report a crime, its location, or information about the person who may have committed the crime.

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#### USES AND DISCLOSURES THAT YOU AUTHORIZE

Other than as stated above, FCPS will not disclose your health information without your written authorization. After having given your authorization, you may revoke it in writing at any time except to the extent that FCPS has taken action in reliance upon your authorization.

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#### INDIVIDUAL RIGHTS

You have the following rights regarding your protected health information:

**Right to Request Restrictions.** You have the right to request that FCPS not use or disclose certain parts of your protected health information for the purposes of treatment, payment or health care operations. You may also request that FCPS not disclose your protected health information to family members or friends. For example, you may request that FCPS limit what information it provides to your family members regarding claims being processed for your health care.

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**FCPS is not required to agree to your request.** If FCPS agrees to your restrictions, FCPS will comply with your wishes unless the information is needed to provide emergency treatment to you. To request restrictions, you must make a written request to the Privacy Official identified on page 1 of this Notice. In your written request, you must state (1) the specific information you want to limit; (2) whether you want to limit use of the information and/or disclosure of the information; and (3) to whom you want the restriction to apply (for example, disclosures to your spouse). Upon receipt of your request, you will be notified whether or not FCPS will agree to your restrictions. Either you or FCPS may terminate the agreement to a restriction under certain circumstances.

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### Notice of Privacy Practices

#### INDIVIDUAL RIGHTS (CONTINUED)

**Right to Request Confidential Communications.** You have the right to request that FCPS communicate with you using alternative means or at alternative locations if you clearly state to FCPS that the disclosure of all or part of that information could endanger you. For example, you may ask that FCPS call you at a certain phone number and indicate whether or not to leave a message for you.

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To request confidential communications, you must make a written request to the Privacy Official identified on page 1 of this Notice. In your written request, you must state specifically how or where you wish to be contacted and that communication by regular means could endanger you. FCPS will honor all reasonable requests for confidential communications.

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**Right to Inspect and Copy Your Protected Health Information.** You have the right to inspect and copy your protected health information, including most of your medical and billing records. You do not have the right to review any psychotherapy notes, information created for use in legal actions, or other information covered by certain laws.

If you would like to inspect and/or copy your protected health information, you must submit your request in writing to the Privacy Official identified on page 1 of this Notice. If you request a copy of the information, FCPS may charge you a reasonable fee for copying, postage, or other expenses related to your request.

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FCPS may deny your request to inspect and/or copy your health information. If your request is denied, depending on the circumstances of that denial, you may have the right to have a decision of denial reviewed.

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Please contact the Privacy Official identified on page 1 of this Notice if you have questions about access to your protected health information.

**Right to Request Amendments to Your Protected Health Information.** If you think the protected health information FCPS has in your record is incorrect or incomplete, you may request an amendment of the information for as long as FCPS maintains this information. You may make a request for an amendment in writing to the Privacy Official as noted on page 2 of this Notice. FCPS must act on your request no later than 60 days after receipt of it. FCPS will provide written notification of the acceptance or denial of your request. FCPS may deny your request for an amendment if you ask to amend information that: (1) was not created by FCPS, unless you provide a reasonable basis that the person or entity created the information is no longer available to make the amendment; (2) is not part of the health information kept by FCPS; (3) is not part of the information which you would be permitted to inspect and copy; or (4) is accurate and complete. If FCPS denies your request for amendment, you have the right to file a statement of disagreement with FCPS and FCPS may prepare a rebuttal to your statement. If such rebuttal is prepared, FCPS will provide you with a copy.

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**Right to Receive an Accounting.** You have the right to receive an accounting of certain disclosures of your protected health information made by FCPS in the six years prior to the date on which the accounting is requested. This right applies to disclosures for purposes other than treatment, payment or health care operations as described in this Notice. FCPS is also not required to account for disclosures that you requested, disclosures that you agreed to by signing an authorization form, disclosures for a directory, disclosures to family or friends involved in your care or the payment of your care, or certain other disclosures FCPS is permitted to make without your authorization.

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**Notice of Privacy Practices**

**INDIVIDUAL RIGHTS (CONTINUED)**

**Right to Receive an Accounting** (continued). The request for an accounting must be made in writing to the Privacy Official identified on page 1 of this Notice and must specify the time period sought for the accounting. FCPS must act on your request for an accounting no later than 60 days after receipt of such request. FCPS is not required to provide an accounting for disclosures that occur prior to April 14, 2003. FCPS will provide the first accounting you request during any 12-month period free of charge. Subsequent accounting requests by you within the same 12-month period will be subject to a reasonable cost-based fee. After learning of the exact amount of the fee, you have the right to withdraw or modify your request in order to avoid or reduce the fee.

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**Right to Obtain a Paper Copy of This Notice.** You have the right to receive a paper copy of this Notice from FCPS upon your request even if you have already received a copy or have agreed to accept this Notice electronically.

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**COMPLAINTS**

You have the right to complain to FCPS and to the Secretary of the United States Department of Health and Human Services if you believe your privacy rights have been violated. You may file a complaint in writing to FCPS by contacting the FCPS Privacy Official, 1126 Russell Cave Rd., Lexington, Kentucky 40505, 859-381-4118. You will not be retaliated against or otherwise penalized for filing a complaint.

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EXPLANATION: UNDER THE "EVERY STUDENT SUCCEEDS ACT OF 2015 (P. L. 114-95)" PARENTS CONTINUE TO HAVE THE RIGHT TO REQUEST INFORMATION ON QUALIFICATIONS OF THEIR CHILD'S TEACHER(S) AND PARAPROFESSIONAL(S). THIS CHANGE COMPORTS WITH THOSE REQUIREMENTS. FINANCIAL IMPLICATIONS: COST OF REPRINTING FORMS

PERSONNEL

03.112 AP.22

- CERTIFIED PERSONNEL -

**Professional Qualifications Information - Parent Right to Request**

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FAYETTE COUNTY PUBLIC SCHOOLS

\_\_\_\_\_ (Date)

Dear Fayette County Public School Family:

The Fayette County Public School district is committed to providing a world class education for your child. We are working hard to ensure that every child in our district reaches high levels of academic excellence.

Time and again, research has shown that one of the most important factors in your child's academic success is the classroom teacher. By now, I hope you have had a chance to meet your child's teacher or teachers and discuss the academic expectations and experiences your child will have this year. I would encourage you to keep the lines of communication open throughout the year and regularly talk about your child's progress.

Our district receives money designed to help schools with high concentrations of low income children under the federal *Every Student Succeeds Act (ESSA)*. This federal law gives every parent the right to request information regarding the professional qualifications of your child's teacher(s) and paraeducator(s).

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Information about your child's teacher can be obtained two ways. One way is to visit the Kentucky Education Professional Standards Board Web site at [www.kyepsb.net/](http://www.kyepsb.net/), click on "Check Educator Credentials" and then follow the directions at that site. Another way is to request this information by contacting the Director of Human Resources by email at \_\_\_\_\_@fayette.kyschools.us.

Deleted: The federal law requires that teachers who teach core academic subjects:¶  
Hold at least a bachelor's degree;¶  
Hold full Kentucky certification; and¶  
Demonstrate competency in each of the core academic subjects taught.

Thank you for your interest and involvement in your child's education. We look forward to working closely with you this year to make sure your child is successful.

Sincerely,

Principal

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- CERTIFIED PERSONNEL -

**Contractual Status**

**ELIGIBILITY FOR CONTRACT**

Certified employees who do not hold a valid teaching certificate shall not be eligible to receive a contract for the upcoming school year, unless they file with the Department of Human Resources prior to the opening day of school for teachers a valid certificate for the position, or written evidence from the Education Professional Standards Board that they will be certified.

**LIMITED CONTRACT**

All eligible non-tenured employees shall receive a limited contract if it has been determined that they are to be employed for the upcoming school year. ~~Certified employees hired less than 0.8~~ shall not be eligible to accumulate credit toward continuing contract status.

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**NON-RENEWAL OF LIMITED CONTRACT EMPLOYEES**

The Director of Human Resources shall be notified prior to April 1 of any limited contract employee recommended for nonrenewal of contract based upon one of the following:

1. For cause, including but not limited to, evaluation by the employee's immediate supervisor (**not** eligible for rehire)<sup>1</sup>;
2. Reduction in enrollment (eligible for rehire);
3. Principal's judgment (eligible for rehire);
4. KTRS retirees who are currently employed in a certified position (eligible for rehire); or
5. Temporary/provisional certification (eligible for rehire).

That recommendation shall be immediately forwarded to the Superintendent.

**CONTINUING STATUS (KRS 161.740)**

When a currently employed teacher is reemployed by the Superintendent after teaching four (4) consecutive years in Fayette County, or after teaching four (4) years which shall fall within a period not to exceed six (6) years in Fayette County, the year of present employment included, the Superintendent shall issue a written continuing contract if the teacher assumes his/her duties in the succeeding school year.

Teachers who terminate their employment with the District or another Kentucky district after attaining continuing contract status and who are subsequently re-employed in this district, shall also serve a one (1) year probationary period before being considered for continuing contract status, provided they are re-employed within seven (7) months following termination of employment with either district. For the purpose of this procedure, work days are defined as Monday through Friday, regardless of holidays occurring on those days.<sup>2</sup>

**Contractual Status****REQUEST FOR RELEASE FROM CONTRACT**

No teacher shall be permitted to terminate his/her contract within fifteen (15) days prior to the first instructional day of the school term without the consent of the Superintendent. Teachers requesting release from contract shall notify the Department of Human Resources immediately. Requests for release from contract other than for emergency reasons (as determined by the Superintendent) shall state that the teacher is willing to remain until a satisfactory replacement can be obtained.

No Superintendent shall be permitted to terminate his/her contract within 30 days prior to the beginning of the school term without the consent of the Board.

**NOTICE OF CERTIFICATE EXPIRATION**

The Department of Human Resources shall provide notice to all certified employees whose teaching certificate will expire on June 30 of the current year. Failure to receive or respond to the expiration notice does not relieve the employee of the responsibility for maintaining a valid teaching certificate on file with the Department of Human Resources.

**Deleted:** Before winter break of each school year, t

**RELATED POLICES**

<sup>1</sup>03.11

03.112

<sup>2</sup>03.115



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## Salary Procedures

### **SALARY SCHEDULE DEVELOPED AND APPROVED**

The Board shall approve a single-salary schedule, which shall be based on 189 days/9.5 months of employment. Compensation for employment contracted beyond 187 days shall be prorated on the base pay for 187 days. One (1) year of experience credit step-up requires employment for a minimum of 140 worked days as a FCPS certified employee in a single school year and performance of teaching duties for the equivalent of at least seventy (70) full school days during that school year, regardless of the schedule on which those duties are performed. Twelve-month salaried certified staff must work 70% of the school calendar to be credited with one (1) year of experience. Teachers who perform teaching duties for the equivalent of at least 140 days during two (2) consecutive school years shall be credited with one (1) year of experience.

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The single-salary schedule shall meet state requirements for Ranks I, II, III, and IV, provide employment for the school term as set by the Board in keeping with statutory requirements, and contain experience categories.

The Board also shall approve a separate salary schedule or index system for extra services and supervision, and a salary schedule for substitute teachers during or before the June Board meeting. Extra services compensation shall be based on expanded duties and responsibilities, time demands and expertise, and shall be paid only upon documentation of services rendered.

The substitute salary schedule shall be a per-diem schedule based on rank and experience but may be lower than the rate of pay for regular full-time teachers.

Salary amounts shall be paid on the prescribed dates without deductions for days in which schools are closed except that salaries shall not be paid when schools are closed as a result of a strike or other work stoppage, or when schools are open and salaried employees fail to render services.

### **PAYMENT SCHEDULE**

Each year, employees shall be notified of the dates on which salaries shall be paid. Regular pay dates for salaried employees shall be in accordance with the schedule adopted by the Board of Education.

Certified employees shall be paid semi-monthly on the 15<sup>th</sup> and last day of the month as designated in the schedule approved annually by the Board. If a pay date falls on a weekend, payment shall be made on the prior Friday. All direct deposits, including the July and August deferred payrolls, shall be made on the regularly scheduled pay date, but shall be available for deposit at the close of the school year, if those employees have completed all responsibilities and duties and have requested to be paid their remaining salary prior to June 30<sup>th</sup>.

The Department of Financial Services shall annually prepare a listing of due dates for salaried employees payroll information. This listing shall include the following information for each pay period:

**Salary Procedures**

**PAYMENT SCHEDULE (CONTINUED)**

1. The cut-off date that shall be included in the report each month;
2. The deadline for submitting payroll information to the Business Office;
3. The date of each payday;
4. The pay dates that are only for twelve-month employees or those employees who receive twenty-four (24) checks; and
5. The paydays that will be addressed in a forthcoming memo.

All reports shall be submitted to the Payroll Office by the specified due date. If a report cannot be delivered by courier, it shall be delivered to the Payroll Office by the person responsible.

The ~~District~~ shall ~~post~~ salary schedules ~~for~~ all categories of employees.

**VOLUNTARY PAYROLL DEDUCTIONS**

The Office of Payroll shall make available to all employees information about voluntary deduction programs in which they may participate.

**CREDIT FOR EXPERIENCE**

For the purpose of calculating salaries for certified and salaried classified employees, the District allows credit for a maximum of twenty (20) years of professional experience outside the Fayette County Public Schools. Credit for professional experience shall be recognized in compliance with KRS 157.320 (10) and 702 KAR 3:070.

At the time of employment, the initial salary calculation for an employee shall be based upon the number of years of professional service for which valid verification is on file in the Department of Human Resources.

**CHANGES IN RANK OR CREDITS**

Credits and/or rank changes to be considered in determining the salary of a teacher for the current year shall be completed prior to September 15 and submitted on an official transcript or certification document to the Department of Human Resources prior to the last business day of December.

The Department of Human Resources shall calculate the salary rank of certified employees based upon the official transcripts, teaching certificates and other required supporting documents on file in the Department of Human Resources on September 15. Salary adjustments for salary rank effective on or before September 15 which are received after that date may be made only until the last business day of December.

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**Deleted:** To be credited for salary calculation purposes during the current school year, all previous professional experience from outside the District shall be verified no later than the last business day of December. Eligible professional experience verification received after that date shall be credited for salary purposes at the beginning of the next school year.¶

**Salary Procedures****CHANGES IN RANK OR CREDITS (CONTINUED)**

Statutory funding provisions stipulate that any teacher who has a higher rank certified by the Education Professional Standards Board effective after September 15 shall not be entitled to the salary at the higher rank until the beginning of the next school year. Therefore, after the last business day of December, eligible salary rank changes shall be credited for salary calculation purposes at the beginning of the next school year. (Graduate semester hours earned at the AB + 15 or MA + 15 pay levels effective after September 15 shall not entitle the employee to salary at a higher pay level until the beginning of the next school year.)

An increase in salary for each higher training level shall be based on graduate semester hours of training counting toward a higher degree or rank. Such semester hours of training cannot be a part of the requirements for the previous degree or rank. Upon approval of the Superintendent, training that a teacher obtains subsequent to receipt of a bachelor's degree which is not credited toward a master's degree may be credited toward achieving the second step on the salary schedule based on training.

**EXTENDED EMPLOYMENT/SUPPLEMENTAL DUTY**

School level employees will have the opportunity to apply for supplemental duties, extra services pay or extended employment.

The Department of Human Resources shall prepare notification for the Board and the payroll office and officially notify employees of the salary amount due for extra duty assignments.

All extended and supplemental duty assignments are to be effective for the current school year only. Compensation for such duties cannot be assumed by the employee beyond the year of nomination to the position.

**PAYROLL DEPOSITS**

Employees' net earnings shall be deposited electronically to the bank of their choice designated on the Payroll Direct Deposit Authorization form located on the District web site:

<https://my.fcps.net/forms>

Certified employees shall be paid their salary in twenty-four (24) equal checks from August to July.

**NOTE:** Teachers who resign or take a leave of absence after the beginning of the school year shall receive a final lump-sum paycheck which includes all wages earned that have been set aside for the June and/or July-August paychecks.

**Deleted: SALARY SCHEDULE¶**

No later than 45 days before the first student attendance day of the succeeding school year, all certified employees shall receive a letter from the Superintendent stating the best estimate of salary for the upcoming school year. If the status of budget information does not permit a specific salary statement to be made prior to July 1, the salary notice shall include an explanation stating the District's intent to pay no less than the previous school year, unless it becomes necessary to institute a uniform plan of reduction affecting all certified employees in the District. All extended and supplemental duty assignments are to be effective for the current school year only. Compensation for such duties cannot be assumed by the employee beyond the year of nomination to the position.¶

**Salary Procedures****PAYROLL DEPOSITS (CONTINUED)**

For those teachers who begin teaching after the beginning of the school year or who return from a leave of absence during the school year, the amount due the escrow fund to provide for full June and/or July paychecks shall be set aside prior to receiving a current paycheck.

Salary for increased experience and training changes shall be adjusted at the same time as new salary schedules are implemented.

**PAYROLL OFFICE DATA**

Payroll-related data shall be maintained in a supplemental file located in the Office of Payroll Services. These items shall be considered a part of the official personnel file and made available for review, subject to the previously described conditions. Data maintained in the payroll file shall include:

1. Federal and State tax withholding forms;
2. Address change forms;
3. A record of all leaves, including sick, emergency, personal, jury duty, professional, without pay, vacation and military;
4. Leave cards signed by the employee for all leaves, including sick, emergency, personal, jury duty, professional, without pay, vacation and military;
5. Authorization forms for all payroll deductions, including the credit union, insurance, and the United Way;
6. Salary change notices (SA2); and
7. Sick leave bank enrollment forms.

**FLEXIBLE WORK DAYS**

A maximum of five (5) flexible work days may be worked in any calendar year as approved by supervisor. Documentation of the flexible days shall be maintained by the supervisor.

**Deleted:** Therefore, the first paycheck may be deferred one (1) or two (2) paydates, depending on the date of employment and scheduled pay.

**Deleted:** All "X" days, except Martin Luther King Day and Presidents' Day, may be used as flexible work days for administrators and salaried classified personnel employed for twelve (12) months. A maximum of five (5) flexible work days may be worked in any calendar year, as long as:  
 <#>Those administrators and salaried classified personnel request permission to work on the "X" day(s) from the immediate supervisor no later than two (2) weeks before the scheduled day(s).  
 <#>Upon receipt of the supervisor's permission to work, the administrator/salaried classified employee works the full, regular hourly work schedule.  
 <#>The administrator/salaried classified employee does not receive pay for any "X" day(s) worked, but receives a day from work with pay for each flexible day accrued which may be used at a later elected time; and

**Salary Procedures**

**FLEXIBLE WORK DAYS (CONTINUED)**

No administrator/salaried classified personnel employed for twelve (12) months may work more than five (5) flexible days in any school year. The flexible days accrued by those employees may not carry over to the new calendar year.

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**SALARY FOR PERSONNEL WHO RESIGN**

Certified personnel who resign during the school year or at the end of the school year will be paid in full on the regular payday of the month following the resignation. Final payment will be calculated as follows: Annual salary divided by the number of days of employment, times number of days taught, minus salary previously received, equals balance due at time of resignation. Staff may be paid only for those holidays occurring prior to resignation.

**Deleted:** Any administrator/salaried classified personnel employed for twelve (12) months who fails to work the full, regular hourly work schedule for an "X" day shall receive flexible time only for the amount of time actually worked. Any falsification of reported time worked may result in disciplinary action, including recommendation for termination.¶

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- CERTIFIED PERSONNEL -

**Certified New Hire Paperwork Checklist**

LAST NAME FIRST NAME SSN#

STREET ADDRESS APT# CITY STATE

BIRTH DATE GENDER (M) (F) ETHNICITY

LOCATION: POSITION: RETIREE Y / N.

**HUMAN RESOURCES STAFF WILL VERIFY RECEIPT OF THE ITEMS BELOW:**

Teaching Certificate: Attached On File Pending Ordered

Bachelor's Degree Transcripts: Attached On File Pending/Requested

Master's Degree Transcripts: Attached On File Pending/Requested

**PAPERS IN NEW HIRE FOLDER:**

Start Date Verification

Job Description

I-9 ( Driver's License Social Security Card Other)

Education Verification Form

Previous Experience Summary

Verification of Previous Teaching Experience Forms (How many? )

Benefits Acknowledgement Form

Physical Examination Form On File Received

**ELECTRONIC DOCUMENTS:**

New Employee Agreement

Federal SSA 1945 (Social Security Statement)

W-4 K-4

Disability Notice

Direct Deposit Form and voided check

W2 Electronic Enrollment Form (Elected to receive via email Y / N )

Criminal Background Check On File Date Completed Received

**RETIREEES ONLY:**

DWT (\$ ) Notification of Working as a Certified Retiree Letter

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Personnel Credential Checklist - Teachers¶**

DATE: \_\_\_\_\_¶  
NAME \_\_\_\_\_¶

\_\_\_\_\_  
SCHOOL \_\_\_\_\_¶

\_\_\_\_\_  
POSITION \_\_\_\_\_¶

\_\_\_\_\_  
The following records are required for employment:¶

- \_\_\_\_\_ Teaching Certificate¶
- \_\_\_\_\_ Transcript of College Credits¶
- \_\_\_\_\_ DWT for Retirees¶
- \_\_\_\_\_ Benefits Conference Scheduled: \_\_\_\_\_¶

- ¶
- \_\_\_\_\_ Verification of Previous Teaching Experience Form(s)¶
- \_\_\_\_\_ Job Description¶
- \_\_\_\_\_ Kentucky Teachers' Retirement Application¶
- \_\_\_\_\_ Social Security Statement¶
- \_\_\_\_\_ Receipt of Certified Handbook¶
- \_\_\_\_\_ Receipt of Student Code of Conduct¶
- \_\_\_\_\_ Anti-Nepotism Statement¶
- \_\_\_\_\_ Not Under Obligation¶
- \_\_\_\_\_ Disability Statement¶
- \_\_\_\_\_ Acceptable Use Form (Technology)¶
- \_\_\_\_\_ I-9 \_\_\_\_\_ Driver's License \_\_\_\_\_ Social Security Card ¶
- \_\_\_\_\_ W-4 and K-4 Forms¶
- \_\_\_\_\_ Direct Deposit Form and Voided Check¶

\_\_\_\_\_ Physical Examination Form or Electronic Record w/TB  
Assessment ¶

- \_\_\_\_\_ Check/Money Order for \$40 and fingerprints¶
- \_\_\_\_\_ Criminal Background Check¶
- \_\_\_\_\_ FBI Results Received¶
- \_\_\_\_\_ State Results Received¶

\_\_\_\_\_ Contract¶

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~~CERTIFIED PERSONNEL~~

### Employee Assistance Program Procedures

#### **MANDATORY REFERRAL**

Mandatory referral of an employee to the Employee Assistance Program (EAP) for counseling or other assistance may occur following consultation between an employee's supervisor and the Director of Human Resources, who is the Superintendent's designated EAP liaison.

As liaison, the Director of Human Resources shall confer with the supervisor in the determination of the appropriateness of EAP given the situation or an employee's behavior. When EAP is deemed appropriate, the Director of Human Resources shall formalize the referral with EAP and shall remain the contact person for the District throughout the mandatory period.

Mandatory referral to EAP shall not be considered a disciplinary action. Failure of the employee to comply with the direction to attend or to comply with the treatment plan developed by EAP shall be considered insubordination and subject to discipline, including termination.

An employee who is in compliance with a mandatory EAP referral, including completion of the treatment plan and final release by EAP shall at all times be required to meet job expectations and responsibilities.

Additional information is located on the District's web site:

<http://www.fcps.net/administration/departments/human-resources/for-employees/eap>

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**Assignment of Personnel**

**ASSIGNMENT OF SPOUSES**

The practice of assigning spouses to the same faculty shall be considered in accordance with the existing transfer policy, except in cases involving one (1) family member (as defined in KRS 160.380) supervising another. (See policy 03.131.)

**VOLUNTARY REASSIGNMENT**

Requests for reassignment shall be considered when appropriate vacancies occur and prior to consideration of individuals not assigned to that school, although there shall be no assurance that such requests will be granted. Principals and other school administrators, if any, shall review such requests when staffing.

**INVOLUNTARY REASSIGNMENT**

When a teacher is to be involuntarily reassigned within the same school due to a staff reduction, a volunteer for reassignment can be considered. However, if there is no volunteer, the Principal shall determine who is to be reassigned.

**PRINCIPAL'S RESPONSIBILITY**

The Principal shall have the responsibility for determining staff assignments within each school. The Principal shall notify the Department of Human Resources of such determinations at thirty (30) days before the first day of school for staff.

**NOTIFICATION**

In compliance with legal requirements, reassignments shall become effective only after written notification by the Superintendent/designee.

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PERSONNEL

- CERTIFIED PERSONNEL -

**Voluntary and Involuntary Transfers**

**VOLUNTARY REQUESTS**

Certified personnel may be considered for vacancies that occur in the District by completing an on-line application available on the District web site.

Pursuing a voluntary transfer is the responsibility of the employee. The Division of Human Resources (HR) acts only as the authorizing agent. Final hiring decisions shall be in compliance with SBDM and Board policies. Additionally, there is no requirement for principals to interview or recommend for hiring any voluntary transfer candidate.

Involuntary transfers shall be placed prior to consideration of voluntary transfers.

No voluntary transfers shall be made after July 15 unless the transfer is the result of:

1. A promotion (defined below); or
2. An agreement between the sending and receiving principal/supervisor; or
3. Approval of the Superintendent.

After ~~August 1, no voluntary transfer of instructional staff will be approved unless it is a promotion,~~

Promotion is defined as: (1) transfer to a position with increased contracted days, or (2) transfer to a position with an administrative additive.

Employees may request, in writing, a decrease in FTE, a reduction in work days, and/or demotion to a lesser position for which they are qualified (i.e., teacher to paraeducator, administrator to teacher). Supervisors will consider the request when there is a vacancy or the request will be consistent with the department/school staffing plan.

**INVOLUNTARY TRANSFERS OF TEACHERS**

*Superintendent Discretion* - Notwithstanding the remaining provisions of this administrative procedure, the Superintendent may involuntarily transfer a teacher no later than 30 days prior to the first attendance day of the succeeding school year.

SBDM council determines the impacted teaching areas.

Involuntary transfers of tenured teachers shall be made no later than 30 days prior to the first attendance day of the succeeding school year and consistent with the time line specified in KRS 161.760.

In determining teachers to be involuntarily transferred, seniority within the District, determined by the total length of service as a certified employee under a contract for District employment, shall be considered. If the length of service of two (2) or more teachers is equal, then the date of notice to the Board of employment by the District in a certified position and the date of receipt of the application for employment in a certified position shall be used as the second and third determinants, respectively.

**Deleted:** July 15, principals may select from only the eligible applicant pool to fill a vacant position using the normal hiring process

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- CERTIFIED PERSONNEL -

### **Tobacco Policy Implementation**

#### **DEFINITIONS**

Athletic and Other Events - Any activity on school premises endorsed or approved by the building Principal which occurs after the regular school day for staff.

Principal - The person assigned the responsibility for the building.

School Premises - Property used or owned by the Board of Education.

#### **SIGNAGE**

Signage denoting the District's tobacco-free status shall be posted on all exterior doors and in other places designated by the Principal.

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As authorized by KRS 438.050, the Principal shall designate appropriate tobacco use areas for those persons attending athletic and other school events after the school day. These areas shall be the same for all activities and shall be approved by the Principal.¶

**Deleted:** Additionally, signage denoting tobacco use areas for athletic and other school events shall be posted in the designated place(s).

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- CERTIFIED PERSONNEL -

**Hours of Duty - Records/Conference Days**

**DEFINITION**

Records/Conference Days refer to the two (2) days in the school calendar that are required by law and the two (2) days in the school calendar that are paid for by the Board and which exceed legal requirements. (KRS 158.070) The purpose of Records/Conference Days is to work on and participate in training activities.

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**WORK SCHEDULE**

The teacher's work day of a minimum of seven and one-half (7½) hours shall be observed on Records/Conference Days.

**PARAMETERS**

Records/Conference Days will be indicated on the instructional calendar. No Records/Conference Days shall be flexible unless the Superintendent grants a specific exception based on a well-defined plan. Requests shall be submitted to the appropriate Director and forwarded to the Office of the Superintendent for approval.

Requests for Records/Conference Days to be flexible fall within these limits:

The other four (4) days may be flexible days within these limits:

1. The opening records day and the second records day shall not be flexible.
2. The closing records day at the end of the first semester shall not be flexible. The closing records day at the end of the second semester shall not be flexible, unless the Superintendent grants a specific exception in order to accommodate retiring personnel.
3. One (1) of the four (4) days may be worked at a location selected in accordance with a plan developed in accordance with SBDM Council policy and submitted to the School Director. Each plan shall indicate that:
  - a. Work relates to student records and/or conferences with parents.
  - b. Work is completed during and/or prior to the scheduled day.
  - c. A documentation system is in place.
  - d. Operational practices/procedures are included.
  - e. A notification system to parents is included.
  - f. Flexibility is included to address varying teacher and parent needs.

**TELEPHONE CONFERENCE TIME**

If a school plan allows for telephone conferences, the following procedures shall be observed:

1. Parents must be notified, preferably in writing, that a telephone conference will occur.
2. A summary of the conference shall be sent to the parent and filed with the Principal.

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**Personnel Records Procedures**

**SECURITY OF RECORDS**

All personnel files shall be confidential and considered privileged, so far as allowed by law.

A personnel file shall be available for examination at any time to the Superintendent or supervisory personnel s/he designates and/or to the employee or personally authorized representative during regular business hours.

A personnel file shall not be made available to others except upon the submission of a notarized statement signed by the employee or a signed Open Records request. Unless an Open Records request has been filed with the Superintendent's office, individual Board members have no authority to review personnel files, even when the Board is in session.

**COPIES**

One (1) copy of a personnel record may be provided to an employee at no cost and the date of providing the free copy noted. Copies of the personnel file, excluding references, are to be made per written request. The personnel file will be copied, and will be provided within five (5) business days.

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**REVIEW OF RECORDS**

The employee's immediate supervisor, the employee's potential immediate supervisor (return from leaves of absence and transfers), the employee and other authorized staff may review the official personnel file.

**MAINTENANCE OF RECORDS**

The official personnel file shall be handled and maintained in an orderly and confidential manner. The logical and sequential order of the items placed in the file shall be observed. All written entries or documents shall be legible and shall be considered a part of the legal permanent records.

**OFFICIAL FILE CONTENTS**

Personnel files shall contain the following information:

1. Notice of name, address, telephone number changes;
2. Physical examination from, tuberculin risk assessment or INH form;
3. Kentucky Teaching Certificate;
4. Transcripts of college credits;
5. Contracts of employment;
6. Signed job description;
7. Electronic application, including references, security checks and, if applicable, copy of official Driving Record;
8. Sick leave bank enrollment forms;
9. Miscellaneous documents, including tax shelter annuity contracts, wage garnishments, awards, correspondence from/to employee;
10. Evaluations (contractual recommendation);
11. Salary notices and yearly salary letters;
12. Salary change notice.

PERSONNEL

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**Request for Copy of Personnel File**

In accordance with the provisions of the policies of the Fayette County Board of Education, Chapter 3, Section 15 or 25, this is to confirm that I have requested and received a copy of my personnel file.

NAME: \_\_\_\_\_

**EMPLOYEE NUMBER:** \_\_\_\_\_

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DATE OF BIRTH: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

-----  
For office use only:

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

Form of photo ID presented: \_\_\_\_\_

File released to employee by: \_\_\_\_\_

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

Comments:

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

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Distribution:

Yellow copy-employee, White copy-personnel file

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(Retain in Permanent/Microfilm File)¶  
EMPLOYEE'S NAME:  
\_\_\_\_\_  
¶  
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File Reviewed By



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### **Harassment/Discrimination**

Harassment/discrimination complaints shall be addressed in compliance with applicable federal and state laws.

Information and forms concerning harassment/discrimination complaints are contained in the District publication, Harassment/Discrimination Complaint Procedure, which may be accessed on the District web site:

<https://my.fcps.net/forms>

#### **EMPLOYEE TRAINING**

- Within thirty (30) days of reporting to work, the Principal/site supervisor shall review harassment/discrimination complaint procedures with all employees.
- Within thirty (30) days of reporting to work all employees shall complete online training on the topic of harassment/discrimination.

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#### **REFERENCE:**

FCPS Harassment/Discrimination Complaint Procedure

- CERTIFIED PERSONNEL -

**Notice of Personnel Actions**

The Superintendent/designee shall provide written notification to an employee of personnel actions, including but not limited to, termination, nonrenewal, reduction in force, sanctions, suspension, and reinstatement.

**NON-TENURED TEACHERS**

Non-renewal of non-tenured teachers shall be implemented according to the following:

1. Based upon notification of tentative staffing allocations sent by March 1, SBDM Councils shall identify the number of positions to be staffed in each job classification and forward that information to the Superintendent/designee by March 31 or other date designated by the Superintendent/designee.
2. Within five (5) working days following March 31 or other date designated by the Superintendent/designee, Principals, with assistance from Human Resources, shall make recommendations to the Superintendent/designee of non-tenured certified staff to be non-renewed.

The Superintendent/designee shall determine non-renewals of non-tenured certified staff on a school-by-school basis. Non-tenured teachers shall be identified by the Principal for recommendations to the Superintendent for non-renewal based on certification, performance, total years of District service, and instructional needs of the school.

3. The Superintendent/designee shall send written notice to all non-tenured certified staff to be non-renewed in a manner that assures that the notice will be received by May 15 and shall report non-renewal information to the Board of Education by that same date.

PERSONNEL

- CERTIFIED PERSONNEL -

**Reduction in Force Procedures**

**DEFINITIONS**

Teaching field shall be defined as the field(s) for which a teacher is certified. If a teacher is certified in several fields, the "teaching field" of that teacher shall not be confined to the area in which s/he is presently teaching.

**REDUCTION BY ATTRITION**

When staff reductions are necessary, every effort shall be made to accomplish such reductions through normal attrition.

**PREFERENCE FOR CONTINUING CONTRACTS**

In effecting staff reductions, the Superintendent shall, within each teaching field affected, give preference to teachers on continuing contract and who have greater seniority. In each teaching field affected, teachers with limited contracts of employment shall be notified of nonrenewal of their contracts before the continuing contract of any teacher is suspended.

**NONRENEWAL OF LIMITED CONTRACTS**

To the extent that normal attrition is not sufficient to effect the necessary staff reductions and provide openings for tenured teachers returning from leave of absence or a Memorandum of Agreement, the returning employees shall be placed in the last school they were employed. Principals will be required to non-renew non-tenured teacher(s) as necessary to provide a vacancy in the returning teacher's area of certification.

**RESTORATION OF CONTINUING CONTRACTS**

Teachers with continuing contracts shall have the right of restoration in continuing service status in the order of seniority of service in the District, if teaching positions become vacant or are created for which any of the teachers are or become qualified.

In order to be considered for placement in the upcoming school year, continuing contract employees whose contracts have been suspended are required to notify the Director of the Department of Human Resources by April 15 of new teaching areas in which they expect to become certified prior to the beginning of the new school year.

**DETERMINATION OF SENIORITY**

Seniority is determined by the accumulated length of paid service as a certified employee under a contract of employment within the District. Short-term leaves of absence of fifteen (15) days or less, without pay, shall not be a consideration in determining seniority.

**Deleted:** Seniority shall not be acquired while on leave of absence without pay, regardless of the reason for the absence (except for Distinguished/Highly Skilled Educators as required by law)

**BREAKING OF TIES**

In the event that the length of service of two (2) or more teachers is equal, then the date of notice to the Board of employment by the District in a certified position and the date of receipt of the application for employment in a certified position in the District shall be used as the second and third determinants, respectively.

PERSONNEL

- CERTIFIED PERSONNEL -

### **Retirement Procedures**

#### **RECOGNITION OF RETIREMENT**

The District shall recognize the retirement of employees based on their application for retirement benefits and their eligibility for regular or disability retirement income annuities from either the Kentucky Teachers' Retirement System (KTRS) or the Social Security Administration. Only those retirees providing the Superintendent with a written notice of retirement prior to the date set by the Employee Benefits Office each year shall be eligible for recognition in the current school year.

#### **INCOME BENEFITS**

Employees shall obtain retirement application forms from the KTRS. Those applying for retirement benefits are advised to have their retirement applications on file with the KTRS by the deadline set by that agency to avoid a delay in receipt of the monthly retirement annuity.

#### **REIMBURSEMENT FOR UNUSED SICK LEAVE**

Each certified employee who elects to retire while a certified employee of the District, who is eligible for retirement under the provisions of statutes and regulations relating thereto, and who retires in such a manner so as to receive retirement benefits from the KTRS shall be compensated for each day of unused sick leave at the time of retirement in accordance with provisions of Policy 03.175.

For employees retiring before the close of a school year, the number of unused sick leave days shall be the number of sick leave days remaining from the previous school year, plus sick leave granted at the beginning of the year of retirement, minus any sick leave taken during the year of retirement.

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PERSONNEL

-CERTIFIED PERSONNEL-

**Appeals/Hearings**

**PURPOSE**

An Appeals Panel shall be established in accordance with KRS Chapter 156 and 704 KAR 3:370. Based on issues identified in an employee’s appeal documentation, the Panel shall determine whether the employee has demonstrated that a procedural violation has occurred under the District’s evaluation plan and whether the summative evaluation is supported by the evidence.

The burden of proof that an employee was not fairly and/or correctly evaluated on the summative evaluation rests with the employee who appeals to the Panel.

**APPEALS**

Pursuant to Board Policy 03.18, any certified employee who believes that s/he was not fairly evaluated on the summative evaluation may appeal to the Evaluation Appeals Panel in accordance with the following procedures:

1. ~~The~~ evaluatee and evaluator shall submit three (3) copies of any appropriate documentation to be reviewed by the members of the Appeals Panel. The parties will receive copies of documentation within five (5) working days prior to the scheduled hearing date. The members of the Appeals Panel will be the only persons to review the documentation. All documentation will be kept secure except during Appeals Panel meetings. Confidentiality will be maintained. Copies of the documentation as submitted to the Panel shall not be carried away from the established meeting by either parties involved or the Panel members.
2. Both the evaluatee and evaluator shall have the opportunity to review all documentation submitted as evidence to the Appeals Panel at least five (5) days prior to the scheduled appeals hearing date.
3. The Panel will set the time and place for the hearing, and the Chairperson will provide written notification to the appealing employee and his/her evaluator of the date, time, and place to appear before the Panel to answer questions.
4. Legal counsel and/or chosen representative may be present during the hearing to represent either or both parties.
5. The hearing will be audiotaped and a copy provided to both parties if requested in writing. The original will be maintained by the District.
6. Only Panel members, the evaluatee and evaluator, legal counsel, witnesses, and the employee’s chosen representative will be present at the hearing.
7. Witnesses may be presented, but will be called one at a time and will not be allowed to observe the proceedings.

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**Appeals/Hearings****HEARINGS**

The following procedures will be implemented during the hearings:

1. The Chairperson of the Appeals Panel will convene the hearing, review procedures, and clarify the Panel's responsibilities.
2. Each party will be allowed to make a statement of claim. The evaluatee will begin.
3. The evaluatee may present relevant evidence in support of the appeal.
4. The evaluator may present evidence in support of the summative evaluation.
5. The Panel may question the evaluatee and evaluator.
6. The Chairperson may disallow materials and/or information to be presented or used in the hearing when s/he determines that such materials and/or information is not relevant to the appeal or when the materials were not exchanged between the parties as provided in this procedure.
7. Each party (evaluator and evaluatee) will be asked to make closing remarks.
8. The chairperson of the Panel will make closing remarks.
9. The decision of the Panel, after sufficiently reviewing all evidence, may include, but not be limited to, the following:
  - a. Upholding all parts of the original evaluation.
  - b. Voiding the original evaluation or parts of it.
  - c. Ordering a new evaluation by a second certified administrator, who shall be a trained evaluator.
10. The chairperson of the Panel shall present the Panel's decision to the evaluatee, evaluator, and the Superintendent within fifteen (15) working days from the date the appeal is filed.
11. The Superintendent may take appropriate action consistent with the Panel's decision.
12. The Panel's decision and the original summative evaluation form shall be placed in the employee's evaluation file. In the case of a new evaluation, both evaluations shall be included in the employee's personnel file.
13. The Panel's decision may be appealed to the Kentucky Board of Education based on grounds and procedures contained in statute and regulation.

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PERSONNEL

- CERTIFIED PERSONNEL -

### **Professional Leave**

#### **PRIOR APPROVAL OF SUPERVISOR**

Individuals who request time away from their duties to make presentations at conventions or conferences, or who have been invited to represent the Fayette County Public Schools in any manner, shall obtain the approval of their immediate supervisor.

Approval shall be obtained prior to accepting assignments or invitations, shall be reduced to writing, and shall carry the signature of the immediate supervisor.

A copy of the supervisor's authorization shall accompany the professional leave request that is filled with the Office of Professional Development.

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Procedure and forms concerning professional staff development and in-service training and the District's PROFESSIONAL LEAVE HANDBOOK are available on the District web site:

<https://my.fcps.net/forms>

PERSONNEL

- CLASSIFIED PERSONNEL -

**Hiring**

The following procedures shall apply in the recruitment, selection, and employment of all classified personnel hired in the District.

**RECRUITMENT**

Recruiting shall be the responsibility of the Superintendent/designee. Efforts shall be made to recruit a quality staff to include, but not be limited to:

4. Working through placement bureaus of regional and state colleges and universities;
5. Working with state educational associations and the state department of education;
6. Advertising through appropriate media.

**POSTING**

Vacancies shall be posted on the District web site.

The closing date for receiving applications shall be listed when vacancies are posted unless the position is designated as one open until filled.

**APPLICATIONS**

All applications for positions shall be made via electronic forms under the Department of Human Resources section of the District's web site.

The Superintendent/designee shall review each application for completeness and shall send a notice to each applicant indicating (a) the date of the review and (b) any additional materials requested.

**CRIMINAL RECORD INQUIRY**

The District shall make appropriate inquiries with law enforcement agencies to ascertain if an applicant has a criminal record. The applicant shall submit with the application his/her check or money order in the required amount made payable to the "Fayette County Board of Education." To complete this requirement, the applicant recommended for hire shall be finger-printed by the Department of Human Resources.

**EEOC COMPLIANCE**

The Equal Employment Opportunity Commission recordkeeping regulations require the District to maintain records in chronological order of the name, address, sex and race of all persons who have applied for employment, including the dates on which such applications are made.

**ELIGIBILITY REQUIREMENTS**

Clerical: Applicants must take the required clerical assessments and earn a passing score and must have a high school diploma or GED.

Bus Driver and Bus Monitor: Applicants must have a high school diploma or GED.

Food Service: Applicants must have a high school diploma or GED and also must obtain a food handlers permit.



**Hiring****ELIGIBILITY VERIFICATION**

The United States Immigration and Naturalization Service (INS), Immigration Reform and Control Act of 1986, requires that eligibility for employment in the United States shall be verified. Accordingly, the applicant shall file with the Department of Human Resources the required documents for verification as specified by the INS. The applicant shall advise the Department of Human Resources, in advance, of the need to determine appropriate alternative documents if s/he is unable to provide the required documents.

**SUPPORTING MATERIALS**

*Diploma or GED* - Classified personnel hired since July 13, 1990, shall hold at least a high school diploma or GED certificate.

Designated classified employees are required to be licensed as follows:

**Food Service** - All employees shall obtain a Food Service Permit through the designated contractor and pass a certification course within forty (40) working days of employment, as required by Kentucky Administrative Regulation (702 KAR 6:045). Food Service Supervisors shall hold a valid Driver's License, and specified food service positions will require that the employee hold a valid Kentucky Commercial Driver's License.

**Instructional Support Services** - Specified Instructional Support Service positions require that the employee hold a valid Kentucky Driver's License or a valid Kentucky Commercial Driver's License.

**Law Enforcement** - A valid Kentucky Driver's license is required for all Law Enforcement positions. Sworn Officers are required to have a "Special Law Enforcement Officer Commission." Communications personnel are required to hold a "Law Enforcement Telecommunicator Certificate."

**Maintenance** - All Maintenance positions require the employee hold a valid Driver's License or a valid Kentucky Commercial Driver's License. The position of Plumber requires a Master Plumber's License. The position of electrician requires an Electrical Contractor's License.

**Plant Operations** - Designated Plant Operations positions require that the employee hold a valid Driver's License or a valid Kentucky Commercial Driver's License.

**Paraeducator** - For instructional positions, employees shall be required to hold a high school diploma or a GED certificate and to earn a minimum score on any required testing.

**Transportation** - School bus drivers are required by Kentucky Administrative Regulation to complete a state-mandated training course prior to employment, along with eight (8) hours of update training annually (702 KAR 5:080). Bus drivers and mechanics are required to hold a valid Kentucky Commercial Driver's License.

***Experience*** - Previous experience of classified personnel shall be verified in writing by former employers. The District shall recognize up to four (4) years of professionally related experience outside the Fayette County School System as specified on the applicable salary schedule for the purpose of salary calculation.

***References*** - The applicant shall provide specific and correct names, mailing addresses, and email addresses for all references and shall not list relatives, friends or prospective in-laws.

At least three (3) confidential references shall be provided and must include only former employers or professional contacts.

**Hiring****EXPIRATION OF CERTIFICATION/LICENSURE**

When an employee's required certification/license has expired, the following process shall be implemented:

7. The employee will be notified in writing of the expired certificate/license and temporary placement and guidelines.
8. When an employee has allowed a certification/license to expire, the employee will be temporarily placed in a non-certificate/license required position for thirty (30) days to allow for follow up on renewal of the certificate/license.
9. When the period of thirty (30) days has lapsed and certificate/license has not been renewed/updated, the employee will be terminated.
10. The employee may reapply when the certificate/license has been renewed; however the District will be under no obligation to rehire the individual.
11. The employee's salary will be adjusted to the thirty (30) temporary placement job salary, and the District will be under no obligation to retroactively pay the individual once the certificate/licenses has been renewed/updated.
12. If the employee is able to renew/update the certificate/license before the thirty (30) day timeline, they will be placed in a position similar to the one previously held; however, there is no guarantee of placement in the same position or at the same location.

**ADDITIONAL DOCUMENTS**

In the event employment is offered to the applicant, s/he shall submit the following additional required support documents/items or take the appropriate additional action, as specified:

**Health Certificate** - Prior to beginning work, employees are required to submit a health certificate that is issued by the designated contractor or personal physician. The certificate shall verify a completed medical examination within the ninety (90) day period immediately prior to the employment date.

**ADA Form** - The Special Notice to Disabled Individuals shall be available to employees who wish to volunteer information concerning any personal physical or mental disability in accordance with the Rehabilitation Act and Americans with Disabilities Act.

**Confirmation of Employment** - New classified employees shall sign a "Confirmation of Employment" establishing hourly rate, status, and work schedule.

**Tax Exemption Certificates** - The W-4 (federal) and K-4 (Kentucky) tax exemption certificates shall be completed for income tax purposes.

**Employment Eligibility Verification** - The Form I-9 shall be completed for employment eligibility.

**Job Description** - New employees shall sign their job description, which shall delineate the general duties and responsibilities of the position. (Job descriptions shall not be considered all-inclusive descriptions of the job, but shall indicate the general parameters of the duties and responsibilities of the position.)

**Hiring**

**SELECTION FACTORS**

The Superintendent/designee shall screen applicants based on the following factors:

- 6. Certification (when required for the position)
- 7. Educational background
- 8. Previous work experience
- 9. Recommendations
- 10. Results from required testing

**HIRING OF RELATIVES OF THE PRINCIPAL/HIRING MANAGER**

The Superintendent shall not employ a relative of a member of the Board.

A relative of the Superintendent shall not be employed except as provided by KRS 160.380.

The Superintendent shall not employ a relative of any employee to work under the direct or indirect supervision of that employee. "Relative" means father, mother, brother, sister, husband, wife, son, daughter, aunt, uncle, (including subcategories of in-law, half and step relatives).

**COMPLETION OF EMPLOYMENT PROCESS**

For SBDM schools, hiring shall follow statutory guidelines and the provisions of Policy 02.4244, and the Superintendent shall complete the hiring process. Decisions on It's About Kids Support Services and District-wide personnel shall be made by the Superintendent/designee. The Superintendent shall inform the Board of the appointment of all personnel.

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<#>The Principal/Hiring Manager shall submit to the Director of Human Resources the applicant's name and relationship.¶  
<#>The Director shall advise the Superintendent in writing of the applicant who has been recommended.¶  
<#>The Superintendent shall approve or disapprove the recommendation and so advise the Director.¶  
<#>The Director shall advise the Principal/Hiring Manager of the Superintendent's decision.¶  
<#>If approved for employment by the Superintendent, the applicant shall be reported to the Board at the next meeting.¶  
<#>The applicant may begin work after receipt of written notice from the Superintendent.¶

**Hiring**

**HIRING OF RETIRED PERSONNEL**

Re-employment on a full-time basis of persons previously retired from the District shall not be a standard practice. In an emergency situation, however, consideration and employment of retired personnel is acceptable, as long as it can be demonstrated that the individual is the best qualified person for a particular vacancy. Retired classified personnel may be hired for permanent positions working four (4) hours or more each day. ~~Retired classified personnel may be hired as classified substitutes, working no more than seventy (70) days each school year.~~

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**Deleted:** no more than an average of 3.5 hours/day (total of 17.5 hours per week)

**SCREENING/INTERVIEW**

Interview teams, as appointed by the Superintendent/designee, shall determine those applicants to be interviewed in accordance with the needs of the school system.

For school-based positions, the first phase of applicant screening for basic qualifications shall be conducted by the Department of Human Resources. Interview teams led by the hiring manager, school Principal and/or the SBDM council, as appropriate under law, which include subject area specialists and principals, shall review and evaluate only those applicants who have successfully completed the credential screening by the Department of Human Resources.

In areas where special skills are required, applicants may be referred to the appropriate District staff for a performance assessment to determine competency.

The Division of Human Resources shall make available to the hiring manager, Principal and SBDM councils information regarding qualified applicants.

Applicants may be requested to provide additional information or to undergo further interviews regarding position-specific qualifications.

The Principal/hiring manager shall communicate the candidate selected for employment to the Department of Human Resources for validation and presentation to the Superintendent. In schools operating under SBDM, the Principal shall consult with the Council before submitting the selection.

The Department of Human Resources shall prepare and distribute necessary forms and instructions to all administrators responsible for interviewing and placement of District employees. However, the official offer of employee shall be made by the Division of Human Resources.

**CONTRACT**

Personnel hired by the Superintendent shall be notified of their contractual obligations by letter. The contract must be signed and returned to the Department of Human Resources within two (2) weeks.

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PERSONNEL

- CLASSIFIED PERSONNEL -

**Salary Procedures**

**SALARY SCHEDULE DEVELOPED AND APPROVED**

The Board shall approve salary schedules for each category of classified personnel on an annual basis. These schedules shall be based on skills required, training, longevity, and supervisory responsibilities. The salary schedule shall indicate the hourly rate of pay according to level of experience credit. Previous experience may be verified by former employers. An experience credit step-up requires completion of a minimum of 70% of the annual work calendar.

The substitute salary schedule shall be based on an hourly rate that may be lower than the rate of pay for regular full-time employees.

**PAYMENT SCHEDULE**

Each year, employees shall be notified of the dates on which salaries shall be paid. Regular pay dates for employees shall be in accordance with the schedule adopted by the Board of Education.

Classified employees shall be paid semi-monthly as designated in the schedule approved annually by the Board. All direct deposits, including the July and August deferred payrolls, shall be made on the regularly scheduled pay date.

The Department of Financial Services shall annually prepare a listing of payroll dates for classified employees. This listing shall include the following information:

1. The actual dates covered in the payroll period;
2. The date of each payday; and
3. The paydays which will be addressed in a forthcoming memo.

The ~~District~~ shall ~~post~~ salary schedules ~~for~~ all categories of employees,

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**PAYROLL DEPOSITS**

Employees' net earnings shall be deposited electronically to the bank of their choice designated on the Payroll Direct Deposit Authorization form located on the District web site:

<https://my.fcps.net/forms>

**VOLUNTARY PAYROLL DEDUCTIONS**

The Office of Payroll shall make available to all employees information about voluntary deduction programs in which they may participate.

**DAILY RECORD SHEET**

For purposes of calculating payroll, each hourly classified employee who does not punch a time clock is required to keep a daily record sheet of time on duty.

Time is calculated to the nearest quarter hour. Unless work is involved, employees shall not report for duty nor check in prior to the regular starting time. Employees shall go off duty and check out at the end of the regular schedule.

**Salary Procedures****PAYROLL OFFICE DATA**

Payroll-related data shall be maintained in a supplemental file located in the Office of Payroll Services. These items shall be considered a part of the official personnel file and made available for review, subject to the previously described conditions. Data maintained in the payroll file shall include:

1. Federal and State tax withholding forms;
2. Address change forms;
3. A record of all leaves, including sick, emergency, personal, jury duty, professional, without pay, vacation and military;
4. Leave cards signed by the employee for all leaves, including sick, emergency, personal, jury duty, professional, without pay, vacation and military;
5. Authorization forms for all payroll deductions, including the credit union, insurance, and the United Way;
6. Confirmation of employment forms; and
7. Sick leave bank enrollment forms.

**COMPENSATION OF PARAPROFESSIONAL COACHES**

1. Paraprofessional coaches must be paid as a “discretionary coach” as established on the Supplemental Salary Schedule by the Board of Education.
2. Paraprofessional coaches will be paid in equal payroll installments over the course of the sporting season.
3. Paraprofessional coaches must be Board employees paid by the District. Payments made by booster clubs to compensate paraprofessional coaches must be sent in one (1) check to the Financial Services Department for the amount of the supplements. All checks shall be made payable to the Fayette County Board of Education with accompanying memo outlining the purpose of the payment and including the name, SS#, coaching position, and appropriate budget codes.

Payment to the Financial Services Department must include an add-on of 3% for salaried employees, 18% for hourly employees, or 12% for non-District employees to cover matching employer paid benefits (Medicare, FICA, workers comp, unemployment insurance) incurred by the District in addition to the established supplement amount.

**OFFICIAL WORK SCHEDULE**

Each year the Superintendent/designee shall develop a schedule of days worked for all employees and these are distributed to each administrator, who then notifies the classified employees under his/her supervision. No deviations shall be made from these work schedules without approval from the Central Office.

**Salary Procedures****OFFICIAL WORK SCHEDULE (CONTINUED)**

Holidays shall be established in the official school calendar. Eligibility for paid holidays shall be determined per policy 03.222.

Employees shall not be paid for:

- Scheduled lunch periods
- Overtime, unless approved in advance per policy 03.221
- Unapproved early arrivals/late departures
- Days when schools are closed for inclement weather or other emergencies, unless otherwise approved in advance by the Superintendent/designee

**SALARY FOR PERSONNEL WHO RESIGN**

Classified personnel who resign during the contract period will be paid in full for the actual days worked during the pay period on the regular payday of the month following the resignation. Staff shall be paid only for those holidays occurring prior to resignation.

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PERSONNEL

- CLASSIFIED PERSONNEL -

**Classified Personnel File Checklist**

LAST NAME FIRST NAME SSN#

STREET ADDRESS APT# CITY STATE

BIRTH DATE GENDER (M) (F) ETHNICITY

LOCATION: POSITION: RETIREE Y / N.

**HUMAN RESOURCES STAFF WILL VERIFY RECEIPT OF THE ITEMS BELOW:**

FINGERPRINTS MONEY ORDER CHECK

H.S. DIPLOMA GED COLLEGE TRANSCRIPT

JOB DESCRIPTION

OFFICIAL START DATE FORM

NEW EMPLOYEE AGREEMENT (COMPLETED ONLINE? Yes No )

DISABILITIES ACT FORM (COMPLETED ONLINE? Yes No )

I-9: DRIVERS LICENSE SOCIAL SECURITY CARD OR BIRTH CERTIFICATE

W4 & K4 TAX FORMS (COMPLETED ONLINE? Yes No )

DIRECT DEPOSIT ENROLLMENT FORM (COMPLETED ONLINE? Yes No )

PHYSICAL EXAMINATION W/ TB ASSESSMENT (On File Received )

W2 ELECTRONIC ENROLLMENT FORM (COMPLETED ONLINE? Yes No )

\* Elected to Receive W2: Electronic Form Paper (please select which option was chosen)

EMPLOYEE BENEFITS ACKNOWLEDGEMENT FORM

FINGERPRINTS MONEY ORDER CHECK

EDUCATION/EXPERIENCE VERIFICATION SUMMARY SHEET

EXPERIENCE VERIFICATION FORM(S):

HOW MANY DATE SENT FOR PROCESSING:

KRS FORM 6751-RETIREEES RETURNING TO WORK (IF APPLICABLE)

FOOD HANDLERS CARD (FOOD SERVICE ONLY)

HR Use Only: Contract Sent? (Date and Initial)

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Classified Personnel File Checklist**

- LAST \_\_\_\_\_ FIRST \_\_\_\_\_
- ASSIGNMENT \_\_\_\_\_
- DATE OF HIRE \_\_\_\_\_ EMPLOYEE # \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_ H. S. DIPLOMA OR GED/COLLEGE TRANSCRIPT
- \_\_\_\_\_ CONTRACT
- \_\_\_\_\_ JOB DESCRIPTION
- \_\_\_\_\_ BENEFITS CONFERENCE \_\_\_\_\_
- \_\_\_\_\_ CLASSIFIED EMPLOYEE HANDBOOK
- \_\_\_\_\_ STATEMENT ON RIGHTS AND RESPONSIBILITIES AND STUDENT CODE OF CONDUCT
- \_\_\_\_\_ W-4 AND K-4 FORMS
- \_\_\_\_\_ ANTI-NEPOTISM STATEMENT
- \_\_\_\_\_ ACCEPTABLE USE FORM
- \_\_\_\_\_ DISABILITIES ACT FORM
- \_\_\_\_\_ I-9 . \_\_\_\_\_ DRIVER'S LICENSE \_\_\_\_\_ SOCIAL SECURITY CARD OR BIRTH CERTIFICATE
- \_\_\_\_\_ DIRECT DEPOSIT FORM
- \_\_\_\_\_ PHYSICAL EXAMINATION
- \_\_\_\_\_ TB RISK ASSESSMENT AND, IF REQUIRED, TB SKIN TEST OR A BLOOD TEST FOR MYCOBACTERIUM TUBERCULOSIS (BAMT)
- \_\_\_\_\_ FOOD HANDLERS' CARD (FOOD SERVICE ONLY)
- \_\_\_\_\_ FINGERPRINTS \_\_\_\_\_ MONEY ORDER \_\_\_\_\_ CHECK
- \_\_\_\_\_ FINGERPRINT RESULTS RECEIVED
- \_\_\_\_\_ KRS FORM 6751 (IF APPLICABLE)

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PERSONNEL

- CLASSIFIED PERSONNEL -

### Voluntary and Involuntary Transfers

#### INVOLUNTARY TRANSFERS

The Superintendent may move a classified employee to other positions or job classifications.

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#### VOLUNTARY TRANSFER

Internal applicants must submit a request via an electronic application for employment to the Classified Personnel Office when a vacancy has been advertised and shall follow procedures for application as specified in the advertisement.

#### SELECTION

Employees who are selected to change positions shall be notified by the Department of Human Resources prior to assuming new duties.

Employees may request, in writing, a decrease in FTE, a reduction in work days, and/or demotion to a lower grade position for which they are qualified (i.e., bus driver to a bus monitor). Supervisors will consider the request when there is a vacancy or the request will be consistent with the department/school staffing plan.

#### PROCESS FOR PLACING INVOLUNTARY TRANSFERS

- Each Principal/hiring manager will meet with their supervisor/director on any program elimination or staff reduction that will add a person with no job rights to the involuntary transfer list by April 1.
- HR will contact involuntary transfers to notify each employee of the assignment for the upcoming year
- Involuntarily transferred employees will return to the school to which they were previously assigned if such a position becomes vacant prior to school beginning within five (5) years of the involuntary transfer.

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Deleted: <#>Principals/hiring managers will receive involuntary list with names, certifications, and past placements.¶ <#>Principals/hiring managers will meet with the Director of Human Resources to determine placements for the following year.¶

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#### DETERMINING INVOLUNTARY TRANSFERS

- SBDM council determines the impacted teaching areas.
- Like positions will be reviewed to determine which employee will be involuntarily transferred. Before determining seniority, skill set and training will be considered first before a decision is made (i.e., special education paraeducator trained in GI feeding; classroom paraeducator with a teaching degree).

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**Voluntary and Involuntary Transfers**

**DETERMINING INVOLUNTARY TRANSFERS (CONTINUED)**

- Seniority within the District is determined by the total length of continuous active service as a classified employee under a contract for District employment. If the length of service of two (2) or more classified employees is equal, then the date of notice to the Board of employment by the District in a classified position and the date of receipt of the application for employment in a classified position shall be used as the second and third determinants, respectively.

**DETERMINING INVOLUNTARY TRANSFERS (SPECIAL EDUCATION PARA)**

- Positions will be reviewed to determine which employee will be involuntarily transferred. Before considering seniority, skill set and training will be considered first (based on the needs of the student). Examples of training would be GI feeding; specific behavioral programs, Braille, Safe Crisis Management, ASL, primary language other than English, etc.

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PERSONNEL

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### **Harassment/Discrimination**

Harassment/discrimination complaints shall be addressed in compliance with applicable federal and state laws.

Information and forms concerning harassment/discrimination complaints is contained in the District publication, Harassment/Discrimination Complaint Procedure, which may be accessed on the District web site:

<https://my.fcps.net/forms>

#### **EMPLOYEE TRAINING**

- Within thirty (30) days of reporting to work, the Principal/site supervisor shall review harassment/discrimination complaint procedures with all employees.
- Within thirty (30) days of reporting to work, all employees shall complete online training on the topic of harassment/discrimination.

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#### **REFERENCE:**

FCPS Harassment/Discrimination Complaint Procedure

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- CLASSIFIED PERSONNEL -

**Retirement Procedures**

**MEMBERSHIP**

Membership in the County Employees' Retirement System (CERS) is required of all regular full-time and part-time employees who work an average of eighty (80) hours or more per month during the school year. After a minimum probationary period of six (6) months, eligible personnel are enrolled in the retirement system on the next following January 1 or July 1, and the employee's contributions are withheld through the payroll deduction process.

**RECOGNITION OF RETIREMENT**

The District shall recognize the retirement of employees based on their eligibility for regular or disability retirement income annuities from either the County Employees' Retirement System (CERS) or the Social Security Administration. Only those retirees providing the Superintendent with a written notice of retirement prior to the date set by the Employee Benefits Office each year shall be eligible for recognition at the District's annual retirement event for the current school year.

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**INCOME BENEFITS**

Employees shall obtain retirement application forms from CERS and schedule a retirement conference with the Department of Human Resources administrator. Applications for retirement benefits shall be on file with the CERS by the end of the month prior to the effective month of retirement.

**REIMBURSEMENT FOR UNUSED SICK LEAVE**

Each classified employee who retires in such a manner so as to receive benefits from the CERS or the Social Security Administration shall be compensated for each day of unused sick leave at the time of retirement in accordance with provisions of Policy 03.273.

For employees retiring before the close of a school year, the number of unused sick leave days shall be the number sick leave days remaining from the previous school year, plus sick leave granted at the beginning of the year of retirement, minus any sick leave taken during the year of retirement.

The balance of unused sick leave for which compensation is not received will be used to purchase up to six (6) months service credit for the retiring employee with the CERS.

**ADDITIONAL INFORMATION**

Questions or requests for information regarding CERS should be addressed to CERS, Perimeter Park West, 1260 Louisville Road, Frankfort, Kentucky, 40601.

Additional information can be obtained from the "Summary Plan Description - Kentucky Retirement Systems" booklet published by the State and available to all employees upon request from the CERS. Also, retirement benefits counseling is available to eligible employees and spouses at the retirement office in Frankfort. An appointment is necessary, and offices are open Monday through Friday from 8:30 a.m. until 4:00 p.m. Further assistance and information can be provided by the Office of Associated Employee Services.

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PERSONNEL

- CLASSIFIED PERSONNEL -

### Evaluation Process

#### **FREQUENCY AND DEADLINE**

The performance of all classified personnel shall be evaluated annually. Written evaluations are to be submitted to the Department of Human Resources on or before April 15th.

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Each evaluatee's performance will be evaluated by his/her immediate supervisor. The evaluator and employee shall establish the goals and expectations for the employee's performance.

A contractual status recommendation form for each employee shall be completed and both the evaluator and the employee shall sign the evaluation form and the contractual status recommendation prior to submission of the forms to the Classified Personnel Office.

Forms and procedures for the classified evaluation and individual corrective action plan process are located on the District's web site:

<https://my.fcps.net/forms>

#### **REBUTTAL**

If the employee feels that the evaluation is inaccurate, the employee may make a written rebuttal to the evaluation. The evaluator shall attach the rebuttal to the copy the evaluator keeps on file and to the original that is submitted to the Classified Personnel Office.

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PERSONNEL

~~—CLASSIFIED PERSONNEL—~~

### **Confidentiality of Records**

Personnel evaluation records, specifically the personnel evaluation folder and its contents, will be kept as a part of the employee's personnel file and will be treated with the same confidentiality as other personnel records. During an appeal/hearing, evaluation records will be kept in a secure location designated by the Superintendent/designee.

EXPLANATION: THIS DIRECTIVE IS RECOMMENDED TO GUIDE THE DISTRICT TO THE NOTIFICATION FORM USED TO NOTIFY PARENTS THAT THEY MAY REQUEST THEIR CHILD'S PARAPROFESSIONAL(S) QUALIFICATIONS.  
FINANCIAL IMPLICATIONS: NONE ANTICIPATED

PERSONNEL

\$03.5 AP.1

**ESSA Qualification Notification**

[See procedure 03.112 AP.22/ESSA Qualification Notification form.](#)

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**Volunteer Procedures**  
**Criminal Records Check**

**ONLINE APPLICATION**

As required by law, an adult who wishes to volunteer at a school or school-sponsored activity where he/she will have: (1) contact with students on a regularly scheduled or continuing basis; or (2) supervisory responsibility for children at a school site or on a school-sponsored trip, shall complete an online application form at this web address:

<https://webapps.fcps.net/volunteer/>

**PROCESSING**

1. The Department of Human Resources shall transmit the information contained on the forms to the Administrative Office of the Courts (AOC) for the required check.
2. After receipt of the processed records check from AOC, the District shall review the information provided based upon the following criteria:
  - A. Applicants with the following convictions **shall not be authorized** to volunteer:
    - a. All sex-related offense convictions
    - b. All offense convictions against minors
    - c. All felony offense convictions against persons or property
    - d. All alcohol violation convictions within two (2) years from date of check, and no more than two (2) such offense convictions in total
    - e. All drug-related offense convictions within five (5) years from date of check, and no more than two (2) such offense convictions in total
    - f. All deadly weapon-related offense convictions
  - B. Applicants with a pattern of irresponsible behavior, based upon the background check, will be reviewed by the District's volunteer review committee to determine volunteer status.
4. The volunteer applicant shall be notified of his/her volunteer status by the Department of Human Resources.
5. In addition, notification of volunteer status for each applicant shall be made available to all principals.
6. An applicant who has questions regarding the status determination may contact the Department of Human Resources for clarification.

**APPLICABILITY**

Volunteer status is approved or disapproved for the entire District, not an individual school. Potential volunteers need only submit one (1) application every three (3) years, even if they intend to volunteer at more than one (1) school or school-sponsored activity.

**APPEAL**

An applicant who has been denied volunteer status may submit a written appeal of the decision to the Superintendent/designee for review.

**Deleted:** The Superintendent shall respond in a timely manner.

**Cashier Guidelines (IAKSS)**

Employees responsible for receipt and handling of District funds who are assigned to It’s About Kids Support Services (IAKSS) shall comply with the following:

**GENERAL GUIDELINES**

- 1. **All cash received will be documented with a pre-numbered receipt.** The District only accepts checks with a current date; the District does not accept pre- or post-dated checks. All receipts shall be turned in to the cashier (Accounts Receivable Administrative Assistant) on the day of receipt. All receipts received by the cashier by 2:00 p.m. shall be deposited on the date received.
- 2. The Tax Office/Accounts Receivable shall maintain a log of all receipts each day, including wire transfers (EFT).
- 3. The cashier shall make out the deposit tickets daily.
- 4. The cashier shall cross-foot the deposit tickets, receipts and journal entries daily.
- 5. The Associate Director of ~~Financial Services~~ shall review and approve by output posting all of the cash receipts journal entries created by the cashier.
- 6. The Financial Analyst or Grant Analyst shall make daily deposits.
- 7. Any discrepancy between the cashier’s deposit ticket and bank receipt shall be reported to the Associate Director of Financial Services.
- ~~8.~~ The ~~Associate Director of Accounting~~ shall reconcile all bank accounts monthly and review the reconciliation with the Associate Director of Financial Services. Copies of the reconciliation report shall be sent to the Director of Financial Services and ~~Senior Director of Administration~~.
- 9. ~~IAKSS will only accept checks or money orders from schools. NO cash shall be sent to IAKSS. Cash will be required to be converted to a check for a documentation and audit trail.~~

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**DEPARTMENT SPECIFIC GUIDELINES**

- 1. Funds collected in the Tax Office for Occupational License Tax shall be processed daily. The receipts will be submitted with a summary listing by 2:30 p.m. each work day. Other documentation will be retained in the Tax Office for random audit.
- 2. Because Community Education collects funds in the evening when it is not possible to turn in receipts and funds to Financial Services, the collector shall put the receipts and funds in a locked night deposit bag and drop it off at the designated bank branch. The collector then will call the District cashier and leave a voice mail indicating the drop-off location and dollar amount in the bag.
- 3. Summer School tuition collection occurs in the late afternoon. The collector shall put the receipts and funds in a locked night deposit bag. A Law Enforcement Officer will pick up the funds collected and turn them into Financial Services by 4:30 p.m., and Financial Services staff will put the funds in the vault for processing on the next work day.
- 4. Fees collected in Human Resources for background checks shall be submitted to Financial Services on the date received.
- 5. Fees collected in Payroll for processing duplicate W2 forms, etc., shall be submitted to the cashier on the date received.
- 6. Tuition collected from any source shall be submitted to Financial Services on the date received.
- 7. Funds from booster clubs to pay coaches’ salaries shall be submitted to Financial Services by the booster club/school.
- 8. Building usage revenue shall be collected by the budget manager in Physical Support Services. The budget analyst shall make deposits directly to the District account and forward a copy of the deposit and supporting documentation to the cashier at IAKSS.
- 9. Any group receiving funds not specifically identified above shall immediately direct the receipt to Financial Services.

**Employees should refer all questions to the Director of Financial Services.**

I have read and understand my responsibilities in this document.

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

EXPLANATION: RECENT REVISIONS TO 302 KAR CHAPTER 29 CHANGE THE REQUIREMENTS FOR NOTIFICATION OF PESTICIDE APPLICATION ON SCHOOL PROPERTY AND DEFINE WHEN CHILDREN ARE PRESENT. THE REVISIONS ALSO SET NOTIFICATION REQUIREMENTS IF/WHEN TREATMENT IS MADE WHILE CHILDREN ARE PRESENT.  
FINANCIAL IMPLICATION: NONE ANTICIPATED

SCHOOL FACILITIES

05.11 AP.11

### **Integrated Pest Management Application and Notification**

“Children are present” means the designated time period between two (2) hours before the start time and forty-five (45) minutes after the dismissal time of the regularly scheduled school day as determined by the school authority under the calendar set by the school Board.

Notification by the school to parents or guardians on the registry shall be required if the school authority, after consultation with the certified applicator, determines that a pesticide application is necessary when children are present in the school.

For pesticide applications made when children are present, the school authority shall provide the notification to persons listed on the registry at least one (1) hour prior to the making of the application.

Pesticides may be applied without notification indoors and to outside areas when children are not present.

The area where the point of application of a pesticide occurred shall be posted by the certified applicator regardless of the absence or presence of children.

**Deleted:** In compliance with applicable Kentucky Administrative Regulation (302 KAR Chapter 29), the District will implement a program of Integrated Pest Management (IPM) with the primary goal of controlling dangerous and destructive pests with judicious use of pesticides.¶  
**DEFINITION¶**  
Pests are populations of living organisms (animals, plants, or microorganisms) that interfere with use of the school site for human purposes. Strategies for managing pest populations will be influenced by the pest species and whether that species poses a threat to people, property, or the environment.¶  
**PEST MANAGEMENT¶**  
Approved pest management plans should be developed for the site and should include any proposed pest management measures.¶  
Pests will be managed to:¶  
<#>Reduce any potential human health hazard or to protect against a significant threat to public safety.¶  
<#>Prevent loss of or damage to school structures or property.¶  
<#>Prevent pest from spreading into the community, or to plant and animal populations beyond the site.¶  
<#>Enhance the quality of life for students, staff, and others.¶

**Integrated Pest Management Application and Notification**

**Deleted: PROCEDURES¶**  
IPM procedures will determine when to control pests and whether to use mechanical, physical, chemical, cultural, or biological means. IPM practitioners depend on current, comprehensive information on the pest and its environment and the best available pest control methods. Applying IPM principles prevents unacceptable levels of pest activity and damage by the most economical means and with the least possible hazard to people, property, and the environment.¶ The choice of using a pesticide will be based on a review of all other available options and a determination that these options are not acceptable or are not feasible. Cost or staffing considerations alone will not be adequate justification for use of chemical control agents, and selected non-chemical pest management methods will be implemented whenever possible to provide the desired control. It is the policy of the Fayette County Public Schools to utilize IPM principles to manage pest populations adequately. The full range of alternatives, including taking no action, will be considered.¶ When it is determined that a pesticide must be used in order to meet important management goals, the least hazardous\* material will be chosen. The application of pesticides is subject to the Federal Insecticide, Fungicide, and Rodenticide Act (7 United States Code 136 et seq.), School District policies and procedures, and Environmental Protection Agency regulations in 40 Code of Federal Regulations, Occupational Safety and Health Administration regulations, and state and local regulations.¶

**EDUCATION¶**  
Staff, students, pest managers, and the public will be educated about potential school pest problems and the IPM policies and procedures to be used to achieve the desired pest management objectives.¶

**RECORDKEEPING¶**  
Records of pesticide use shall be maintained on site to meet requirements of the state regulatory agency and the Board of Education. Records must be current and accurate if IPM is to work. In addition, pest surveillance data sheets that record the number of pests or other indicators of pest populations are to be maintained to verify the need for treatments.¶

**NOTIFICATION¶**  
The Fayette County Public Schools takes the responsibility to notify school staff and students of upcoming pesticide treatments. Notice will be provided in accordance with Kentucky Administrative Regulation.¶

**PESTICIDE STORAGE AND PURCHASE¶**  
Pesticide purchases will be limited to the amount authorized for use during the year. Pesticides will be stored and disposed of in accordance with the EPA registered label directions and state regulations. Pesticides must be stored in an appropriate, secure site not accessible to students or unauthorized personnel.¶

**Integrated Pest Management Application and Notification**

**Deleted: PESTICIDE APPLICATORS¶**  
Pesticide applicators must be educated and trained in IPM principles and practices and the use of pesticides approved by the Fayette County Public Schools, and they must follow regulations and label precautions. Applicators should be certified and comply with the Fayette County Public School IPM policy and Pest Management Plan.¶  
\* Precautionary statements are required on all pesticide labels. Signal words indicate the level of acute toxicity, which is the hazard to humans posed by the pesticide product. Every label bears the child hazard warning: *Keep Out of Reach of Children.*¶

EXPLANATION: RECENT REVISIONS TO 302 KAR CHAPTER 29 CHANGE THE REQUIREMENTS FOR NOTIFICATION OF PESTICIDE APPLICATION ON SCHOOL PROPERTY AND DEFINE WHEN CHILDREN ARE PRESENT. THE REVISIONS ALSO SET NOTIFICATION REQUIREMENTS IF/WHEN TREATMENT IS MADE WHILE CHILDREN ARE PRESENT.  
FINANCIAL IMPLICATION: NONE ANTICIPATED

SCHOOL FACILITIES

05.11 AP.21

### Integrated Pest Management Notification

**WRITTEN NOTICE IN THE FOLLOWING FORM SHALL BE SENT OR GIVEN AT THE BEGINNING OF THE SCHOOL YEAR. A COPY OF THE NOTIFICATION SHALL BE MAINTAINED BY THE SCHOOL AUTHORITY FOR TWENTY FOUR (24) MONTHS AFTER THE NOTICE IS ISSUED AND SHALL BE SUBJECT TO INSPECTION UPON REQUEST BY KENTUCKY DEPARTMENT OF AGRICULTURE PERSONNEL.**

\_\_\_\_\_ Date

Dear Parent or Guardian:

Each school district in the Commonwealth is required to implement a program of "integrated pest management" with the primary goal of preventing and controlling pests through strategies that may include judicious use of pesticides. The application of pesticides in the school or on school grounds during times when children are present is limited by state regulation, but there may be occasions when, after consulting with a certified pesticide applicator, the school administration determines that a pesticide application is necessary when children are present in the school. As required by state regulation, we have created a registry for parents or guardians who wish to receive an electronic message or telephone call prior to the application of pesticides in the school when children are present. Please provide the school administration your email address or phone number if you wish to be placed on this registry.

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

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

For more information, please contact \_\_\_\_\_ at \_\_\_\_\_.  
Name Phone Number

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SCHOOL FACILITIES

05.11 AP.21

**Deleted: Integrated Pest Management Notification¶**

This form may be used to implement the District's Integrated Pest Management Program and shall be sent or given at least twenty-four (24) hours prior to a qualifying pesticide application. A master copy of each notification shall be maintained by the school in a file marked IPM for twenty four (24) months after the notice is issued and shall be subject to inspection upon request by Division of Environmental Services personnel.¶

¶  
¶  
¶  
¶

\_\_\_\_\_¶  
Date¶

Dear Parent/Guardian, District Employee, or Health Professional,¶  
Please be advised that¶  
<#>A pesticide will be applied in or around the school while school is in session under the calendar set by the Board or when students or others are to be in the building during the application or within twenty-four (24) hours after the application.¶  
<#>Due to special circumstances, we were unable to provide the required advance notice of a pesticide application because  
\_\_\_\_\_¶  
(why advance notice was not provided).¶  
Please note the following information:¶  
Date of pesticide application: \_\_\_\_\_

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EXPLANATION: UNDER THE "EVERY STUDENT SUCCEEDS ACT OF 2015 (P. L. 114-95)", THE NCLB ACT WAIVER EXPIRES AUGUST 1, 2016 AND ESSA NO LONGER ADDRESSES SUPPLEMENTAL EDUCATIONAL SERVICES.  
FINANCIAL IMPLICATIONS: NONE ANTICIPATED

CURRICULUM AND INSTRUCTION

08.133 AP.1

### **Extended School Services**

**Deleted:** Supplemental Educational

Eligible students shall be provided extended school (ESS) in accordance with the following procedures.

**Deleted:** and/or supplemental educational services (SES)

#### **ELIGIBILITY FOR EXTENDED SCHOOL SERVICES**

One (1) or more of the following methods of documentation shall be used to determine which students shall be eligible for and in the greatest need of extended school services:

1. Teacher recommendation;
2. Academic performance data, including diagnostic, formative, interim, or summative assessments;
3. Student performance on high school, college, and workforce readiness assessments required by KRS 158.6459; or
4. Behavioral and developmental progress as documented in formal and informal assessments and reports.

#### **SELECTION FOR EXTENDED SCHOOL SERVICES**

Selection criteria for the extended school services program shall be in compliance with applicable administrative regulations.

#### **NOTIFICATION TO PARENTS OF EXTENDED SCHOOL SERVICES**

Parents of eligible students shall be notified using Procedure 08.133 AP.2.

The District will inform parents and guardians of the availability of extended school services, the rationale for offering extended school services, and consequences of not obtaining a high school diploma.

**Deleted:** Because the Kentucky request to the U. S. Dept. of Education for flexibility was granted, the following provision is waived through the 2018-2019 school year.¶

**SUPPLEMENTAL EDUCATIONAL SERVICES¶**  
Eligible students shall be provided supplemental educational services (SES). "Eligible students" mean all students from low-income families who attend Title I schools that are in their second year of school improvement, in corrective action, or in restructuring. "Supplemental educational services" means additional academic instruction designed to increase students' academic achievement such as tutoring, remediation, distance-learning technologies, or other educational interventions provided by state-approved service providers outside of the regular school day.¶  
In providing supplemental educational services, the District shall:¶  
<#>Notify parents of eligible children about the availability of supplemental educational services in a manner that is clear and concise, as well as clearly distinguishable from other school-related information that parents receive.¶



~~Deleted: CURRICULUM AND INSTRUCTION 08.133 AP.1~~  
~~.(CONTINUED)~~

~~Extended School/Supplemental Educational Services~~

~~Deleted: SUPPLEMENTAL EDUCATIONAL SERVICES  
(CONTINUED)~~

~~The District shall post on the District/school web site(s) information about available supplemental educational services to include:~~  
~~<#>The number of students who were eligible for and who participated in supplemental educational services (SES), beginning with data from the 2007-08 school year and for each subsequent year; and~~

~~<#>A list of SES providers approved to serve the District, as well as the locations where services are provided for the current school year.~~

~~<#>Help parents, at their request, choose a provider.~~

~~<#>Determine which students should receive services, pursuant to criteria set forth in federal law, if not all students can be served.~~

~~<#>Enter into agreements with service providers whom the parents select.~~

~~<#>Assist the Kentucky Department of Education (KDE) in identifying potential providers within the District.~~

~~<#>Provide information KDE needs to monitor the quality and effectiveness of the services that providers offer; and~~

~~<#>Protect the privacy of students who receive supplemental educational services.~~

**REFERENCES:**

KRS 158.6459

704 KAR 3:390

**RELATED PROCEDURE:**

08.133 AP.2

EXPLANATION: UNDER THE "EVERY STUDENT SUCCEEDS ACT OF 2015 (P. L. 114-95)", THE NCLB ACT WAIVER EXPIRES AUGUST 1, 2016 AND ESSA NO LONGER REQUIRES DISTRICTS TO OFFER A TRANSFER TO STUDENTS ATTENDING A SCHOOL IDENTIFIED FOR SCHOOL IMPROVEMENT. IN ADDITION, ESSA NO LONGER ADDRESSES SUPPLEMENTAL EDUCATIONAL SERVICES. FINANCIAL IMPLICATIONS: NONE ANTICIPATED

STUDENTS

09.11 AP.23

**ESSA Transfer Notification Options**

**Deleted:** Because the Kentucky waiver request to the U. S. Dept. of Education for flexibility was granted, there will be no need to use school improvement/restructuring notification forms through the 2018-2019 school year.

**<object>TIER 1 CONSEQUENCES PER 703 KAR 5:020**

Dear Parent/Guardian,  
Our school is dedicated to providing the best education possible for your child. We are notifying you because under the federal Every Student Succeeds Act (ESSA), our school has been identified for school improvement. This means the school did not make adequate yearly progress (AYP).  
In terms of our academic achievement, here is how our school compares with other schools in the District and in the state (information may be attached):  
Our school was identified for these reasons:  
We are working to improve student achievement by:  
The District and state of Kentucky will help us by:  
Parents wanting to get involved in addressing the academic issues that caused the school to be identified for school improvement should refer to the District's Title I Parental Involvement policy. Although we are committed to improving our school, as required by law, we are notifying you that you may request your child be transferred, at no expense to you, to the same grade level at another public school selected by the District that has not been identified for school improvement, corrective action, or restructuring. Your child may also be eligible for transportation to or from that school at no cost to you.  
<#>However, no other school option is available at this time for these reasons:  
<#>The following are District schools available to accept transfers. Attached to this notice is information concerning performance and quality of the school(s).  
You may also check our District web site for a list of available school transfer options for your child for the upcoming school year.  
Please contact us immediately, but no later than ten (10) school days following the date of this letter by calling  
request a transfer.  
Contact Telephone #  
Failure to meet this deadline will result in loss of your option to request a transfer. You will be notified of the school assignment.  
Please let me know if you have questions about this information.  
Sincerely,  
Principal/designee .

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.(CONTINUED)¶

**ESSA Transfer Notification Options**

**Deleted:** TIER 2 TIER 4 CONSEQUENCES PER 703 KAR 5:020¶

<object>Dear Parent/Guardian,¶  
Our school is dedicated to providing the best education possible for your child. We are notifying you because under the federal Every Student Succeeds Act (ESSA), our school has been identified for¶  
 second year school improvement (Tier 2 consequences)  corrective action (Tier 3 consequences) .  restructuring (Tier 4 consequences) . Being identified at any of these levels means the school did not make adequate yearly progress (AYP).¶  
In terms of our academic achievement, here is how our school compares with other schools in the District and in the state (information may be attached):

\_\_\_\_\_¶  
\_\_\_\_\_¶

Our school was identified for these reasons: \_\_\_\_\_¶

We are working to improve student achievement by: \_\_\_\_\_¶

The District and state of Kentucky will help us by: \_\_\_\_\_¶

Parents wanting to get involved in addressing the academic issues that caused the school to be identified for school improvement should refer to the District's Title I Parental Involvement policy.¶  
Although we are committed to improving our school, as required by law, we are notifying you that you may request your child be transferred, at no expense to you, to the same grade level at another public school selected by the District that has not been identified for school improvement, corrective action, or restructuring. Your child may also be eligible for transportation to and from that school at no cost to you.¶

<#>However, no other school option is available at this time for these reasons: \_\_\_\_\_¶

<#>The following are District schools available to accept transfers. Attached to this notice is information concerning performance and quality of the school(s). \_\_\_\_\_¶

If you are a parent who falls under the designation "low income" and you choose not to transfer your child to another school, your child may receive supplemental educational services (SES) before or after school. You may choose from a state-approved list of providers. The District shall pay the providers but you must provide transportation. The providers available to you are: \_\_\_\_\_¶

Included with this notification is a description of the services, qualifications and effectiveness for each available provider. Should the demand for supplemental education services exceed available funds, the amount of tutoring your child may receive will depend on the cost of the service selected. Should the number of students signing up for tutoring services exceed the ability of the District to fund the service, the District will give priority to students based on the following: \_\_\_\_\_¶

Please contact us immediately, but no later than ten (10) school days following the date of this letter by calling \_\_\_\_\_

(Telephone #) at \_\_\_\_\_ (Contact) at \_\_\_\_\_  
(Telephone #) to request a transfer or supplemental educational services. Failure to meet this deadline will result in the loss of your option to request a transfer or receive supplemental educational services (SES).¶

Please let me know if you have questions about this information.¶  
Sincerely, \_\_\_\_\_¶  
Principal/designee . ¶

**RELATED PROCEDURE:** 08.133 AP.1¶

**ESSA Transfer Notification Options**

<b>TO:</b> _____ <i>Parent's Name</i>	<b>FROM:</b> _____ <i>School Name</i>
<b>DATE:</b> _____	<b>RE:</b> _____ <i>Student's Name</i>
	<b>GRADE:</b> _____

Dear Parent/Guardian,

Our school is dedicated to providing the safest educational experience possible for your child. We are notifying you because under ESSA and state law, our school has been designated as "persistently dangerous." A Kentucky public school is considered persistently dangerous if conditions exist over a period of time that expose students to injury due to violent criminal acts.

Although we are committed to improving our school, as required by law, we are notifying you that you may request your child be transferred to the same grade level at a District school that has not been identified as being persistently dangerous. Your child would be entitled to free transportation services.

- However, no other school option is available at this time.
- The following are schools available to accept transfers: \_\_\_\_\_  
\_\_\_\_\_

Please contact us immediately, but no later than ten (10) school days following the date of this letter by calling \_\_\_\_\_ at \_\_\_\_\_ to request

Contact Telephone #

a transfer. Failure to meet this deadline will result in loss of your option to request a transfer.

You will be notified of the school assignment.

Please let me know if you have questions about this information.

Sincerely, \_\_\_\_\_  
Principal/designee

**Deleted:** that is making adequate yearly progress and

**Deleted:** , or in school improvement, corrective action, or restructuring

STUDENTS

09.11 AP.23  
(CONTINUED)

**ESSA Transfer Notification Options**

<b>TO:</b> _____ <i>Parent's Name</i>	<b>FROM:</b> _____ <i>School Name</i>
<b>DATE:</b> _____	<b>RE:</b> _____ <i>Student's Name</i>
	<b>GRADE:</b> _____

Dear Parent/Guardian,

Our school is dedicated to providing the safest educational experience possible for your child. We are notifying you because the Superintendent has determined that your child has been a victim of a violent criminal offense as defined under state law.

Although we are committed to improving our school as required by law, we are notifying you that you may request your child be transferred to the same grade level at a District school that has not been identified as being persistently dangerous, if such a school is available within the District.

- However, no other school option is available at this time.
- The following are schools available to accept transfers: \_\_\_\_\_  
\_\_\_\_\_

Please contact us immediately, but no later than ten (10) school days following the date of this letter by calling \_\_\_\_\_ at \_\_\_\_\_ to request a transfer. Failure to meet this deadline will result in loss of your option to request a transfer.

Contact Telephone #

You will be notified of the school assignment.

Please let me know if you have questions about this information.

Sincerely, \_\_\_\_\_  
Principal/designee

NOTE: This parent was contacted by telephone by \_\_\_\_\_ on \_\_\_\_\_  
Staff Member

\_\_\_\_\_  
Date

**Deleted:** that is making adequate yearly progress and

**Deleted:** , or in school improvement, corrective action, or restructuring

**Deleted:** STUDENTS 09.11 AP.23¶  
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**ESSA Transfer Notification Options**

**Deleted:** Because the Kentucky ESSA waiver request was granted through the 2018-2019 school year, only those sections addressing persistently dangerous schools, victims of a violent criminal offense, and related deadlines will apply.¶

**TIMELINE INFORMATION¶**

**ESSA IMPROVEMENT SCHOOL:¶**

◆ When a school is identified for “school improvement, corrective action, or restructuring,” the District shall notify parents of students attending the designated school of the option to transfer their child to another public school not identified for improvement and provide details about the available options as far in advance as possible, but no later than fourteen (14) days before the start of the school year.¶

◆ . As required by federal regulations, the District shall post on the District/school web site(s) information about available public school choice options to include the number of students who were eligible for and who participated in public school choice, beginning with data from the 2007–08 school year and for each subsequent year, and a list of available schools to which students eligible for public school choice may transfer for the current school year.¶

**SUPPLEMENTAL EDUCATIONAL SERVICES:¶**

◆ To assist parents of eligible students in requesting and selecting an SES provider, the District shall provide at least two (2) enrollment windows at separate points in the school year.¶

**PERSISTENTLY DANGEROUS SCHOOL:¶**

◆ . Within ten (10) days of receiving notification of a school being designated as a “persistently dangerous school” (as defined by the Kentucky Board of Education), the District shall notify parents of students attending the designated school.¶

◆ Within twenty (20) school days from the date the District receives notice of being designated as “persistently dangerous,” the District must notify students attending the school and their parents of the opportunity to transfer to a safe District school with transportation provided.¶

**VICTIM OF VIOLENT CRIMINAL OFFENSE:¶**

◆ . The District shall notify parents within twenty-four (24) hours, both in writing and by telephone, of a final determination that their child has been a victim of a violent criminal offense.¶

◆ The District shall offer the parent/guardian of the student the opportunity to transfer to a safe District school within ten (10) calendar days of such a determination.¶

**DEADLINE:¶**

◆ . Transfers resulting from any of these designations must be completed within thirty (30) school days from the date the District receives notice of the designation. The District will make every effort to arrange for a requested transfer prior to the beginning of a school year.¶

◆ = time requirement designated by federal law¶

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**Gifted/Talented and Magnet School/Program Procedures**

**APPLICATION PROCESS**

Gifted/Talented and Magnet Program Services shall manage applications for Gifted/Talented (Liberal Arts Academy at Henry Clay High School, SCAPA at Bluegrass/Lafayette High School, and MSTC at Paul L. Dunbar High School) and Magnet schools/programs.

Applications for Magnet schools/programs and Gifted/Talented programs shall be permitted and open to Fayette County residents ONLY. All requested information must be provided for applications to be considered, (If Fayette County proof of residency is not provided at the time of school registration/enrollment, the placement offer extended is null and void.) The application deadline is October 7<sup>th</sup>, unless October 7<sup>th</sup> is a Saturday or Sunday, in which case the deadline shall be the next Monday. Parents/guardians shall be given the opportunity to correct incomplete and/or erroneous applications through the application deadline. When it is in the best interest of the child, the Superintendent/designee may waive the deadline and treat the applicant as though the application were on time.

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**MAGNET LOTTERY**

Lotteries shall be conducted by the Office of Data, Research & Evaluation. Such lotteries shall include the following prioritized factors:

- A significant weight to ensure sibling preference, and
- Extra or reduced weight as needed to assist schools in meeting diversity goals.

For the purpose of this Board Policy and Administrative Procedures, a sibling shall be defined as a sister, half-sister, step-sister, brother, half-brother, step-brother, or student under legal guardianship living in the same residence and applying for enrollment in the same school so students will attend concurrently the following year. If families with students in the secondary levels of the Spanish Immersion program (at Bryan Station Middle School or Bryan Station High School) have signed contracts committing the current students to participation in the program through 12<sup>th</sup> grade, their sibling applicants to Maxwell will be given preference. IAKSS staff shall request documentation of an applicant's sibling status.

- Deleted: <#>Extra weight for the applicants' first magnet choice,¶
- Deleted: <#>Reduced weight for the applicants' second and third magnet choices,¶
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- Deleted: A separate random number for each applicant for each of the three (3) allowed magnet choices.
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For the purpose of this Board Policy and Administrative Procedures, diversity goals are defined as bringing all involved magnet and regular schools closer to the District-wide, school level averages for economic and ethnic diversity. If or whenever the Board approves a different diversity goal for any specific school, that goal shall guide the diversity lottery weight for that school.

**PLACEMENT OFFERS**

Placement offers shall be made only to Fayette County residents. Parents/guardians of students who are offered placement shall receive the offer in writing and shall have at least seven (7) calendar days to respond.

- Deleted: two (2) weeks
- Deleted: A one (1) year commitment from each student is expected.

**Gifted/Talented and Magnet School/Program Procedures**

**PLACEMENT OFFERS (CONTINUED)**

The following provisions apply to the Gifted/Talented and Magnet School/Program placement process:

- Applicants not placed into a magnet school/program and/or a gifted/talented program must reapply to be considered the following year;
- Students will be considered only for magnet and/or gifted/talented schools/programs for which they apply;
- Students may accept placement only for the magnet school/program or gifted/talented program that has been offered;
- Students who are offered placement for more than one (1) school or program shall be considered as rejecting all standing offers when they accept one (1) of the offers.

**Deleted:** magnet

**MAGNET APPEALS**

A parent and/or guardian whose child does not meet the criteria for a magnet school/program to which they have applied shall be informed by letter by the appropriate staff at IAKSS. A parent and/or guardian who wishes to appeal must submit written documentation showing the child meets the criteria within seven (7) days (excluding recognized holidays) of the date on the letter. Appeals shall be reviewed by the Magnet Admissions Review Sub-Committee.

**Deleted:** <#>Students who accept placement to a magnet school/program shall not be offered placement to another magnet school/program; but may be offered placement to gifted/talented programs if slots become available;¶

**Deleted:** <#>All magnet program offers will be made no later than April 30<sup>th</sup> for the following school year.¶  
<#>All gifted/talented program offers will be made no later than April 30<sup>th</sup> for the following school year.¶

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**GIFTED GRIEVANCES**

The grievance appeal process for gifted and talented placement and services shall be addressed in administrative procedure 08.132 AP.1/Gifted Talented Students.

The Superintendent shall make the final decision regarding all appeals.

**RELATED PROCEDURE:**

08.132 AP.1



EXPLANATION: THIS CLARIFIES THAT PERSONS WITH LAWFUL AUTHORITY SUCH AS POLICE OFFICERS WITH A WARRANT OR THE PERSON AUTHORIZED BY THE CABINET FOR FAMILIES AND CHILDREN WHEN THE STUDENT IS COMMITTED TO THE CABINET BY A COURT ORDER MAY SIGN OUT STUDENTS.

FINANCIAL IMPLICATIONS: NONE ANTICIPATED

STUDENTS

09.1231 AP.21

**Student Entry and Exit Log**

(Example Only - Each school may design its own.)

SCHOOL: _____	DATE _____
---------------	------------

**STUDENTS WHO ARE LATE IN ARRIVING AT SCHOOL OR WHO ARE DEPARTING EARLY SHALL SIGN THIS LOG.**

When recognized by the Principal/designee or by presenting verification of identity, the following persons may sign out students<sup>1</sup>:

- **Custodial parent/guardian**
- **Noncustodial parent, unless the school has been provided with evidence that there is a state law or court order which provides instruction to the contrary**
- **Persons designated in writing by the custodial parent/guardian (must be an adult designee if an elementary student is involved)**
- **Persons designated by the Principal in the event of an emergency**
- **Persons with lawful authority to take custody of the student**

<sup>1</sup>Those students who are not on record as being under the care or control of a parent/guardian may sign for their own dismissal.

NAME OF STUDENT	GRADE/ HOMEROOM	TIME OF SIGN-IN	TIME OF SIGN-OUT	REASON	SIGNATURE OF AUTHORIZED PERSON/ELIGIBLE STUDENT	INITIALS OF EMPLOYEE VERIFYING IDENTITY

**DAILY LOG SHEETS SHALL BE KEPT ON FILE FOR TWO (2) FULL SCHOOL YEARS.**

EXPLANATION: THE "EVERY STUDENT SUCCEEDS ACT OF 2015 (P. L. 114-95)" ONLY ALLOWS PARENTS/GUARDIANS OF STUDENTS OR STUDENTS WHO HAVE REACHED AGE 18 (ELIGIBLE STUDENTS) TO OPT-OUT OF RELEASE OF INFORMATION TO MILITARY RECRUITERS AND INSTITUTIONS OF HIGHER EDUCATION.  
FINANCIAL IMPLICATIONS: POSSIBLE COSTS OF REPRINTING OF FORMS  
EXPLANATION: PERSONALLY IDENTIFIABLE INFORMATION IS DEFINED.  
FINANCIAL IMPLICATIONS: NONE ANTICIPATED

STUDENTS

09.14 AP.1

### **Family Education Rights and Privacy Act Definitions**

Although this listing is not intended to take the place of the complete FERPA law and regulations, the following definitions shall apply when implementing Policy 09.14 and the procedures that follow.

**EDUCATION RECORDS** - Refers to records directly related to a student that are maintained by the District or by a party acting for the District.

A "record" shall include any information recorded in any way, including, but not limited to, handwriting, print, computer media, video or audiotape, film, microfilm, and microfiche. Student records shall include disciplinary records with regard to suspension and expulsion.

Staff should refer to federal regulations for examples of documents that are not considered education records.

#### **PERSONALLY IDENTIFIABLE INFORMATION - Includes, but is not limited to, the following:**

1. Student's name;
2. Name of the student's parent or other family member;
3. Address of the student or student's family;
4. Any personal identifier, such as the student's social security or student number;
5. Personal characteristics that would make the student's identity easily traceable, including biometric records (measurable biological or behavioral characteristics that can be used for automated recognition of an individual, such as fingerprints, retina and iris patterns, voiceprints, DNA sequence, facial characteristics, and handwriting); or
6. Other information that, alone or in combination, is linked or linkable to a specific student that would allow a reasonable person in the school community, who does not have personal knowledge of the relevant circumstances, to identify the student with reasonable certainty.

#### **DIRECTORY INFORMATION**

"Directory Information" shall be released, upon written request, to the news media, athletic associations, military recruiters, higher education providers, scholarship or college entrance committees, or official organizations **only** if the need for data is connected with student help activities. "Directory Information" shall be released, unless the parent, legal guardian, custodian, or student 18 years of age or older specifies in writing, by October 1 of each school year or within 30 days of enrollment if after October 1, that all or part of the data relating to the student be withheld. The request to withhold must be in writing and shall be filed in the office of the Principal. **Any other requests for directory information shall be in writing seeking approval by the Superintendent.** The request shall clearly describe the reason and the use for which the information shall be used. Any information released by the Superintendent shall be used specifically for the purpose stated in the request and none other.

**Family Education Rights and Privacy Act Definitions****DIRECTORY INFORMATION (CONTINUED)**

Directory information designated by the District is listed in 09.14 AP.12.

Unless the parent/guardian or eligible student requests in writing by October 1<sup>st</sup> of each school year that the District not release information, the student's name, address, and telephone number (if listed) shall be released to Armed Forces recruiters [and institutions of higher education](#) upon their request.

**STUDENT** - Except as otherwise specifically designated by law, "student" shall mean any individual who is or has been in attendance in the District and for whom the District maintains education records.

**DISCLOSURE** - Refers to permitting access to, or release or transfer of, personally identifiable information contained in a student's education record to any party, by any means, including oral, written, or electronic.

**EDUCATION PROGRAM** - Programs principally engaged in the provision of education, including, but not limited to, early childhood education, elementary and secondary education, postsecondary education, special education, job training, career and technical education and adult education, and any program that is administered by an educational agency or institution.

**EARLY CHILDHOOD EDUCATION PROGRAM** - A Head Start program, a state licensed or regulated child care program, or a program that serves children from birth through age six (6) that addresses the children's cognitive, social, emotional and physical development and is a (a) state prekindergarten program; (b) a program authorized under the Individuals with Disabilities Education Act; or (c) a program operated by a local education agency.

**NOTE:** For additional information about student records, please refer to the District's [Confidentiality and Nondiscrimination Handbook](#), which is available on the District's web site.

**REFERENCES:**

- 34 C.F.R. Part 99, 20 U.S.C. 1232g
- P. L. 114-95, (Every Student Succeeds Act of 2015)

EXPLANATION: THE "EVERY STUDENT SUCCEEDS ACT OF 2015 (P. L. 114-95)" ONLY ALLOWS PARENTS/GUARDIANS OF STUDENTS OR STUDENTS WHO HAVE REACHED AGE 18 TO OPT-OUT OF RELEASE OF INFORMATION TO MILITARY RECRUITERS AND INSTITUTIONS OF HIGHER EDUCATION.  
FINANCIAL IMPLICATIONS: POSSIBLE COSTS OF REPRINTING OF FORMS

STUDENTS

09.14 AP.11

### **Family Educational Rights and Privacy Act**

The following rules and procedures shall be complied with relative to disclosure of student records:

1. The District shall annually notify parents of students currently in attendance, or eligible students currently in attendance, of their rights under the Family Educational Rights and Privacy Act (FERPA).

The notification also shall be furnished to parents of all new students and to all new eligible students by the Principal at the time of enrollment.

2. Unless the parent or student who has reached age 18 requests in writing that the District not release information, the student's name, address, and telephone number (if listed) shall be released to Armed Forces recruiters and institutions of higher education upon their request.

Subject to federal opt-out rights, directory information shall be made available to Armed Forces recruiters and institutions of higher education on the same basis as it is provided to the public.

3. Parents or eligible students who wish to review educational records may make a request on the appropriate form. Forms are available at the school and in the Central Office. Access shall be provided within a reasonable time frame, not to exceed forty-five (45) calendar days of District receipt of the request. Because, a shorter timeline is required in certain situations involving IDEA students, staff shall adhere to the District's special education procedures for responding to such requests.

If circumstances effectively prevent a parent or eligible student from exercising inspection rights, copies of the requested records shall be provided within the above stated time frame.

Until any questions are resolved, no student record held by the District shall be discarded when the record is under an outstanding request to inspect or review.

4. School authorities shall make a documented effort to notify the parent or eligible student prior to complying with a court order or subpoena that directs the disclosure of information concerning the student. In compliance with FERPA, notice to the parent is not required when a court order directs that the parent/eligible student is not to be notified, or when the order is issued in the context of a dependency, neglect, or abuse proceeding in which the parent is a party.

As noted in the District's annual FERPA notice, parent consent/notification is not required to release student records to another school district or post-secondary institution in which a student seeks or intends to enroll or is already enrolled.

5. The District shall disclose personally identifiable student information to an organization designated to conduct a study for or on behalf of the District only when a written agreement has been established with the organization. Such disclosure does not require parent/eligible student consent.

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**Family Educational Rights and Privacy Act**

6. The parent or eligible student must sign a request and consent form before a student's records are to be transferred to an agency or individual not authorized under law to receive them.
7. A log shall be maintained of student records requests and disclosures, including emergency disclosures in response to an actual, impending, or imminent articulable and significant health/safety threat. The log requirement does not apply to the following:
  - a. Disclosures made to parents or eligible students,
  - b. Records released pursuant to written consent,
  - c. Access by school officials and others having a legitimate educational interest under FERPA,
  - d. Disclosure to a party with written consent from a parent or eligible student,
  - e. Disclosures of directory information, or
  - f. Disclosures of records made pursuant to a subpoena or court order where a court order or other law provides that the parent or student are not to be notified.
8. A challenge to the records may take the form of an informal discussion among the parents, student, and school officials. Any agreement between these parties shall be reduced in writing, signed by all parties, and placed in the student's records.
9. Upon request, the Superintendent/designee shall, arrange for a record amendment hearing in compliance with 702 KAR 1:140.

**RELATED PROCEDURES:**

All 09.14 procedures

EXPLANATION: THE "EVERY STUDENT SUCCEEDS ACT OF 2015 (P. L. 114-95)" ONLY ALLOWS PARENTS/GUARDIANS OF STUDENTS OR STUDENTS WHO HAVE REACHED AGE 18 TO OPT-OUT OF RELEASE OF INFORMATION TO MILITARY RECRUITERS AND INSTITUTIONS OF HIGHER EDUCATION.  
FINANCIAL IMPLICATIONS: POSSIBLE COSTS OF REPRINTING OF FORMS

STUDENTS

09.14 AP.111

### **Notification of FERPA Rights**

Distribute this notice annually to parents and students.

The Family Educational Rights and Privacy Act (FERPA) affords parents and "eligible students" (students 18 years of age or older or students who are attending a postsecondary institution) certain rights with respect to the student's education records. They are:

1. ***The right to inspect and review the student's education records within forty-five (45) days of the day the District receives a request for access.***

Parents or eligible students should submit to the school Principal/designee a written request that identifies the record(s) they wish to inspect. The Principal will make arrangements for access and notify the parent or eligible student of the time and place where the record(s) may be inspected.

2. ***The right to inspect and review logs documenting disclosures of the student's education records.***

Except for disclosure to school officials, disclosures related to some judicial orders or lawfully issued subpoenas, disclosures of directory information, and disclosure to the parent or eligible student, FERPA regulations require the District to record the disclosure.

3. ***The right to request the amendment of the student's education records that the parent or eligible student believes are inaccurate, misleading, or in violation of the student's privacy or other rights.***

Parents or eligible students may ask the District to amend a record that they believe is inaccurate, misleading, or in violation of privacy or other rights. They should write the school Principal, clearly identify the part of the record they want changed, and specify why it is inaccurate, misleading, or in violation of their privacy or other rights.

If the District decides not to amend the record as requested by the parent or eligible student, the District will notify the parent or eligible student of the decision and advise him/her of the right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the parent or eligible student when notified of the right to a hearing.

4. ***The right to provide written consent prior to disclosure of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent.***

Exceptions that permit disclosure without consent include:

- a. Disclosure to school officials with legitimate educational interests. A "school official" is a person employed by the District as an administrator, supervisor, instructor, or support staff member (including health or medical staff and law enforcement unit personnel); a person serving on the school Board; a volunteer, or an outside person or company with whom the District has contracted to perform a special task (such as an attorney, auditor, medical consultant, or therapist); or a parent or student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his/her tasks.

**Notification of FERPA Rights**

A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his/her professional responsibility to the District.

This may include contractors, consultants, volunteers, and other parties to whom the District has outsourced services or functions.

- b. Upon request, disclosure of education records without parent/eligible student notice or consent to officials of another school district or post-secondary institution in which a student seeks or intends to enroll or is already enrolled or to other entities authorized by law so long as the disclosure is for purposes related to the student’s enrollment or transfer.
- c. Disclosure of information to those whose knowledge of such information is necessary to respond to an actual, impending, or imminent articulable and significant health/safety threat.
- d. Disclosure to state and local educational authorities and accrediting organizations, subject to requirements of FERPA regulations.

Designated Kentucky State agencies may be permitted access to student record information, which will depend on the authority granted to their particular agency.

- 5. *The right to notify the District in writing to withhold information the Board has designated as directory information as listed in the annual directory information notice the District provides to parents/eligible students.*

To exercise this right, parents/eligible students shall notify the District by the deadline designated by the District.

- 6. *The right to prohibit the disclosure of personally identifiable information concerning the student to recruiting representatives of the U. S. Armed Forces and its service academies, the Kentucky Air National Guard, the Kentucky Army National Guard and institutions of higher education.*

Unless the parent or student who has reached age 18 requests in writing that the District not release information, the student’s name, address, and telephone number (if listed) shall be released to Armed Forces recruiters and institutions of higher education upon their request.

- 7. *The right to file a complaint with the U.S. Department of Education concerning alleged failures by the District to comply with the requirements of FERPA.* The name and address of the Office that administers FERPA is:

Family Policy Compliance Office  
 U.S. Department of Education  
 400 Maryland Avenue, SW  
 Washington, DC 20202-4605

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**FERPA Directory Information Opt-Out Form**  
**For All Students**

Complete this form to exercise your right to privacy.

The District has designated a student's name, address, email address, telephone number, date and place of birth, information about the student's participation in officially recognized activities and sports, student's weight and height (if a member of an athletic team), student's dates of attendance, grade level, honors and awards, photograph (excluding video records), and major field of study as "directory information", which means under the Family Education Rights and Privacy Act ("FERPA") that this information can be released without your consent. If you do not want this information released to people requesting directory information, the parent/guardian or eligible student (18 years of age or older) must sign this form and return it to the school office within one month after enrollment. This opt-out request will remain in effect for the current school year only.

I hereby exercise my rights under state and federal law and hereby request that the name, address, email address, telephone number, date and place of birth, information about the student's participation in officially recognized activities and sports, students weight and height (if a member of an athletic team), students dates of attendance, grade level, honors and awards, photograph (excluding video records), and major field of study for \_\_\_\_\_ (student name), currently a student at \_\_\_\_\_ (school name), not be released without prior written consent.

I understand and acknowledge that this opt-out request will remain in effect for the current school year only. I understand it will exclude my student from publications such as photo/directory information and that my student's information will not be published in any form including District publications such as playbills, yearbooks, websites, newsletters, newspapers, etc.

Signed by (check one.): \_\_\_\_\_ eligible student \_\_\_\_\_ parent/guardian

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/ZIP

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**Deleted: Student Directory Information Notification¶**

Consistent with the Family Educational Rights and Privacy Act (FERPA), parents (or students 18 or older) may direct the District not to disclose directory information listed below. We are required to disclose a student's name, address, and telephone listing at the request of Armed Forces recruiters, unless a parent or secondary school student, regardless of age, requests that this information *not* be disclosed.¶

**Date¶**

Dear Parent/Eligible Student,¶

This letter informs you of your right to direct the District to withhold release of student directory information for

\_\_\_\_\_¶  
Following is a list of items that the District considers ¶

**Student's Name¶**

student directory information. If you wish information to be withheld, please choose one (1) of the two (2) options below in both Sections I and II. Choose Option 1 if the District may not release any item of directory information; Option 2, if the District may release only selected items of information. Then check those items that may be released. Please be advised that parents cannot prevent the school from using directory information on District-issued ID cards or badges.¶

*If we receive no response within thirty (30) days of the date of this letter, all student directory information will be subject to release without your consent.*

If you return this signed form on time, we will withhold the directory information consistent with your written directions, unless disclosure is otherwise required or permitted by law. Once there has been an opt-out of directory information disclosure, the District will continue to honor that opt-out until the parent or the eligible student rescinds it, even after the student is no longer in attendance.¶

**Student Directory Information Listing**



EXPLANATION: EFFECTIVE WITH THE 2015 SCHOOL YEAR, THE ONLY MEDICAID CONSENT FORMS ACCEPTED FOR MONITORING ARE LOCATED ON KDE'S WEBSITE.  
 FINANCIAL IMPLICATIONS: NONE ANTICIPATED  
 EXPLANATION: STUDENT RECORDS ARE OFTEN REQUESTED ELECTRONICALLY. THIS ADDRESSES SUCH.  
 FINANCIAL IMPLICATIONS: NONE ANTICIPATED

STUDENTS

09.14 AP.24

**Release/Inspection of Student Records**

Deleted: /Medicaid Consent

**TO THIRD PARTY**

(Pursuant to the Family Educational Rights and Privacy Act)

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

The Fayette County Public Schools are hereby authorized to:

- Release or copy                       Permit the inspection of

The following listed records of \_\_\_\_\_, who was born  
*Student's Name*  
 on \_\_\_\_\_, to/by \_\_\_\_\_.  
*Name of Individual or Agency*

Check applicable records and specify reason for release or authorization to inspect:

<b>RECORDS (including electronic)</b>	<b>PURPOSE</b>
<input type="checkbox"/> All cumulative records	
<input type="checkbox"/> Attendance record only	
<input type="checkbox"/> Grade records only	
<input type="checkbox"/> Standardized test data only	
<input type="checkbox"/> Special education records only	
<input type="checkbox"/> Other: _____	

This release is effective only for the specified records or types of records (including electronic) on hand as of the date you sign below UNLESS you specifically authorize further release of the specified records or types of records as follows. (Check and initial ONE of the following.)

- I authorize on-going release of the specified records or types of records to the entity/individual specified until student reaches age of 18 unless earlier revoked in writing. (Initials \_\_\_\_\_)
- I authorize release of the specified records or types of records until the end of the present school year (June 30th) unless earlier revoked in writing. (Initials \_\_\_\_\_)

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

\_\_\_\_\_  
*Signature of Parent/Legal Guardian or Individual Acting as Parent under FERPA\**

\_\_\_\_\_  
*Signature of Student, if 18 or older or Attending Post-secondary Institution*

\* *Living in the student's home in the absence of the parent on a day-to-day basis*

Deleted: Medicaid Consent¶  
 I have received my Annual Notification of Parent Rights regarding Medicaid billing, and I understand and agree that the District may access my child's or my public benefits or insurance to pay for services under the Individuals with Disabilities Education Act. (This also authorizes release of education records as specified above.)¶

\_\_\_\_\_  
*Signature of Parent/Guardian Date¶*

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EXPLANATION: THIS PROCEDURE MAY BE UTILIZED FOR SUPERVISION WHEN A REQUEST FOR SPECIAL TREATMENT IS MADE DUE TO TRANSGENDER IDENTITY OR OTHER ISSUES WHICH MIGHT REQUIRE SPECIAL SUPERVISION CONSIDERATIONS.  
FINANCIAL IMPLICATIONS: NONE ANTICIPATED.

STUDENTS

09.221 AP.1

### **Supervision of Students**

#### **RESPONSIBILITY**

Principals shall develop and implement a plan of supervision for their schools to address the following areas:

1. Bus loading and unloading, including safe dismissal of walkers and car riders;
2. Meals;
3. Halls, restrooms, and playgrounds;
4. Time before and after the school day;
5. Field trips and other school activities; and
6. Other issues.

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NOTE: IN ORDER TO COMPLETE DOCUMENTATION REQUIRED BY KRS 158.156 AND RELATED KENTUCKY STATUTES, AND TO AVOID LIABILITY CONCERNS RELATING TO FERPA (FAMILY EDUCATION RIGHTS AND PRIVACY ACT), PRINCIPALS MAY NEED ASSISTANCE BECOMING FAMILIAR WITH REQUIREMENTS AND LIMITATIONS OF THOSE STATE AND FEDERAL LAWS.

DRAFT ALL NEW LANGUAGE 5/3/16

STUDENTS

09.2211 AP.21

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**Documentation of Reporting Required by Law**  
**(FOR INTERNAL ADMINISTRATIVE TRACKING PURPOSES ONLY)**

This form shall be used to document reports listed in Policy 09.2211 that are required by KRS 158.154, KRS 158.155, and KRS 158.156. After receiving a report of an alleged violation from an employee, the Principal shall be responsible for documenting the alleged incident. Regardless of the statutory provision under which the alleged incident falls or the reporting requirements of that provision, school employees shall report the alleged incident to the Principal for documentation.

**STUDENT REPORTED FOR VIOLATION**

*Last Name*                      *First Name*                      *Middle Initial*

General nature of the alleged violation:

On \_\_\_\_\_, I reported the above incident to:

*Date*

- Local law enforcement official; specify: \_\_\_\_\_
- Department of Kentucky State Police                       County Attorney
- The Superintendent, who shall report it to the Board, if required by KRS 158.156

*Signature of Principal Reporting*

*Date*

The following information about the student involved is for internal tracking purposes only:

**INFORMATION FOR STUDENT REPORTED:**

**BIRTHDATE**                      **AGE**                      **SCHOOL**                      **GRADE**

**PARENT/GUARDIAN**  
*Last Name*                      *First Name*                      *Middle Initial*

**PARENT/GUARDIAN ADDRESS**

**PARENT/GUARDIAN WORK PHONE**                      **HOME PHONE**

If the report concerns an alleged student victim, the following information applies to that student:

**ALLEGED VICTIM**

*Last Name*                      *First Name*                      *Middle Initial*

**BIRTHDATE**                      **AGE**                      **SCHOOL**                      **GRADE**

**PARENT/GUARDIAN**  
*Last Name*                      *First Name*                      *Middle Initial*

**PARENT/GUARDIAN ADDRESS**

**PARENT/GUARDIAN WORK PHONE**                      **HOME PHONE**

STUDENTS

09.2211 AP.21

(CONTINUED)

**Documentation of Reporting Required by Law**

**(FOR INTERNAL ADMINISTRATIVE TRACKING PURPOSES ONLY)**

**PARENTAL NOTIFICATION**

If their child is involved in an incident related to KRS 158.156, the Principal shall notify parents/guardians in writing.

**BOARD NOTIFICATION**

For an incident related to KRS 158.156, the Principal shall report only the following information to the Superintendent to share with the Board:

On _____, _____ students were involved in an incident <i>Date</i> <i>Number</i> reportable under KRS 158.156.  _____ <i>Name of School</i> <i>Signature of Principal</i>
---

**RELATED PROCEDURE:**

09.438 AP.21

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STUDENTS

**Student Medication Administration**

**AUTHORIZATION**

The MEDICAL AUTHORIZATION FORM (09.2241 AP.2) shall be completed before any employee administers medication to a student. Only school personnel selected by the Principal shall have the responsibility for administering medication to students.

**A. ADMINISTRATION OF MEDICATION**

1. Prescribed Medication

- Prescribed medication must be sent to the school in the original labeled container and the label shall include:
  - a. Name and address of the pharmacy
  - b. Name of the patient
  - c. Name of the prescribing practitioner
  - d. Date the prescription was dispensed
  - e. Expiration date of the medication
  - f. Name of the medication, dosage and strength of medication
  - g. Route of administration
  - h. Frequency of medication
- A Parent/Guardian Authorization form (AP.21) completed by the parent/legal guardian must be on file in the student’s cumulative health record and is only valid for the current school year.

Non-prescribed Medication/Over the Counter (OTC)

- An authorization form completed by the parent/legal guardian must be on file in the student’s cumulative health record.
- Medication must be provided by the parent/legal guardian in the original container that includes recommended dosage and directions for administration
- An OTC medication shall not be administered beyond its expiration date
- ~~Over-the-counter medications will not be administered without the authorization of the student's health care practitioner and a parent.~~
- ~~Students may self-administer sunscreen only with parent authorization.~~

**Deleted:** <#>When the authorization form is not sent with the first day's dosage of the prescribed medication, a one-day waiver may be given by the School Nurse, utilizing the MEDICATION WAIVER FORM (09.2241 AP.2). The authorization form shall then be sent home for completion; it shall be returned the next day.¶

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This is not in the Medication Administration Training Manual for Non-Licensed School Personnel

**Student Medication Administration****A. ADMINISTRATION OF MEDICATION (CONTINUED)**

## 3. Student Self-Medication

- In certain situations, a written health care provider's authorization shall allow a student to responsibly carry self-administered medication (e.g. EpiPen, asthma inhaler, insulin, or FDA approved seizure rescue medications), pursuant to KRS 158.834, KRS 158.836 and KRS 158.838.
- An authorization form must be completed by the parent/guardian and health care provider and be kept on file in the school. This authorization must be renewed each school year. Documentation from the prescribing health provider shall include:
  - a. The student is capable of administering the prescribed medication.
  - b. The name and purpose of the medication
  - c. The prescribed dosage of the medication
  - d. The times at which or circumstances under which the medication may be given
  - e. The period of time for which the medication is prescribed
- Students may not share any medication with another student.
- Notify the parent/guardian if the student uses his/her medication inappropriately or more often than prescribed.
- Advise the student's teacher(s) and other appropriate staff on a need to know basis.

## 4. Medication Safety

- First dose of any new medication should be given at home and not at school.
- All medications should be brought to the school by a parent/guardian when possible.
- If medication is transported to school by the student, it should be transported in its original container and in a sealed envelope with the student's name on the outside and given to the appropriate school personnel (school nurse or designated school personnel).
- Controlled substances shall be counted and the number of pills received shall be noted on the Controlled Substance Monitoring Sheet. (See 09.2241 AP.22.)
- Medication shall only be administered according to the health care provider's instructions on the prescription label. (A clear tape may be applied over label to maintain legibility of label.)
- Discrepancies that exist between the information on the Parent/Guardian Authorization Form and the prescription label should require one (1) of the following:
  - a. A new Authorization Form completed by the parent/guardian; or
  - b. A new prescription bottle or label issued by the pharmacy.
- Medications shall not be given beyond the date specified on the Authorization Form.
- Medication shall not be administered beyond the expiration date on the label.

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### **Student Medication Administration**

#### **A. ADMINISTRATION OF MEDICATION (CONTINUED)**

##### 5. Changes in Medication

The authorization to administer medication is only valid for the current school year or until treatment changes. A new Authorization for Medication Administration form must be obtained whenever there is a change to the medication, dosage, time and/or frequency and a new prescription bottle (or medication label if applicable) from the pharmacy indicating the prescription change.

Nurses may only accept medication orders as prescribed by a physician, physician's assistant, Advanced Practice Registered Nurse (APRN) or dentist. [KRS 314.011(6) (c)]

#### **B. STORAGE AND DISPOSAL OF MEDICATIONS**

- Except for emergency medications (including, but not limited to, FDA approved seizure rescue medications and EpiPens), and medications approved for students to carry for self-medication purposes, all medications should be kept in an appropriately labeled, secure, locked container or cabinet accessible only to the responsible authorized school personnel. Medications requiring refrigeration shall be kept in a separate refrigerator in a supervised area or locked container that can be stored with food in a supervised area. Temperature of that refrigerator will be checked on a daily basis and recorded according to agency policy. Temperatures should be maintained between 33 and 45 degrees Fahrenheit.
- For students receiving medication throughout the school year, it is recommended that no more than a month's supply of medication be stored on school property.
- When a medication is no longer needed, the school should notify the parent/guardian and request that it be picked up by the parent/guardian.
- For disposal of unused medication or expired medication that has not been picked up by parent/guardian:
  1. For pills: crush pills and combine with coffee grounds, soap, or glue in the pill container or plastic bag; bag or container may be thrown into garbage can.
  2. For liquids: pour cat litter, pencil shavings or sand into container and wait for it to set-up, after it becomes hardened, it may be thrown into garbage can.
  3. Disposal of medication must be documented on the student's medication record to verify it was destroyed, sign, date and have a witness also sign and date.
  4. Items such as inhaler canisters may be placed in a sharps container or disposed of according to the school district's Blood borne Pathogen OSHA plan.

#### **C. FIELD TRIPS AND MEDICATION ADMINISTRATION**

If a student is attending a field trip away from school during his/her scheduled medication time, school personnel trained annually in field trip medication administration will be designated to administer the medication while on the field trip.



**Student Medication Administration****C. FIELD TRIPS AND MEDICATION ADMINISTRATION (CONTINUED)**

Notification and preparation for administering medications during a field trip should begin well in advance of the day of the field trip. Student medication may not be repackaged for field trips by school personnel. The school should request the parent send a separate bottle with enough medication for the field trip day. The medication bottle should also have a pharmacy prescription label attached.

**Out of State Field Trips**

Each state's nursing laws are unique to that state and may not be the same as Kentucky's.

If a field trip crosses state lines, the field trip coordinator must notify their school nurse thirty (30) days in advance. The school nurse or school district health coordinator should contact the Board of Nursing of the state or states to be visited to verify whether unlicensed personnel are allowed to administer medications in that state or states. When unlicensed personnel are not allowed, the school District health coordinator will contract with a duly licensed nurse or medical provider to administer student medication.

**D. REFUSAL OF MEDICATIONS**

When circumstances arise that school personnel are unable to grant the request from a parent/legal guardian to administer medication to a student, the delegating school nurse or physician should be notified. Circumstances may include:

- Medication was sent to school out of the original container.
- Medication is prescribed twice daily and can be administered before school and after school hours.
- Medication is prescribed three times daily and can be given before school, after school and before bedtime.
- No written authorization on file.
- Other unusual circumstance.

It is a student's right to refuse medications. As best practice and according to the student's developmental level, the student should understand the symptoms for which the medications are prescribed, and also should know any common side effects. He/she should also be able to express understanding that these medications are considered a part of treatment and that the parent and/or prescriber will be notified should he/she refuse the medication.

Refusing medications is **NOT** considered a medication error, and should be documented on the Medication Administration Record as a "refusal of medication". This documents that the individual has been offered the medication as ordered. **When a student refuses medications, it should be immediately documented and the school nurse/parent is to be notified as soon as possible.**

student may	
not be able	
to verbalize	

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**Student Medication Administration****E. MEDICATION ERRORS - PREVENTING AND REPORTING MEDICATION ERRORS**

A medication error occurs when one of the “six rights of medication administration” has been violated. Examples of these would include:

- Administering wrong medication
- Administering wrong dose of medication
- Administering medication at the wrong time
- Administering the medication in the wrong route (e.g., ear drops administered to eye)
- Administering medication to wrong student
- Failing to document medication was given or inaccurate documentation of medicine given

Medication errors may result in adverse reactions to the student. These reactions could range from a rash to a life-threatening situation. Therefore, always check the medication label:

- When removing the medication from storage
- When removing the medication from its container
- When returning the medication to storage

Knowing the following before administering medications will help prevent medication errors:

- Name of medication (generic and trade)
- Purpose
- Potential side effects
- Special instructions (if appropriate)
- Health care provider and emergency contact names and phone numbers

When a medication administration error occurs, follow these guidelines:

- Keep the student in the health room. If the student has already returned to class, have someone accompany the student’s return to the health room.
- Observe the student’s status and document.
- Identify the incorrect dose or type of medication taken by the student.
- Immediately notify the principal and supervising school nurse (if medication was given by non-licensed personnel). The supervising nurse will contact the parents of the student and/or health care provider.
- If contacting the Poison Control Center for instructions:
  1. Give the name and dose of the medication taken in error.
  2. Give the student’s age and approximate weight, if possible.
  3. Give the name and dose of any other medication the student also receives, if possible.

**Student Medication Administration****E. MEDICATION ERRORS (CONTINUED)**

- Follow instructions from the Poison Control Center, if at all possible. If unable to follow their instructions, explain the problem to the Poison Control Center to determine if the student should be transported for emergency care.
- Complete a “Medication Administration Incident Report” form. (See 09.2241 AP.23) Carefully record all circumstances and actions taken, including instructions from the Poison Control Center or student’s health care provider/physician, and the student’s status. All Medication Incident reports are to be located in a Master File with the location to be determined by the school principal or designee.
- Errors made in recording medications on the Medication Administration Record should be marked with a single line drawn through the entry, initialed and dated. DO NOT USE WHITEOUT.

After medication is completed or discontinued, the Parent Authorization form and Medication Administration Record shall be filed in the student's cumulative folder.

DRAFT 8/13/15

STUDENTS

09.2241 AP.2

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**Medication Administration Forms**

**MEMORANDUM**

To: \_\_\_\_\_, Principal  
From: \_\_\_\_\_, School Nurse  
Date: \_\_\_\_\_  
Subject: MEDICATION ISSUES

On this date \_\_\_\_/\_\_\_\_/\_\_\_\_\_, I reviewed the medication logs for your school.

The following problems were noted:

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

The following recommendations were made:

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

When I returned and reviewed the records again on \_\_\_\_/\_\_\_\_/\_\_\_\_\_, the problems listed above were corrected:

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

I am willing to assist you in helping to assure that assigned staff are administering medication in a safe and appropriate manner in accordance with Board of Education Policy. Your support is essential in resolving this problem at the school level.

Thank you for taking care of this situation!

STUDENTS

09.2241 AP.2  
(CONTINUED)

**Medication Administration Forms**

**MEDICAL AUTHORIZATION FORM/TRAINING FOLLOW-UP**

**LIST OF PERSONS TRAINED TO ADMINISTER MEDS**

\_\_\_\_\_  
SCHOOL

\_\_\_\_\_

\_\_\_\_\_  
SCHOOL YEAR

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
PERSON DOING FOLLOW-UP

	PLACE (√) IN BOX TO SIGNIFY ACTION WAS COMPLETED									
NAME OF PERSON ADMINISTERING AND DATE										
INFORMATION AND PROCEDURE STEPS	Note in Box as Appropriate: Y=Yes N=No									
Identifies student										
Reads medication label										
Checks label with log sheet										
Avoids touching medicine										
Watches student swallow oral medicine										
Charts on log sheet and Quick Reference Sheet										
Signature and initials on Log Sheets										
Exceptions noted and charted appropriately										
Right time										
Medicine kept and returned to secure place										
Incident reports completed as needed										
<b>MED BOOK REVIEWED</b>										

STUDENTS

09.2241 AP.2  
(CONTINUED)

**Medication Administration Forms**

**Deleted: MEDICATION WAIVER FORM** \_\_\_\_\_ DATE \_\_\_\_\_  
SCHOOL \_\_\_\_\_ STUDENT NAME \_\_\_\_\_  
DOB: \_\_\_\_\_  
ALLERGIES: \_\_\_\_\_  
PRESCRIBED MEDICATION: \_\_\_\_\_  
Name of Medicine \_\_\_\_\_  
Dosage (amount) \_\_\_\_\_  
Route \_\_\_\_\_  
Frequency \_\_\_\_\_  
Time to be given at school \_\_\_\_\_  
METHOD: (PLEASE CHECK) \_\_\_\_\_  
 LIQUID \_\_\_\_\_  
 PILL (DESCRIPTION: \_\_\_\_\_)  
 CAPSULE (DESCRIPTION: \_\_\_\_\_)  
 OTHER \_\_\_\_\_  
Parents were notified of Medication Policy 09.2241 by telephone contact (\_\_\_\_) or by written notification (\_\_\_\_). (Please check one.) \_\_\_\_\_  
Parent/Guardian gave verbal (\_\_\_\_) or written (\_\_\_\_) authorization for the one-time dose of the above medication. (Please check one.) \_\_\_\_\_  
School Nurse's Signature \_\_\_\_\_ Time \_\_\_\_\_

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STUDENTS

09.2241 AP.21

**Medication Authorization and Consent Forms**

For student health services/procedures not involving medication only, please refer to 09.22 AP.22.

**MEDICAL AUTHORIZATION FORM  
HEALTH CARE PROVIDER ORDER AND PARENT/GUARDIAN AUTHORIZATION**

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(Please complete one form for each medication.)

Student's Name: \_\_\_\_\_ Medication \_\_\_\_\_  
Reason for medication or diagnosis: \_\_\_\_\_  
Allergies: \_\_\_\_\_  
Date of Birth: \_\_\_/\_\_\_/\_\_\_ School: \_\_\_\_\_ School Year: \_\_\_\_\_

In order for school personnel to administer any type of medication to the student, the Parent/Guardian must provide this signed authorization form. Medicine will be dispensed to the student by the School Nurse or by unlicensed school personnel trained and deemed competent by the School Nurse. The medicine must be sent to the school with complete instructions and in the original container with the Health Care Provider's Order OR pharmacy label firmly attached to the medication.

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Please be sure to complete ALL of the information on this authorization form before returning it to school.

**ANY OVER-THE-COUNTER MEDICATION  
REQUIRES A HEALTH CARE PROVIDER'S ORDER TO ACCOMPANY IT**

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Medication to be administered during the school day must be brought to the school by the Parent/Guardian. Parents/Guardians shall pick up unused medication within two (2) weeks following the last day of school or it shall be destroyed. This authorization is valid for one school year and must be renewed at the beginning of each new school year.

The first dose of any new medication should NOT be given at school.

\*\*\*\*\*

**PARENT/GUARDIAN STATEMENT**

I, the undersigned Parent/Guardian of \_\_\_\_\_ request that a trained staff member administer the above medication\* to my student per Health Care Provider instructions. I agree to furnish the necessary prescribed medication and agree to notify the School Nurse immediately of any changes. I understand the Fayette County Board of Education Medication Policies and Procedures (09.2241) are readily available for me to read. I sign this voluntarily and with full knowledge of its significance. I agree to pick up any unused medication within two (2) weeks following the last day of school, or it shall be destroyed.

Deleted: Physician

\*Parent/Child is responsible for keeping a sufficient supply of medication available at school.

X \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Parent/Guardian's Signature) Date

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ RN Date: \_\_\_\_\_

**Medication Authorization and Consent Forms**

**PHYSICIAN ORDER AND PARENT/GUARDIAN AUTHORIZATION  
FOR SELF-MEDICATION ADMINISTRATION**

(Please complete one form for each medication.)

Student's Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
 Allergies: \_\_\_\_\_  
 Medication: \_\_\_\_\_ Dosage: \_\_\_\_\_  
 Reason for medication or diagnosis: \_\_\_\_\_  
 School: \_\_\_\_\_ School Year: \_\_\_\_\_

In order for students to self-administer medication at school, the Parent/Guardian must provide this signed authorization form. Also, a Physician's Order (see box below) is required for students to self-administer medication. Please be sure to complete ALL of the information on this authorization form before returning it to school. This authorization is valid for one (1) school year and must be renewed at the beginning of each new school year.

\*It is recommended that only middle and high school students are allowed to carry and self-administer their own medication. For elementary age children, arrangements can be made to keep inhalers or emergency medications in the classroom. The student's teacher will provide monitoring for the child's safety.

**PHYSICIAN'S ORDER**

1. I have examined this student for (diagnosis): \_\_\_\_\_  
and have determined that he/she requires medication during school hours.  
 2. Name of Medication \_\_\_\_\_ 3. Dosage & Route: \_\_\_\_\_  
 4. I believe this student is able to carry and administer his or her own medication at the appropriate time and in the appropriate way. Please check:  
 YES  NO

Physician's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Printed Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**PARENT/GUARDIAN STATEMENT**

I, the undersigned Parent(s)/Guardian(s) of \_\_\_\_\_ give consent for\*\* my student to self-administer the above medication(s). I understand the Fayette County Board of Education Medication Policies and Procedures (09.2241) are readily available for me to read. I hereby agree to release and hold the school staff free and harmless for any claims, demands, or suits for damages from any injury or complication that may result from such treatment. I have read this consent and understand all its terms. **not provided by or monitored by the School Nurse or school staff. The School Nurse reserves the right to monitor student periodically during the school year.**

The School Nurse reserves the right to monitor student periodically during the school year.

**\*Parent/Student is responsible to have the medication available at school.**

X \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Parent/Guardian Signature) Date  
 Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Reviewed by: \_\_\_\_\_ RN Date: \_\_\_\_\_

ESTUDIANTES

**Orden Del Medico Y Autorizacion Del Padre/Madre/Tutor Para La  
Auto-Administracion**

(Por favor, complete un formulario por cada medicamento.)

P Nombre del Estudiante: \_\_\_\_\_ Fecha de Nacimiento: \_\_\_\_\_  
 Alergias: \_\_\_\_\_  
 Medicamentos: \_\_\_\_\_ Dosis: \_\_\_\_\_

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May have to monitor per 702 KAR 1:160 and/or KRS 158.838



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Con el fin de que los estudiantes puedan auto-administrarse la medicación en la escuela, el padre/madre/tutor deberá presentar esta formulario de autorización firmado. También, es necesaria la orden firmada del doctor (véase el recuadro de abajo) para que los estudiantes puedan auto-administrarse los medicamentos. Por favor, asegúrese de completar toda la información en este formulario antes de devolverlo a la escuela. Esta autorización es válida por un año escolar y debe ser renovada al comienzo de cada nuevo año escolar.

\* Se recomienda que sólo los alumnos de middle y high puedan auto-administrarse sus propios medicamentos. Para los estudiantes de elementary, pueden hacerse arreglos para mantener los inhaladores o los medicamentos de emergencia en el aula. El maestro/a del estudiante proporcionará un seguimiento para la seguridad del estudiante.

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PHYSICIAN'S ORDER

1. I have examined this student for (diagnosis): \_\_\_\_\_  
and have determined that he/she requires medication during school hours.
2. Name of Medication \_\_\_\_\_ 3. Dosage & Route: \_\_\_\_\_
4. I believe this student is able to carry and administer his or her own medication at the appropriate time and in the appropriate way. Please check:  
 YES  NO

Physician's Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Printed Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Declaracion Del Padre/Madre/Tutor**

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I, el abajo firmante padre o tutor del estudiante nombrado arriba dar su consentimiento que \*\*mi hijo pueda auto-administrarse la medicación. Entiendo que Fayette County Board de Educación Medicamentos Políticas y Procedimientos (09.2241) están disponibles para mí uso. Por la presente declaró que libero a todo el personal de la escuela libre e inofensivo de cualquier reclamo, exigencias o daños y perjuicios de cualquier lesión o complicación que pudieran derivarse de dicho tratamiento. He leído este consentimiento y comprendo todos sus términos y firmo voluntariamente y con pleno conocimiento de su importancia. Entiendo que los medicamentos auto-administrados no son proporcionados ni controlados por la enfermera de la escuela o por el personal de la escuela. **La enfermera de la escuela se reserva el derecho con los alumnos de revisar periódicamente durante el año escolar.**

\*Padre / madre / tutor / alumno es responsable de tener medicacion disponibles en la escuela.

X \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(Firma del Padre/Madre/Tutor) Fecha

Telefono de Casa: \_\_\_\_\_ Trabajo: \_\_\_\_\_ Telefono Celular: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ RN Date: \_\_\_\_\_

STUDENTS

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09.2241 AP.22

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### Medication Administration Records

#### DAILY LOG

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

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Name of Student: \_\_\_\_\_  
Allergies: \_\_\_\_\_  
Medication: \_\_\_\_\_  
Dosage: \_\_\_\_\_  
Route: \_\_\_\_\_ Time: \_\_\_\_\_  
Starting Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Ending Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Signature/Initials of Staff Administering Med  
\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_

**CODES**  
R = Refused\*    L = Late\*  
A = Absent        M = Missed\*  
F = Field Trip    O = Out of Meds\*

If less than five (5) pills are left in bottle, please send note home with student and document on back of this form.

If med is given 1/2 hour before or after scheduled time, it is considered late. Please document reason why on back of this form.

Date	Time	Initial	Code	Date	Time	Initial	Code	Date	Time	Initial	Code

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+ Possible Weather Make-Up Day  
A Medication Incident Report must be completed by the person administering medication.  
 \* Requires further documentation on back of form. If student has three (3) late, missed, or out of med occurrences within one (1) month (30 days) a Medication Incident Report must be completed by the person administering medication.  
 \*\* For End-of-Year Disposal of Medications, please see back of this form.

STUDENTS

09.2241 AP.22  
(CONTINUED)

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**Medication Administration Records**

**DAILY LOG-NOTES**

DATE	NOTES/OBSERVATIONS	STAFF SIGNATURE

**DISPOSAL OF MEDICATIONS**

Medications will be disposed of at the end of the prescription or at the end of year if Parent/Guardian does not pick up by designated date.  
The disposal will be witnessed by another school employee and then verified by signing below.

Date \_\_\_/\_\_\_/\_\_\_ and Time \_\_\_\_\_  am  pm - Parent/Guardian picked up pills.

Number of Pills Picked Up \_\_\_\_\_

Parent/Guardian Signature _____	Date: ___/___/___
Staff Signature _____	Date: ___/___/___

Number of Pills Destroyed \_\_\_\_\_

Staff Signature _____	Date: ___/___/___
Staff Signature _____	Date: ___/___/___

STUDENTS

09.2241 AP.22  
(CONTINUED)

**Medication Administration Records**

**PRN (AS NEEDED) MEDICATION ADMINISTRATION RECORD**

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

Name of Student: \_\_\_\_\_

Allergies: \_\_\_\_\_

Medication: \_\_\_\_\_

Dosage: \_\_\_\_\_

Route: \_\_\_\_\_ Time: \_\_\_\_\_

Starting Date: \_\_\_ / \_\_\_ / \_\_\_ Ending Date \_\_\_ / \_\_\_ / \_\_\_

Signature/Initials of Staff Administering Med

\_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_ / \_\_\_\_\_

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*If less than five (5) pills are left in bottle, or if inhaler is almost empty, please send note home with student and document on the bottom of this form.*

Date	Time	Dosage	Initials	Comments (i.e. Student Response, Parent/Guardian Contacted, etc.)

- For Disposal of Medications, please see back of this form.

STUDENTS

09.2241 AP.22  
(CONTINUED)

**Medication Administration Records**

**PRN (AS NEEDED) MEDICATION ADMINISTRATION RECORD (CONTINUED)**

*If less than five (5) pills are left in bottle, or if inhaler is almost empty,  
please send note home with student and document on the bottom of this form.*

Date	Time	Dosage	Initials	Comments

**DISPOSAL OF MEDICATIONS**

Medications will be disposed of at the end of the prescription or at the end of year if Parent/Guardian does not pick up by designated date.

The disposal will be witnessed by another school employee and then verified by signing below.

Date \_\_\_/\_\_\_/\_\_\_ and Time \_\_\_\_\_  am       pm - Parent/Guardian picked up pills.

Number of Pills Picked Up \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Staff Signature \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Number of Pills Destroyed \_\_\_\_\_

Staff Signature \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Staff Signature \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

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**Medication Administration Records**

**MEDICATION PICK-UP LETTER**

Dear Parent / Guardian:

In preparation for the closing of the school year, the school requests that all medications kept at the school for students, be picked up by the student's Parent/Guardian.

\*\*Most medications cannot be picked up by the student.

Please note that medications not picked up by the Parent/Guardian within one (1) week after the last day of school will be destroyed. Thank you for your attention to this matter.

If you have any questions, please call your student's school.

*(Signature of School Personnel)*

*(Date)*

\*\*Asthma Inhalers and Emergency Medication (Diastat, Epi-Pen and Glucagon) may be sent home with the student at the end of the school year with permission from their Parent/Guardian.

Please sign the following statement if you would like your student's Asthma Inhaler, Epi-Pen, Diastat or Glucagon sent home with your student at the end of the school year.

I, \_\_\_\_\_ give permission for \_\_\_\_\_

*(Parent/Guardian)*

*(Student's Name)*

to carry  Asthma Inhaler  Epi-Pen  Diastat  Glucagon

home from school at the end of the current school year. I assume responsibility after the medication is released to my student.

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**Medication Administration Records**

**CONTROLLED SUBSTANCE MEDICATION MONITORING SHEET**

Student Name: \_\_\_\_\_ Grade \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 School Name: \_\_\_\_\_ Teacher Name: \_\_\_\_\_  
 Allergies: \_\_\_\_\_ Medication: \_\_\_\_\_  
 Dose: \_\_\_\_\_ Time Scheduled: \_\_\_\_\_ Route: \_\_\_\_\_  
 Physician: \_\_\_\_\_ Phone \_\_\_\_\_ School RN: \_\_\_\_\_

**MEDICATION COUNT:**

Controlled medications must be counted when received.  
 Medications may be counted by parent/guardian and school staff member  
 or by two (2) staff members if parent/guardian is not available.

<b>MEDICATION &amp; DOSAGE</b>	
Signature of person Counting:	Witness Signature:
Date:	Description of Pill:
Number of Pills:	Comments:

<b>MEDICATION &amp; DOSAGE</b>	
Signature of person Counting:	Witness Signature:
Date:	Description of Pill:
Number of Pills:	Comments:

<b>MEDICATION &amp; DOSAGE</b>	
Signature of person Counting:	Witness Signature:
Date:	Description of Pill:
Number of Pills:	Comments:

<b>MEDICATION &amp; DOSAGE</b>	
Signature of person Counting:	Witness Signature:
Date:	Description of Pill:
Number of Pills:	Comments:

<b>MEDICATION &amp; DOSAGE</b>	
Signature of person Counting:	Witness Signature:
Date:	Description of Pill:
Number of Pills:	Comments:

Date Parent/Guardian contacted to pick up unused medicine: ____ / ____ / ____	
Date Parent/Guardian picked up medication: ____ / ____ / ____ # of Pills Picked Up: ____	
Signature of Parent/Guardian: _____	
Date Medication destroyed: ____ / ____ / ____	
Signature of staff: _____	# of Pills Destroyed: ____
Witness: _____	





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**Middle/High School Athletic Booster Club Agreement**

This Agreement is entered into by and between the Fayette County Board of Education (hereafter referred to as "Board") and an entity known as \_\_\_\_\_ (hereafter referred to as the "Booster Club"). Through this Agreement, the parties intend to set forth the Terms and Conditions under which the Booster Club may operate and associate with students, teachers, coaches and school administrators at \_\_\_\_\_ School.

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TERMS AND CONDITIONS

1. The Booster Club acknowledges that the Board is responsible for the promotion of education and the general health and welfare of all students attending the Fayette County Public Schools. In addition, the Booster Club acknowledges that the Board has control and management of all school funds and all public school property in its district and may use its funds and property to promote public education (KRS 160.290). All such fees charged to students and/or parents related to students must have prior approval by the Board and all funds related to these fees must be deposited into the school account not maintained by the Booster.

2. The Booster Club acknowledges that its activities may affect compliance with Title IX of the Educational Amendments of 1972 (Title 20, U.S.C. §§ 1681-1687, et seq.) by \_\_\_\_\_ School and the Board. Likewise, the Booster Club acknowledges that, as a condition of membership in the Kentucky High School Athletic Association, representatives of \_\_\_\_\_ School and the Board must verify that the school complies with Title IX (702 KAR 7:065, Section 2[13]). Accordingly, the Booster Club agrees to provide all information requested by \_\_\_\_\_ School, the Board, or the Kentucky High School Athletic Association for purposes of determining Title IX compliance. The Booster Club further agrees to refrain from engaging in any activity which, in the opinion of the Principal or athletic director of \_\_\_\_\_ School, District Athletic Director or the Superintendent of the Fayette County Public Schools, adversely affect the school's or the Board's ability to comply with Title IX.

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3. The Booster Club shall, on or before September 15 of each year, designate a representative for purposes of communicating with and providing true and accurate information to the Board and \_\_\_\_\_ School.

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4. Upon request of the Principal or athletic director of \_\_\_\_\_ School, District Athletic Director or upon request of the Superintendent of the Fayette County Public Schools, the Booster Club shall make available a full and complete list of its members.

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5. In addition to complying with the requirements of Title 702 of the Kentucky Administrative Regulations, Chapter 3:130 (internal accounting), and all other relevant statutes and regulations, the Booster Club shall, upon the request of the Principal or athletic director of \_\_\_\_\_ School, or upon the request of the Superintendent of the Fayette County Public Schools, provide a full and complete accounting of all moneys raised, as well as a full and complete accounting of all moneys expended. In addition, if requested to do so, the Booster Club shall also provide financial records, certified by the Booster Club president as true and accurate, concerning its activities.

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STUDENTS

09.33 AP.2  
(CONTINUED)

**Middle/High School Athletic Booster Club Agreement**

6. On or before September 15 of each year, the Booster Club shall advise the Principal and athletic director (if applicable) of \_\_\_\_\_ School of all fund raising activities planned for the upcoming year. To the extent the Booster Club seeks to engage in additional fund raising activities, it shall give at least \_\_\_\_\_ days notice of the intended activity.

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7. The Principal and athletic director of \_\_\_\_\_ School and the District Athletic Director and Superintendent of the Fayette County Public Schools expressly reserve the right to reject any fund raising activity for any reason. The Booster Club agrees that it shall not engage in any fund raising activity which has not been approved or which has been rejected by the Principal or athletic director of \_\_\_\_\_ School or the Superintendent of the Fayette County Public Schools.

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8. By executing this document through its designated representative, all members, officers and representatives of the Booster Club agree to abide by the terms and conditions set forth below as well as those additional terms and conditions which may be required by the Board. The designated representative of the Booster Club represents and agrees that he/she will provide a copy of this Agreement to all members of the Booster Club.

\*\* \*\* \* \*\* \*

I hereby acknowledge that I am a representative of the \_\_\_\_\_ Booster Club and that I am authorized to act on its behalf. I further agree that this Booster Club and its members shall abide by the Terms and Conditions set forth above. I further agree to immediately report to the Principal and athletic director (if applicable) of \_\_\_\_\_ School and to the Superintendent of the Fayette County Public Schools any violation or breach of this agreement.

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\_\_\_\_\_  
(Name of Booster Club)

BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

STATE OF KENTUCKY  
COUNTY OF FAYETTE

Subscribed and sworn to before me on this the \_\_\_\_ day of \_\_\_\_\_, 200\_\_, by \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

My commission expires: \_\_\_\_\_

**School-Related Student Trips**

**INSTRUCTIONAL FIELD TRIPS DEFINED**

All trips away from the school building/campus shall be considered instructional if:

- 1. There is a direct relationship to the Kentucky Academic Standards, **AND**
- 2. There is a direct relationship to a class that the students are taking. All trips that do not meet both criteria are considered non-instructional.

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Instructional field trips shall not be used as rewards for academic or social behavior as they are an integral part of the instructional program.

**GENERAL PROCEDURES**

- 1. Educational field trips and tours shall be considered a part of the school curriculum, and shall have the same status as classroom activities. However, the only student trips to be taken during the school day are those that can be justified educationally.
- 2. The faculty member in charge of a school-sponsored trip and the Principal shall be responsible for reporting to the appropriate homeroom or classroom teacher any student who is absent.
- 3. All students shall be eligible to attend all instructional field trips unless they are suspended from school on the day(s) of the trip or assigned to SAFE (Suspension and Failure Eliminated) on the day(s) of the trip.
- 4. The length of any instructional field trip shall not exceed three (3) consecutive school days.
- 5. Using the transportation request process communicated by the transportation office, the Principal or designee will request buses for the trip based on availability and at least two (2) weeks prior to date of trip.
- 6. School organizations must notify the Superintendent or designee before accepting invitations to represent the school system in state, national or international events or contests. All notifications shall be made in writing by the Principal as far in advance of the date of the trip as possible.

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**EXTENDED TRIP PROCEDURES**

The following additional requirements shall apply for extended trips (including international trips):

- 1. All instructional and school-related field trips must be reviewed by the School Based Decision Making (SBDM) Council reflected as SBDM council agenda item and recorded in SBDM council minutes.
- 2. Trips shall be directly related to the instructional program and have educational value to students. Clubs and groups shall be permitted to participate in non-instructional attractions, i.e., amusement parks, as long as these attractions are in the vicinity of the trip site, adds no additional time out of school to the trip, and if the group attends on non-school days. However, no District-sponsored groups shall be permitted to attend "Senior Nights" at amusement parks.

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**School-Related Student Trips****EXTENDED TRIP PROCEDURES (CONTINUED)**

3. Groups and classes shall be limited to using no more than five (5) school days per semester for extended field trips.
4. Sponsors and the Principal shall make arrangements to assist students financially that are eligible for the trip, but cannot afford to pay.
5. Sponsors and the Principal shall complete the EXTENDED FIELD TRIP REQUEST (See 09.36 AP.21.); provide a list of participating students and chaperones; and furnish a trip itinerary and information concerning financial arrangements, as well as other plans for the trip. This form shall be forwarded to the School Director in time to be placed on an agenda of the Fayette County Board of Education prior to the planned trip date.
6. Prior to submitting the completed EXTENDED FIELD TRIP REQUEST to the School Director, the Principal or designee of the school group requesting the use of school buses shall contact the Division of Transportation concerning the availability of such buses.
7. Contracts for related services (transportation, lodging, etc.) for extended field trips will be processed after approval of the trip by the Board.
8. With the exception of the Cincinnati, Ohio area, Fayette County school buses shall not be used for out-of-state or international trips. [Board approval is required for Cincinnati area trips.](#)
9. It is strongly recommended that instructional field trips include weekends to avoid loss of instructional time in other classes. It is strongly recommended that all non-instructional field trips take place at times other than the regular instructional day. Appropriate times for these trips would include after school hours, weekends and winter and summer breaks.
10. [Medication forms and permission slips are due in at least one \(1\) week prior so that the school nurse may arrange care during the trip.](#)
11. Generally, a 10 - 1 student-chaperone ratio is recommended for most field trips. Exceptions would include large performance events, athletic competitions, etc. The appropriate School Director will approve the appropriate level of supervision.  
An 8-1 student-chaperone ratio is required for the following:
  - Trips to large cities ([population of more than 1,000,000](#)) or international destinations.
  - Trips that will involve students walking more than a block on [large](#) city streets.
  - Other situations that warrant strict supervision as determined by the Principal and approved by the appropriate School Director.

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 <#>The EXTENDED FIELD TRIP REPORT (09.36 AP.23) shall be submitted to the School Director according to the following schedule:¶  
 <#>By September 15<sup>th</sup> for all 1<sup>st</sup> Semester trips¶  
 <#>By December 1<sup>st</sup> for all 2<sup>nd</sup> Semester trips¶  
 <#>Amendments to extended trip plans for the year must be made to the appropriate School Director prior to winter break.¶  
 The above scheduling requirements do not prohibit schools from submitting extended field trip plans for the entire year by September 15<sup>th</sup>.¶

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**School-Related Student Trips****SUPERVISING TEACHERS AND/OR STAFF MEMBERS**

- Will provide the Principal, bus driver, and school nurse, if applicable, ridership information including names and emergency contact numbers for all individuals participating in the trip (bus manifest).
- Will have in their possession completed medical forms for each student participating in the trip.
- Will plan the trip itinerary to include as little unstructured time as possible.
- Will emphasize to students that the trip is a school activity and that all District and school policies, procedures and rules will apply to student behavior on the trip. (Supervising teachers may limit specific items of personal property that students may bring with them on trips and may confiscate personal property on trips as needed to avoid disruptive or unsafe situations.)
- Will meet with adult chaperones prior to the trip to discuss the trip itinerary, assignment of students to chaperones (including individual medical and/or other student issues) and expectations for adult supervision of students.
- Will make all parents and other chaperones aware that any student behavior issues that cannot be immediately resolved on the trip may result in the student being sent home with a chaperone and subject student to school and/or District disciplinary action. Arrangements will be made with family regarding student and chaperone travel costs at family expense (if applicable). The process for this situation will be reviewed with families.
- Shall serve in role of parent (in loco parentis) for the participating students and shall be responsible for monitoring the behavior of both students and other chaperones at all times and cannot relinquish responsibilities for the students to anyone other than a supervising teacher, staff member, or designated chaperone.

**OTHER ADULT CHAPERONES**

- Must be approved by the Principal.
- Shall undergo orientation by staff sponsor prior to serving as a chaperone.
- Shall read and sign the Adult/Sponsor Chaperone Acknowledgement Form.
- Must successfully complete the FCPS volunteer application process which includes a criminal background check to be eligible to participate in the trip. [This includes FCPS staff volunteering for trips at schools other than their school site of employment.](#)
- Must agree to supervise students in accordance with instructions provided by the supervising teacher.
- Shall be responsible for students at all times on the trip and shall not use alcohol, tobacco, or illegal drugs while chaperoning. Chaperones in violation of school District expectations may be removed from the trip and may be required to make and pay for arrangements to travel home.

**School-Related Student Trips**

**OTHER NOTES**

- Chaperones cannot relinquish responsibility at any time during the field trip to anyone other than a supervising teacher, staff member, or designated chaperone.
- When traveling, chaperones are to be seated throughout the bus, providing adequate coverage in the front, middle, and back of the bus. Late evening and overnight bus rides require separation of students by gender (front/back, side/side or separate buses for large groups).
- When students of both genders participate in the trip, they must be accompanied by chaperones of both genders.
- Children of chaperones who are not otherwise members of the group of students participating in the trip may not be permitted to accompany their parents on the trip.
- All students transported via District/school sponsored trips must be transported back to the original departure location using the same District/school vehicles used to transport the students unless prior written approval is obtained.

**Deleted:** <#>Adults who voluntarily contribute their time to serve as chaperones on field trips shall be under the direct supervision of school personnel assigned to the activity. Chaperones are expected to act as reasonably prudent adults in providing for the safety of students.¶

**GUIDELINES FOR OVERNIGHT TRIPS**

- Trip coordinators must communicate room assignments with parents and chaperones prior to the trip.
- Chaperones shall stay on the same floor as the students. Field trip participants shall be lodged as a group with specified supervisors and chaperones.
- Specific supervision schedule and security procedures must be written and communicated to the group for the trip.

**Deleted:** <#>No school-designated chaperone shall share overnight lodging with students on overnight field trips unless approved by the school director prior to the trip.¶

**FINANCING TRIPS**

If student participation is mandatory and failure to participate may affect the student's grade, students shall not be assessed for transportation or admission expenses for required trips. The school shall finance these trips from the fee replacement account or other school activity funds, except that students may be requested to pay the cost of their own food and lodging, if any.

Board-furnished replacement fees shall not be used for the cost of food or lodging.

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**School-Related Student Trips****CULTURAL ENRICHMENT/COCURRICULAR TRIPS**

Students may be assessed for transportation and admission costs for cultural enrichment or cocurricular trips, under the following conditions:

1. Participation is voluntary and is not necessary to fulfill the requirements of any course of study;
2. The activity is of a type authorized by the Board of Education;
3. The sponsor and/or Principal has arranged to pay such charges for those students who could not otherwise participate;
4. The program or trip is for other than an athletic activity; and
5. Students who are unable to pay fees are permitted to participate, with charges to be covered through other means.

Trips for which students are assessed a charge shall be approved in advance by the [Principal](#),

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**USE OF PRIVATE VEHICLES**

Transportation of students by private vehicles shall be allowed only for those for school-sponsored trips when use of a school bus or commercial transportation is not feasible.

Sponsors shall give parents written notice of the plan to transport students in private vehicles, and that students will not be covered by liability insurance purchased by the Board.

When private vehicles are to be used to transport student athletes, their parents shall be notified in writing prior to the first scheduled event. One (1) signed and dated copy of this notification shall be for the parents; one (1) copy must be returned to the coach who shall be responsible for appropriate filing.

Sponsors shall give written notice to drivers and owners of private vehicles used to transport students that they are assuming vehicle liability for the transportation of all passengers and provide proof of insurance coverage consistent with the minimum coverage required by law.

**REFERENCES:**

KRS 160.340  
702 KAR 3:130

**RELATED PROCEDURES:**

09.36 AP.21, 09.36 AP.211, 09.36 AP.23

STUDENTS

### Parent/Guardian Permission Form for Field Trips

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

I, the undersigned Parent/Guardian of the student named below, understand the nature of the Field Trip

being planned to: \_\_\_\_\_ By: \_\_\_\_\_  
(Location of Field Trip) (Mode of Transportation)

I am in accord with the purposes of and procedures governing the Field Trip. I hereby grant permission for my student to participate. I understand that adequate and appropriate supervision will be provided. I recognize, however, that unanticipated situations and problems can arise on any trip, school-sponsored or otherwise, which situations or problems are not reasonably within the control of the supervising teacher(s) or staff (including volunteers). I further agree to release and hold harmless the Fayette County School District Board of Education, their agents, officers, employees, and volunteers, from any and all liability, claims, suits, demands, judgments, costs, interest and expense (including attorneys' fees and costs) arising from such activities, including any accident or injury to my student and the costs of medical services.

In the event of an injury requiring medical attention, I hereby grant permission to the supervising teacher(s) or staff (including volunteers) to attend to my student. If the injury warrants further medical attention, I expect every effort will be made to contact me to receive my specific authorization before action is taken. If efforts to contact me are unsuccessful, I grant permission for necessary medical treatment to be given. In addition, I hereby give my permission to the supervising teacher(s) or staff (including volunteers) to take my student to the Physician, Dentist, or to the hospital if an accident or serious illness occurs on the trip and I cannot be located.

In the event that my student must return to school independently for reasons of health, accident, failure to conform to rules established by the teacher in charge, etc. I agree to accept full responsibility for and to pay for the cost of medical care, transportation and other incidental expenses. This permission slip also serves as a contract that the student and parent/guardian understand and agree to the guidelines from each teacher as to making up missed assignments.

**Please check below IF your student has allergy or sensitivity that needs to be accommodated on this trip;**

Bee Sting  Nuts  Dairy  Latex  Other \_\_\_\_\_

**Please check below IF your student has:**

Asthma  Diabetes  Seizure Disorder  Heart Condition  Other: \_\_\_\_\_

**Medications need to be administered during the trip:**  Yes \*\*  No

**\*\*If my student requires medication,** I understand that I am obligated to ensure that the medication and the Medication Authorization Form are on file prior to the trip and I will supply the medication in the original container on the day of the trip. For a student to self-administer any medication (prescription or non-prescription) the Self-Administration Form must be completed by their parent/guardian and Physician. Please note, school staff is not responsible for self-administered medications.

Student's Name: \_\_\_\_\_ Parent/Guardian: \_\_\_\_\_  
(Please Print) (Please Print)

Signature of Parent/Guardian: X \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Emergency Contact: (If unable to reach the above): \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Policyholder: \_\_\_\_\_ Policy #: \_\_\_\_\_ Group #: \_\_\_\_\_

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**Trip Permission Slips**

**Deleted:** Although there is **NO** blanket permission slip for student trips, when scheduling trips that will take students off the school grounds, there must be specific permission granted by the parent/guardian, and it must be in writing, signed, and dated by the parent/guardian.¶

At a **minimum** written permission must include the following:¶

<#>Nature of the trip¶

<#>When the trip is to be taken – date and approximate departure and return times¶

<#>The destination of the trip – facility, city, etc.¶

<#>Type of transportation (e.g., school bus, private carrier, private vehicles, etc.)¶

<#>Contact information, and¶

<#>Procedures that will be followed in the event of an emergency.¶

There should be **no** deviations without the parent/guardian's agreement. For example, a trip is planned for students to go to Raven's Run, and on the day of the trip (or perhaps in the middle of the trip) circumstances change and make going to Raven's Run impossible (i.e., bad storm). The students cannot simply be taken "someplace else" unless contact is made with each parent/guardian. The best approach would be to cancel the trip or return the students to the school.¶

**TRANSPORTATION**¶

Parents may use the prescribed form to provide written permission for the District to transport their child for designated extra-curricular activities.¶

<http://www.fcps.net/media/10240/transportation.pdf> ¶

EXPLANATION: SCHOOL OFFICIALS SHALL FOLLOW DIRECTIONS PROVIDED BY THE INVESTIGATING OFFICER OR CABINET FOR HEALTH AND FAMILY SERVICES AS TO WHETHER TO CONTACT A PARENT REGARDLESS OF WHOM THE ALLEGED PERPETRATOR IS.  
FINANCIAL IMPLICATIONS: NONE ANTICIPATED

STUDENTS

09.4361 AP.21

**Student Arrests and Reports of Violations**

*This form shall be kept in the designated office, and a duplicate copy shall be forwarded to IAKSS.*

Student's Name _____ <i>Last Name</i> <i>First Name</i> <i>Middle Initial</i>
Student's Address _____ <i>City</i> <i>State</i> <i>ZIP Code</i>
Student's Age _____ Date of Birth _____ Student's Phone Number _____
School _____ Grade _____ Teacher/Classroom _____ Date of Arrest _____

LAW ENFORCEMENT AGENCY: (Check one)

- FCPS Law Enforcement                       Lexington/Fayette County Police
- Kentucky State Police                       Other: \_\_\_\_\_

ARRESTING OFFICER: \_\_\_\_\_

NATURE OF THE OFFENSE CHARGED: \_\_\_\_\_

ISSUING AUTHORITY OF ARREST WARRANT: \_\_\_\_\_

PLACE OF CUSTODY: \_\_\_\_\_

PARENTS NOTIFIED BY: \_\_\_\_\_ at: \_\_\_\_\_ on \_\_\_\_\_  
*Employee*                      *Time*                      *Date*

NOTE: If a student is an alleged victim of abuse or neglect, school officials shall follow directions provided by the investigating officer or Cabinet for [Health and Family Services](#) representative as to whether to contact a parent.

PARENT/GUARDIAN NOTIFIED: \_\_\_\_\_

\_\_\_\_\_  
*Principal/Designee's Signature*

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

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STUDENTS

09.4361 AP.21  
(CONTINUED)

**FAYETTE COUNTY BOARD OF EDUCATION  
REPORT OF A KRS CHAPTER 508 FELONY  
(FOR INTERNAL ADMINISTRATIVE TRACKING PURPOSES ONLY)**

School and Board of Education employees should report violations by students committed against other students to the Principal of the alleged victim. If the violation rises to the level of felony under KRS Chapter 508, the Principal shall cause the matter to be investigated, contact the parents within 48 hours of the initial report and complete and send this form to the Director of Law Enforcement and the school Directors at 701 E. Main Street, Lexington, KY 40502.

**STUDENT REPORTED FOR VIOLATION** \_\_\_\_\_  
*Last Name First Name Middle Initial*  
**BIRTHDATE** \_\_\_\_\_ **AGE** \_\_\_\_\_ **SCHOOL** \_\_\_\_\_ **GRADE** \_\_\_\_\_  
**PARENT/GUARDIAN** \_\_\_\_\_  
*Last Name First Name Middle Initial*  
**PARENT/GUARDIAN ADDRESS** \_\_\_\_\_  
**PARENT/GUARDIAN PHONE: WORK** \_\_\_\_\_ **HOME** \_\_\_\_\_ **CELL** \_\_\_\_\_

**GENERAL NATURE OF THE ALLEGED VIOLATION** \_\_\_\_\_

- CHECK SPECIFIC VIOLATION OF KRS CHAPTER 508:**
- 1<sup>ST</sup> DEGREE STALKING
  - 1<sup>ST</sup> DEGREE ASSAULT
  - 1<sup>ST</sup> DEGREE TERRORISTIC THREATENING
  - 1<sup>ST</sup> DEGREE CRIMINAL ABUSE
  - 1<sup>ST</sup> DEGREE WANTON ENDANGERMENT
  - 2<sup>ND</sup> DEGREE ASSAULT
  - 2<sup>ND</sup> DEGREE TERRORISTIC THREATENING
  - 2<sup>ND</sup> DEGREE CRIMINAL ABUSE
  - ASSAULT/UNDER EXTREME EMOTIONAL DISTURBANCE

**ALLEGED VICTIM** \_\_\_\_\_  
*Last Name First Name Middle Initial*  
**BIRTHDATE** \_\_\_\_\_ **AGE** \_\_\_\_\_ **SCHOOL** \_\_\_\_\_ **GRADE** \_\_\_\_\_  
**PARENT/GUARDIAN** \_\_\_\_\_  
*Last Name First Name Middle Initial*  
**PARENT/GUARDIAN ADDRESS** \_\_\_\_\_  
**PARENT/GUARDIAN PHONE: WORK** \_\_\_\_\_ **HOME** \_\_\_\_\_ **CELL** \_\_\_\_\_  
**PARENT CONTACTED BY** \_\_\_\_\_  
*Principal Date Time Method of Contact (email/phone/in person)*

On the date below and by copy of this report, I reported the above incident to the Fayette County Board of Education:

- Fayette County Public Schools Director of Law Enforcement; and
- School Director (Superintendent designee) \_\_\_\_\_, who shall report it to the Board, if required by KRS 158.156.

\_\_\_\_\_  
*Signature of Reporting Principal* \_\_\_\_\_  
*Date*

EXPLANATION: SB 228 AMENDED KRS 158.148 TO REQUIRE THE STUDENT DISCIPLINE CODE TO SPECIFICALLY PROHIBIT BULLYING.  
FINANCIAL IMPLICATIONS: REPRINTING DISTRICT CODE OF ACCEPTABLE BEHAVIOR AND DISCIPLINE

STUDENTS

09.438 AP.1

### **Reporting of Code Violations**

Students wishing to report bullying or other violation of the Code of Acceptable Behavior and Discipline may report it to a classroom teacher, who shall take appropriate action as defined by the code. The teacher shall refer the report to the Principal/designee for further action when the report involves an offense that may warrant suspension or expulsion of a student, any felony offense, or a report that may be required by law, including reports to law enforcement.

#### **RETALIATION PROHIBITED**

Employees and other students shall not retaliate against a student because s/he reports bullying or other violation of the code or assists or participates in any investigation, proceeding, or hearing regarding the violation. The Superintendent/designee shall take measures needed to protect students from such retaliation.

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EXPLANATION: SB 228 AMENDED KRS 158.148 TO REQUIRE THE STUDENT DISCIPLINE CODE TO SPECIFICALLY PROHIBIT BULLYING.  
FINANCIAL IMPLICATIONS: REPRINTING DISTRICT CODE OF ACCEPTABLE BEHAVIOR AND DISCIPLINE

STUDENTS

09.438 AP.21

**Parent Notification of Code Violation**

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

Dear parent/guardian,

On \_\_\_\_\_, your child, \_\_\_\_\_  
*Date* *Student's Name*

was involved in a serious incident, which took place at \_\_\_\_\_.  
*Location*

At this time, the following information has been reported to me concerning the incident:

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

Because student safety is our utmost concern, we take this information very seriously and have taken appropriate action.

Please contact me directly if you have questions about this information. I can be reached at \_\_\_\_\_.  
*Telephone Number*

Sincerely,

\_\_\_\_\_, Principal

**RETALIATION PROHIBITED**

Employees and other students shall not retaliate against a student because s/he reports **bullying or other** violation of the code or assists or participates in any investigation, proceeding, or hearing regarding the violation. The Superintendent/designee shall take measures needed to protect students from such retaliation.

**FOR SCHOOL USE ONLY**

If the code violation falls under the state definition of bullying, District Procedure 09.422 AP.21 must be completed.

If the code violation falls under the state definition of bullying and must also be reported under KRS 158.154, KRS 158.155, or KRS 158.156, see Policies 09.2211 and 09.438 and related procedures.

If bullying is related to a federally protected harassment/discrimination area, see Policy 09.42811 and related procedures.

DRAFT 6/23/16, REVISED 6/30/16

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**Communication about Crises and Critical Incidents**

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**ANNUAL REVIEW**

At the beginning of each school year, Principals shall review Policy 10.12 and this procedure AP.1 with teachers and staff. Personnel shall be informed about general guidelines that will be invoked by the School Crisis Team in the event of a crisis.

**VERIFICATION AND PROTECTION OF PRIVACY**

The Principal is responsible for personally verifying pertinent facts before disseminating any information to ~~staff, students and families~~. In situations which involve students, it will be the Principal's or designee's responsibility to use discretion in releasing information so that the privacy of students' families will be protected.

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**PROCESS TO FOLLOW**

When an emergency situation is brought to the attention of the Principal/designee, s/he should take steps to safeguard students, staff and the campus in accordance with the school's Emergency Management Guide.

**Deleted:** When a potential crisis is brought to his attention, the Principal or designee shall proceed as follows:¶  
<#>If a student or staff member brings such information to the attention of the Principal, direct the student or staff member not to repeat this information to anyone.¶  
<#>Explain to the student or staff member that the information has not been verified.¶  
<#>Stress to the student or staff member the importance of having the announcement made by the Principal or designee in an appropriate and official manner.¶  
<#>It is important to recognize that only the Coroner may release the name of a deceased person.¶  
<#>Instruct office personnel not to repeat or give out any information until the report has been verified. The following type of statement should be included in announcements made to the staff and student body:¶  
"I need your help. We must ensure that any information given out is correct."¶  
If the health or safety of students or staff is involved, the following statement may also be included:¶  
"We must protect the privacy of the family. Our first concern must be to do nothing that will be disturbing to them."¶

**Communication about Crises and Critical Incidents**

**CRITICAL INCIDENT REPORT**

Following the occurrence of a critical incident, administrators shall complete and forward a report using the form located on the District web site:

<https://my.fcps.net/forms>

**Deleted:** Handling of

**Deleted:** If the crisis involves the possibility of a suicide, the word "suicide" should not be used in any conversation.¶  
If a death was due to suicide, the Principal shall maintain close communication with the It's About Kids Support Services spokesperson, and proceed as follows:¶  
<#>Notify the Superintendent or the Superintendent's designee immediately of the suicide or potential suicide.¶  
<#>After verifying the facts of the case with the police, coroner or other appropriate officials, prepare a formal statement to be disseminated to staff and the public, in conjunction with the Office of Communications/Community Relations. Do not refer to the death as a "suicide."¶  
<#>Direct all media representatives to the Office of Communications/Community Relations, It's About Kids Support Services, and assure that media representatives are not allowed to interview any student or staff member in the school or on school grounds.¶  
<#>Invoke the prepared crisis plan as follows:¶  
<#>Assemble the School Crisis Team, composed of the Principal, counselor(s), teacher(s), secretary, custodian, Comprehensive Care representative, and a member of the Ministerial Association.¶  
<#>In addition to dealing with each crisis, this team should meet at least once each semester to review and rehearse procedures and guidelines.¶  
<#>Hold a meeting of the faculty as soon as possible. If this meeting cannot be held until the end of the day, give early notice;¶  
<#>Disseminate the prepared formal statement to the faculty. Read the prepared statement over the public address system or request that teachers read the statement simultaneously to students throughout the school.¶  
<#>Direct teachers and counselors to seek out those students who are close friends of persons who are involved in the crisis situation. Families of these close friends should be contacted and encouraged to maintain close contact with and supervision of their children during the next few days.¶  
Students should be provided with the opportunity to express concerns, confusion and grief in a safe, supportive environment and encouraged to join a counseling group.¶

EXPLANATION: THIS RECOMMENDATION DIRECTS SCHOOL STAFF THAT OUTSIDE SERVICE PROVIDERS ARE ALLOWED INTO THE SCHOOLS ONLY TO PROVIDE THERAPY OR DESIGNATED SERVICES TO STUDENTS IF THE OUTSIDE SERVICE PROVIDER HAS BEEN SOUGHT OUT AND CONTRACTED BY THE SCHOOL DISTRICT FOR SERVICES. OUTSIDE SERVICE PROVIDERS NOT SOUGHT OUT AND CONTRACTED BY THE DISTRICT WHO MEET SPECIFIED REQUIREMENTS MAY BE ALLOWED INTO SCHOOLS FOR OBSERVATION ONLY.  
FINANCIAL IMPLICATIONS: NONE ANTICIPATED

COMMUNITY RELATIONS

10.5 AP.1

### **Visitors to the Schools**

#### **CLASSROOM VISITATION**

Requests for classroom observation by parents, educators, or other local citizens with legitimate educational interests pertaining to the District's public school program shall be made to the Principal with reasonable notification. The Principal may grant the request if:

1. The teacher involved is notified in advance of the arrangement.
2. The number in the group is small enough to be accommodated in the classroom without interfering with the class.
3. The frequency of the visits does not interfere with the scheduled instructional program in the classroom.

#### **LUNCH WITH FAMILY MEMBER**

Parents, guardians, grandparents, or other immediate family members as approved by the Principal/designee may request to have lunch with their student.

#### **SPECIAL INVITATION**

A special invitation for parents and other interested persons to visit the schools may be extended during appropriate school programs or activities and special occasions.

#### **OBSERVATION BY OUTSIDE AGENCIES**

These procedures are established for the purposes of observation only.

NOTE: Unless an outside provider has been sought out and contracted for a needed service by the District, no private therapy or service shall be provided to a student during the school day, within a District School.

The following information/documentation is required by the District before a private, outside therapist/service provider can observe its private client within a District School. Information must be sent to the Director of Special Education (special education students) or to the Director of Health and Family Resource Youth Service Center (FRYSC) Services (regular education students):

- Background check clearance on file with District Schools Central Office;
- Individual liability insurance certificate or worker's compensation insurance certificate;
- A copy of credentials in the form of certification/license for the purpose of the observation; and
- A signed release (form can be requested from the school) by the parent/guardian noting that the therapist/outside service provider has been given permission to observe their child during the school day.



**Visitors to the Schools**

**OBSERVATION BY OUTSIDE AGENCIES (CONTINUED)**

Once this information is received, the therapist/service provider may be allowed to come and observe the identified student as follows:

- At a time/day designated and assigned by the Principal/designee (to cause as little disruption to the class or school/learning environment as possible);
- The therapist is to observe only during these designated times, in an education setting (or activity such as lunch or social gathering) and only if confidentiality of other students/parents and disruption of the educational process in these settings can be adequately addressed by the Principal/designee;
- At any time the school or District needs to cancel an appointment or not allow an outside agency/therapist/service provider to return to the school setting, the outside agency will be notified; and
- The outside service providers MUST provide a photo I.D. as well as sign in and out at the school office any time they are on school property during a school day.

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**USE OF TOBACCO**

**Definitions:**

*Athletic and Other Events* - Any activity on school premises endorsed or approved by the building Principal which occurs after the regular school day for staff. Prior to all events the public will be reminded that the campus is tobacco-free via the public address system.

*Principal* - The person assigned the responsibility for the building.

*School Premises* - Property used or owned by the Board of Education, not to include residences on school property.

**Designation of Tobacco Use Areas:**

As authorized by KRS 438.050, the Principal shall designate appropriate outside tobacco use areas for those persons attending athletic and other school events after the school day. These areas shall be the same for all activities and shall be approved by the appropriate School Level Director.

Signage denoting the District's tobacco-free status shall be posted on all exterior doors and in other places designated by the Principal. Additionally, signage denoting tobacco use areas for athletic and other school events shall be posted in the designated place(s).

Consequences for visitors who violate Policy 10.5 and this procedure are:

1st Violation - Verbal warning; if use continues at the same event or function, then the violator will be asked to leave school property.

2nd Violation - Written notification of policy

3rd Violation - Written notification of denial of access to school property

Overt, intentional violations shall be reported to the Fayette County Health Department.

**Request for Activity/Program Accommodation**

**TO BE COMPLETED BY REQUESTING INDIVIDUAL**

\_\_\_\_\_  
*Print Full Name (first, middle initial, last)*

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

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*eMail Address*

I am a  student  employee  visitor

If you marked "student," does this request also apply to programs provided within the academic school day?  Yes  No

I request the following accommodation(s):

Effective communication Type requested: \_\_\_\_\_

\_\_\_\_\_  
*Activity*

\_\_\_\_\_  
*Location*

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

Event ticket sales/accessible seating

\_\_\_\_\_  
*Activity*

\_\_\_\_\_  
*Location*

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

Companion seating requested

\_\_\_\_\_  
*Activity*

\_\_\_\_\_  
*Location*

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

Use of power driven mobility device

\_\_\_\_\_  
*Activity*

\_\_\_\_\_  
*Location*

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

Use of service animal\* Check one:  Service dog  Miniature horse

\_\_\_\_\_  
*Activity*

\_\_\_\_\_  
*Location*

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

\*For animals accompanying students on the bus, during school, and/or on school trips, proof of vaccination(s) is required per KRS 258.015.

\_\_\_\_\_  
*Signature*

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

**Please attach other information explaining the reason for this request, and submit this form to the school/Central Office as soon as possible and, except for service dogs, at least ten (10) days prior to the date of the activity.**

**FOR SCHOOL/DISTRICT USE**

Date Received: \_\_\_\_\_ Date of Response: \_\_\_\_\_

Response: \_\_\_\_\_

District/school employee who contacted applicant: \_\_\_\_\_