

THE KENTON COUNTY BOARD OF EDUCATION

1055 EATON DRIVE, FORT WRIGHT, KENTUCKY

TELEPHONE: (859) 344-8888 / FAX: (859) 344-1531 WEBSITE: www.kenton.kyschools.us Dr. Henry Webb, Superintendent of Schools

KCSD ISSUE PAPER

DATE:

03/13/2018

AGENDA ITEM (ACTION ITEM):

Consider/Approve To approve the KCSD's National Defense Cadet Corps. (NDCC) Program to become a Junior Reserve Officer Training Corps. (JROTC) Program.

APPLICABLE BOARD POLICY:

01.11 General Powers & Duties

HISTORY/BACKGROUND:

KCSD started the Military Preparatory Academy (MPA) in the 2014/2015 school year. The MPA was established as a NDCC Program through the Department of the Army. The difference between an NDCC Program and a JROTC Program is funding. NDCC Programs are fully funded by the school district, while JROTC Programs are partially funded by the Dept. of the Army. When KCSD established the NDCC Program, the Dept. of the Army was not starting new JROTC Programs in the Commonwealth. The request was made to the Dept. of the Army to establish a JROTC Program in the KCSD if an opening occurred. In the fall of 2017, KCSD was notified by the Dept. of the Army that the KCSD's JROTC was approved as of February 1, 2018.

FISCAL/BUDGETARY IMPACT:

By becoming a JROTC Program, KCSD will save half the salary of two Military teachers, and technology, equipment, uniforms and professional development costs will be substantially lowered.

RECOMMENDATION:

To approve KCSD's Military Preparatory Academy becoming a JROTC Program

CONTACT PERSON:

Dr. Francis O'Hara, Director of Innovation Education

Principal

District Administrator

Superintendent

Use this form to submit your request to the Superintendent for items to be added to the Board Meeting Agenda.

Principal –complete, print, sign and send to your Director. Director –if approved, sign and put in the Superintendent's mailbox.

REPLY TO ATTENTION OF

DEPARTMENT OF THE ARMY

HEADQUARTERS, UNITED STATES ARMY CADET COMMAND AND FORT KNOX
1ST CAVALRY REGIMENT ROAD
FORT KNOX, KENTUCKY 40121-5123

January 4, 2018

Dr. Francis O'Hara Principal, Kenton County Academies of Innovation and Technologies 3234 Turkeyfoot Edgewood, KY 41017

Dear Dr. O'Hara:

Congratulations! I am pleased to inform you Kenton County Academies of Innovation and Technologies has been approved to disestablish as National Defense Cadet Corps (NDCC) program and to establish as an Army Junior Reserve Officers' Training Corps (JROTC) program. The effective date of approval is January 31, 2012.

The establishment contract requires each unit be staffed with a minimum of one officer (Senior Army Instructor) and one non-commissioned officer (Army Instructor). The first instructor must be hired by March 30, 2018, and the second by April 30, 2018. To assist you in hiring certified instructors and provide you and your faculty with pertinent information regarding the Army JROTC Program, please access our website at www.usarmyjrotc.com.

We have asked the 7th Brigade staff to work with you and your faculty during the establishment process. If you have any questions or desire additional information, please contact the brigade representatives at (502) 624-8299.

We are providing a copy of this letter to Colonel Lance D. Oskey, Commander, 7th Brigade, U.S. Army Cadet Command, and Mr. Jody Jarboe, 7th Brigade JROTC Chief.

Sincerely.

MICHAELA. STINNETT Colonel, U.S. Army Director, Army JROTC

DEPARTMENT OF THE ARMY

HEADQUARTERS, UNITED STATES ARMY CADET COMMAND AND FORT KNOX
1ST CAVALRY REGIMENT ROAD
FORT KNOX, KENTUCKY 40121-5123

REPLY TO ATTENTION OF

February 28, 2018

Instructor Management Division

Mr. Matthew Rigg Director of Human Resources Kenton County Board of Education 1055 Eaton Drive Fort Wright, KY 41017

Dear Mr. Rigg:

Approval is granted to hire Command Sergeant Major Jeffrey Stone, USA Retired, SSN: XXX-XX-1369 on a **10** month contract as an Army Instructor at Kenton County Academies of Innovation and Technology, Edgewood, KY on a cost shared basis as of February **1, 2018**. The marked item(s) must be received within 30 days from date of hire. Your hiring action is complete if no items are marked. Items must be submitted via e-mail thru your brigade to this headquarters, ATTN: Instructor Management Division.

□ Photo (Army Service Uniform, three quarter length, DA photo, no Larger than 4 x 6)

□ Copy of Transcripts-

All instructors must complete the Junior ROTC Certification Training IAW CCR 145-2, Chapter 8. In addition, they will serve in a probationary status for the first two academic years of employment.

For initial pay purposes, you may use the figure below as the Instructors starting Minimum Instructor Pay (MIP). Please note the below MIP figure will increase/decrease when changes occur to entitlements that directly affect MIP. Please contact Ms. Rutledge at <a href="mailto:decided-unit

Minimum Instructor Pay (MIP): \$5,138.89

Sincerely,

PROCTOR.FLOREN
PROCTOR.FLOREN
PROCTOR.FLOREN
PROCTOR.FLORENTINA.N.1
157122580
TINA.N.115712258 Date: 2018.02.28 14:18:56
Overosor
Chief, Instructor Management Division

SAMPLE REQUEST FOR HIRE LETTER

(Letterhead of School/District Hiring Authority or business format letter) (include fax number)

Commander

Headquarters, U.S. Army Cadet Command ATTN: ATCC-HS-IM Fort Knox, Kentucky 40121										
Dear Sir:										
Request approval to hire the following named individual as a Junior ROTC Instructor on a (cost shared or non-cost shared basis) at (school name, city, state):										
Retired Rank and Full Name:										
_ast 4 SSN:										
Date of Retirement:										
Date of Certification: Highest Education Level (Please Degree, Doctorate Degree Current e-mail:	circle) : Associates Degree, Bachelors Degree, Masters									
Date of Employment:										
Number of Months: 10 month co	ontract									
Reason: Initial hire (n	ewly established program)									
□ Replacemer	nt hire									
Rank/Name Termination	of previous incumbent: date:									
□ Army Appro	ved New Program									
☐ Army-appro	ved increase in authorized staffing									
Transfer										
Date of app	roval memorandum:									
	ndividual's minimum instructor pay ☐ is ☐ is not ion is needed, please contact (Name) at (Phone number									

(Signature of Hiring Authority)

JUNIOR RESERVE OFFICER TRAINING CORPS (JROTC) INSTRUCTOR PAY CERTIFICATION WORKSHEET FOR ENTITLEMENT COMPUTATION

PRIVACY ACT STATEMENT

AUTHORITY: 10 USC Chapter 102; 37 USC 403; Public Law 96-303; EO 9397.

PRINCIPAL PURPOSE: To obtain data used to determine Junior ROTC Instructor corresponding active duty entitlements. These entitlement amounts will be used in the computation of the amount to be reimbursed to the school district on behalf of that instructor.

ROUTINE USE(S): None.

DISCLOSURE: Voluntary. Nondisclosure may result in either no, or reduced amount of, BAH, OHA, and COLA being used in the reimbursement computation. Disclosure of SSN is voluntary, however, your SSN is used as identification for pay purposes. This information will not be processed without your SSN.

INSTRUCTIONS

This form will be used to certify Basic Allowance for Housing (BAH), Overseas Housing Allowance (OHA), and Cost of Living Allowance (COLA). Part A must be completed by instructors employed within CONUS; Part A, and Section II of Part B must be completed by instructors in Alaska and Hawaii; Part A, and all of Part B must be completed by instructors employed overseas. Specific instructions are provided for several items. Supporting documentation required to be submitted with this form by each instructor is listed for each section.

PART A																
BAH (Applies to CONUS and Overseas Locations)																
1. N	1. NAME (Last, First, Middle Initial) 2. RETIRED GRADE 3. \$				3. SS	SSN 4. BRANCH OF					ERVIC	E RETIF	REDF	ROM		
										ARN	ARMY		NAVY			COAST
						Al		AIR	FORCE		MARIN	IES		GUARD		
5. C	5. CURRENT ADDRESS OF INSTRUCTOR															
a. S	a. STREET (Include apartment or suite number) b. CITY						- 1	c. STATE	d. Z	d. ZIP CODE		100 ACC 300 ACC 400 AC			IONE NO.	
											(Include Area Code)			le)		
	MPLOYING SCHOOL IN															
a. N	AME AND ADDRESS OF S	CHOOL	(Include ZI	P Code)			b. NAI	ME AND A	DDRESS	OF SCH	OOL DIS	STRICT	(Include :	ZIP C	ode)	
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25 15	LEPHONE NUMBER (Includ	de Area	(2) FAX	NUMBER (Inclu	ıde Area Co	ode) ((1) TELEPHONE NUMBER (Include Area (2) FAX NUMBER (Include Area Code)						ea Code)			
C	ode)						Code)									
c. S	CHOOL (UNIT) IDENTIFICA	TION	'													
	ARITAL STATUS (X or					1		ATUS OF						' Insti	uctor,	
(1	f not married, go to Ite	m 9)					complete Item 8. Otherwise, go to Item 9)									
	MARRIED		DIVORCE	D			NON-MILITARY ACTIVE DUTY MEMBER									
	SINGLE		SEPARAT	ED				OTHER FI	EDERAL S	ERVICE		INSTR	UCTOR	(Junio	ROTC	Program)
9. IF	SPOUSE IS ACTIVE D	UTY O	RINSTRU	JCTOR												
a. S	SN	b. BR	ANCH OF S	SERVICE		9	c. DUTY LOCATION									
10a. RESIDING IN GOVERNMENT/EMPLOYER PROVIDED QUARTERS (X one) b. IF YE							'ES, DO EI	THER YO	J OR YO	OUR SPC	USE PA	Y RENT	?			
YES NO							YES NO									
11. IF NOT MARRIED, DO YOU HAVE DEPENDENTS?						12. DEPENDENT STATUS (X one)										
(X one)						RESIDING WITH INSTRUCTOR (Go to Item 13)										
YES NO						NOT RESIDING WITH INSTRUCTOR (Complete Item 12)										
13. E	EPENDENT(S) ADDRES	SS (If r	ot residir	ng with instru	ctor)											
a. S	TREET (Include apartment	or suite	number)			ı	b. CIT	Υ			c. S1	TATE		d. ZI	P CODE	

44 DEDENDENT DELATIONQUID (Enforces of										
14. DEPENDENT RELATIONSHIP (Enter one of the following codes)										
NOTE: If code selected is B, complete all of Item 14. If code C, K. S, T, or W, complete 14c. only. If code A, D, I, L, or R, do not complete Item 14.										
WITHOUT DEPENDENT(S) I - Instructor married to instructor D - Parent (includent R - Own right (single) which is a perior of the natural L - Parent(s)-in-late	B - Child in leg someone o	other than instructor (over age 21) structor's custody W - Instructor marri to instructor wi								
15. IF CLAIMING DEPENDENT CHILD(REN)										
a. WHO HAS CUSTODY OF CHILD(REN)?	b. IF IN CUSTODY OF FOR	RMER SPOUSE, AND FORM	ER SPOUSE IS ACTIVE	DUTY OR INSTRUCTOR:						
INSTRUCTOR	(1) SSN	(2) DUTY LOCATION	# 1 post							
FORMER SPOUSE										
OTHER										
c. DATE OF BIRTH OF YOUNGEST CHILD	d. IF YOU DO NOT HAVE	CUSTODY, DO YOU PAY C	HILD SUPPORT?							
CLAIMED AS A DEPENDENT (YYYYMMDD)	YES NO	IF "YES", INDICATE MON' \$	IF "YES", INDICATE MONTHLY AMOUNT PAID \$							
SUPPORTING DOCUMENTATION REQUIRED FO	OP OPIGINAL CERTIFIC	ATION OF BALL								
CERTIFICATION OF DEPENDENT(S) 1. Spouse - copy of marriage certificate with seal. 2. Child(ren) - copy of birth certificate with seal. 3. Child(ren) not in instructor's custody - divorce decree, legal separation agreement, court order. SECONDARY DEPENDENT(S) 1. Parent(s) or parent(s)-in-law - court order of guardianship. 2. Ward - Court order of guardianship. 3. Student (age 21 - 22 in school) - letter from learning instutution verifying full time enrollment. 4. Handicapped child over age 21 - medical sufficiency statement. VERIFICATION OF GOVERNMENT/EMPLOYER PROVIDED QUARTERS ASSIGNED 1. Letter from housing office if assigned to active duty spouse, or 2. Certification letter from school.										
PART B SECTION I - OHA (Applies to Overseas Locations Only)										
SE		to Overseas Locations O	nly)							
16. ACCOMPANIED (X one)		to Overseas Locations O b. IF YES, NUMBER OF SH								
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16. ACCOMPANIED (X one)	CTION I - OHA (Applies i	b. IF YES, NUMBER OF SH								
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JROTC INSTRUCTOR ANNUAL CERTIFICATION OF PAY AND DATA FORM

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. Section 2031; DoDI 1205.13, Junior Reserve Officer Training Corps (JROTC) Program; DoDFMR 7000.14-R, Vol. 10, Chapter 21; and E.O. 9397.

PRINCIPAL PURPOSE(S): To determine the inclusive work dates of each instructor for employment period of JROTC Instructor duties.

ROUTINE USE(S): In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act, these records or information contained therein may specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 552a(b)(3) as follows: The DoD "Blanket Routine Uses" published at the beginning of the DoD compilation of systems of records notices apply.

		t to the school.	Informa	ition is volunta	ıry, nowever, tai	lure to provide the	requested infor	mation may	/ impede or	delay the			
1. INSTRUCTOR NAME (Last, First, Middle Initial) 2. SSN				SSN	3. S	EX (X one)	4. S	TATUS (X o	ne)				
, , , ,							FEMALE		NEW	RETIRE/			
							MALE		RETURN	RESIGN			
5. E	RANCH OF	SERVICE (Retired fro	m)				_	6. F	ETIRED GR	ADE			
	ARMY	AIR FORCE		NAVY	MARINE CO	DRPS	COAST GUARI	D					
7a. I	NAME AND A	DDRESS OF SCHO	OOL (Inc.	lude ZIP Code)		8a. NAME AND	ADDRESS OF S	SCHOOL D	ISTRICT (In	olude ZIP Code)			
NEW	ADDRESS?	YES		NO		NEW ADDRESS?	YES		Пио				
		DENTIFICATION NUM	<u> </u>					AREA NUM	.1				
						b. DISTRICT IDENTIFICATION OR AREA NUMBER							
9. CURRENT SCHOOL YEAR DATES OF WORK FOR JROTC (Not required for new hires) 10. UPCOMING EMPLOYMENT PERIOD DATES OF WORK (You MUST complete a separate sheet for any break in contract dates.)													
a. FROM (YYYYMMDD) b. TO (YYYYMMDD)					a. BEGINNING (YYYYMMDD)			b. ENDING (YYYYMMDD)					
					:		1			****			
m T M R a M	ninimum requi hese dates ar lilitary Service eimbursemen salary equal i lilitary Service	the inclusive dates depend and alary will be dure subject to physical it is authorized to rein to the school/schoto or greater than Mile JROTC Instructor Field by the JIRO (normated above.	e. Inclu I verifica mburse ol distric inimum Reimbur	de only the per ation at any tin the school for at is only authout Instructor Pay resement Office	eriod of time durine by a represer one-half the Milorized for the pe as computed by (JIRO) within 3	ing which the instr ntative from the ap nimum Instructor I riod of time the in- y the Military Serv 0 days of the instr	ructor will ACTU, oplicable Military Pay unless other structor is covereice. This form is ructor's employm	ALLY be wanted a service JF arrangement of the subment of the subment, terminate was a subment, terminate was a subment, terminate was a subment of the subm	orking in sup ROTC Heado ents have be d contract, a nitted to the ation, and o	port of JROTC. uarters. The en approved. ind is receiving appropriate n a yearly basis			
11. 9	SCHOOL OFF	ICIAL											
а. Т	TYPED NAME (Last, First, Middle Initia	a/)		b. TITLE			c. Ti	ELEPHONE (I	nclude Area Code)			
d. 4	BIGNATURE				1	12 12		e. D	ATE (YYYYM	MDD)			
i		R CERTIFICATION nave been hired to in	nstruct a	it the above so	chool for the incl	usive work period	indicated and th	nat the sala	ry will be for				
a. I	NSTRUCTOR S	BIGNATURE						b. D	ATE (YYYYM	MDD)			
	FORM 270	7 CED 2007		DE	EVIOUS EDITI	ON IS OBSOLETI		1					

ACH VENDOR/MISCELLANEOUS PAYMENT ENROLLMENT FORM

This form is used for Automated Clearing House (ACH) payments with an addendum record that contains payment-related information processed through the Vendor Express Program. Recipients of these payments should bring this information to the attention of their financial institution when presenting this form for completion. See reverse for additional instructions.

PRIVACY ACT STATEMENT

The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). All information collected on this form is required under the provisions of 31 U.S.C. 3322 and 31 CFR 210. This information will be used by the Treasury Department to transmit payment data, by electronic means to vendor's financial institution. Failure to provide the requested information may delay or prevent the receipt of payments through the Automated Clearing House Payment System.

	AGENCY IN	FORMATION	ON	
FEDERAL PROGRAM AGENCY				
ARMY JROTC				
AGENCY IDENTIFIER:	AGENCY LOCATION CODE (ALC):	A	CH FORMAT:	
ATCC-JR	FORT KNOX, KY		CCD+	Стх
ADDRESS:		,		
394 2ND DRAGOONS RE)			
BLDG 6573 FORT KNOX	KY 40121			
CONTACT PERSON NAME:		TELEPHONE NUMBER:		
DEIDRE RUTLEDGE-VAI		(502) 624-2250		
ADDITIONAL INFORMATION:				
U.S. ARMY CADET COM	MAND, JROTC, INSTRUCTOR M	ANAGEMEN	NT DIVISIO	N, FORT KNOX
r	DAVEE/OOMDAN	IV INICODA	AA TIONI	
NAME	PAYEE/COMPAN	IT INFORM	MATION	SSN NO. OR TAXPAYER ID NO.
INAME				
ADDRESS				NOT REQUIRED
ADDRESS				
				•
CONTACT PERSON NAME:				TELEPHONE NUMBER:
				()
	FINANCIAL INSTITU	ITION INFO	DRMATION	<u> </u>
NAME:				
ADDRESS:				
7.55.1.255.				
ACH COORDINATOR NAME:				TELEPHONE NUMBER:
				()
NINE-DIGIT ROUTING TRANSIT NU	MBER:			
DEPOSITOR ACCOUNT TITLE:				
DEDOCITOR ACCOUNT NUMBER				LOOKBOY NUMBER
DEPOSITOR ACCOUNT NUMBER:				LOCKBOX NUMBER:
TYPE OF ACCOUNT:				
TYPE OF ACCOUNT:	CHECKING SAVINGS	Lock	BOY	
SIGNATURE AND TITLE OF AUTHO				TELEPHONE NUMBER:
(Could be the same as ACH Coordinate				
				()
AUTHORIZED FOR LOCAL REPROI	NICTION			SF 3881 (Rev. 2/2003)

SF 3881 (Rev. 2/2003) Prescribed by Department of Treasury 31 U S C 3322; 31 CFR 210