EXPLANATION: THE UPDATED FBI CJIS SECURITY POLICY CHANGES THE TRAINING REQUIREMENTS FROM EVERY TWENTY-FOUR (24) MONTHS TO EVERY TWELVE (12) MONTHS.

FINANCIAL IMPLICATIONS: MORE FREQUENT TRAINING

# PERSONNEL E03.11 AP.2521

Criminal History Record Information

Purpose

The NKCES may use Criminal History Record Information (CHRI) obtained from the Kentucky State Police (KSP) to check qualification for employment or service as provided in KRS 160.380 and related policies and for authorizing personnel who will make fitness determinations. CHRI may not be used for any other purpose.

Authority

The NKCES has the authorization to submit fingerprints to KSP for a fee-based state and federal background check pursuant to KRS 160.380.

Noncriminal Justice Agency Contact (NAC) & Local Agency Security Officer (LASO)

The Superintendent will designate employee(s) to serve as the NAC and LASO points of contact with KSP through which communication regarding audits, NKCES personnel changes, training, and security are conducted. The NAC and LASO will receive and disseminate communication from KSP to all authorized NKCES personnel. Additionally, the LASO shall where applicable:

1. Identify who is using the Criminal Justice Information Services (CJIS) Systems Agency (CSA) approved hardware, software, and firmware and ensure no unauthorized individuals or processes have access to the same.
2. Identify and document how the equipment is connected to the state system.
3. Ensure that personnel security screening procedures are being followed as stated.
4. Ensure approved and appropriate security measures are in place and working as expected.
5. Support policy compliance and ensure the CSA Information Security Officer is promptly informed of security incidents.

Authorized Personnel

Authorized personnel will be given access to view and handle CHRI after completing the required Security Awareness Training and any additional training required by KSP. Only authorized personnel may access, discuss, use, possess, disseminate, or destroy CHRI.

The NKCES will keep an updated list of authorized personnel that will be available to the KSP Auditor during the audit process.

Training of Authorized Personnel

The NKCES will ensure all persons authorized to have CHRI access will complete Security Awareness Training via CJIS Online immediately upon hire or appointment to access CHRI. The NAC will keep on file the Security Awareness Training certificate on all authorized personnel.

The NKCES will ensure authorized users complete recertification of Security Awareness Training every twelve (12) months.

Authorized personnel will review the KSP website Noncriminal Justice Agency (NCJA) section for policies, procedures, and forms necessary for CHRI handling and fitness determination.

# PERSONNEL E03.11 AP.2521

#  (Continued)

Criminal History Record Information

Fingerprint Card Processing

The NKCES requires that all covered persons for whom fingerprint check is required must provide a valid, unexpired form of government-issued photo identification prior to fingerprinting to verify their identity.

A copy of the FBI Privacy Rights Notification will be provided to the covered persons prior to fingerprinting. Covered persons will also be advised of the process regarding a challenge of the criminal history record.

Covered persons that have disclosed a conviction must still be fingerprinted. Proper reason for fingerprinting must be documented in the “Reason for Fingerprinting” box.

Proper chain of custody procedures protecting the integrity of the covered person’s fingerprints prior to submission will include maintaining fingerprints in a secure environment, in a sealed envelope.

Communication

Authorized personnel may discuss the CHRI results with covered persons in a secure, private area. Extreme care will be taken to prevent overhearing, eavesdropping, or interception of communication.

The NKCES will not allow a covered person to have a copy of their record or take a picture of it with an electronic device.

The NKCES will provide the covered person with required forms and options to obtain their record if a record is to be challenged.

Physical Security

The NKCES will ensure that information system hardware, software, and media are physically protected through access control measures by ensuring the perimeter of a physically secured location shall be prominently posted and separated from non-secure locations by physical controls. The NKCES will control all access points (except for those areas within the facility officially designated as publicly accessible) and will verify individual access authorizations before granting access. The NKCES will control physical access to information system distribution and transmission lines within the physically secure location. The NKCES will control physical access to information system devices that display Criminal Justice Information (CJI) and will position information system devices in such a way as to prevent unauthorized individuals from accessing and viewing CJI. The NKCES will monitor physical access to the information system to detect and respond to physical security incidents. The NKCES will control physical access by authenticating visitors before authorizing escorted access to the physically secure location (except for those areas designated as publicly accessible) and will escort visitors in a secured location.

# PERSONNEL E03.11 AP.2521

#  (Continued)

Criminal History Record Information

Storage and Retention of CHRI

The fingerprint results from KSP should only be handled by authorized personnel.

During the fitness determination:

* CHRI will be stored in a locked drawer/container at the Central Office and only accessible to authorized personnel.
* CHRI will be stored in a separate file that cannot be released for any public records request and will not be archived in a publicly accessible location.
* CHRI results will be stored electronically the agency using proper security and encryption methods.
* If stored electronically, the NKCES will ensure compliance of CJIS Security Policy for the Network Infrastructure to include the following:
1. Network Configuration
2. Personally Owned Information Systems
3. Publicly Accessible Computers
4. System Use Notification
5. Identification/User ID
6. Authentication
7. Session Lock
8. Event Logging
9. Advance Authentication
10. Encryption
11. Dial-up Access
12. Mobile Devices
13. Personal Firewalls
14. Bluetooth Access
15. Wireless (802.11x) Access
16. Boundary Protection
17. Intrusion Detection Tools and Techniques
18. Malicious Code Protection
19. Spam and Spyware Protection
20. Security Alerts and Advisories
21. Patch Management
22. Voice over Internet Protocol (VoIP)
23. Partitioning and Virtualization
24. Cloud Computing
* Per KRS 61.878, CHRI is not subject to disclosure under the Kentucky Open Records Act and will not be archived in a publicly accessible location.

# PERSONNEL E03.11 AP.2521

#  (Continued)

Criminal History Record Information

Media Transport

The NKCES will protect and control digital and physical media during transport outside of controlled areas and will restrict the activities associated with transport of such media to authorized personnel.

Disposal of Media CHRI

The NKCES will properly sanitize or destroy physical or electronic CHRI per the Kentucky Department of Libraries and Archives (KDLA) Public School NKCES Records Retention Schedule. If a third party performs the destruction, an authorized person shall accompany the CHRI through the destruction process. For electronic media, the NKCES shall overwrite three (3) times or degauss digital media prior to disposal or release, inoperable digital media shall be destroyed; cut up, shredded, etc. The NKCES shall ensure the sanitation or destruction is witnessed or carried out by authorized personnel.

Misuse of CHRI

In the event of deliberate or unintentional misuse of CHRI, the NKCES will subject the employee to disciplinary action per Board policy and procedures, up to and including termination, or request for criminal investigation/charges.

EXPLANATION: HB 319 REMOVES THE REQUIREMENT THAT AN AFFIDAVIT BE SUBMITTED FOR SICK (INCLUDING EMERGENCY LEAVE USED FOR THIS PURPOSE) AND PERSONAL LEAVE AND REPLACES AFFIDAVIT WITH STATEMENT.

FINANCIAL IMPLICATIONS: NONE ANTICIPATED

# PERSONNEL L03.123 AP.2

Leave Request Form

The statement is essential for payroll purposes. Please fill out the form with care and return it as directed by the Principal/designee.

===========================================================================================

🞏 PERSONAL LEAVE: Granted under the terms of Policies 03.1231/03.2231.

Date(s) of Personal leave: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Total Days: \_\_\_\_\_\_\_\_\_\_\_ Substitute Needed 🞏

==========================================================================================

🞏 SICK LEAVE: Granted under the terms of Policies 03.1232/03.2232.

Date(s) of sick leave: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Total Days\_\_\_\_\_\_\_\_\_\_ Substitute Needed 🞏

Check one: 🞏 Employee’s illness 🞏 Illness of family member 🞏 Mourning

Is sick leave used for emergency leave purposes, per policy? 🞏 Yes 🞏 No

==========================================================================================

🞏 MATERNITY/ADOPTION/CHILDREARING LEAVE: Granted under the terms of Policies 03.1233/03.2233.

Estimated date(s) of leave \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Substitute Needed 🞏

🞏 paid maternity leave /number of sick leave days \_\_\_\_\_\_\_ 🞏 unpaid maternity leave

🞏 paid birth or adoption leave, not to exceed 30 days/number of sick leave days \_\_\_\_\_\_\_\_\_

🞏 unpaid childrearing leave \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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🞏 JURY LEAVE: Granted under the terms of Policies 03.1237/03.2237.

Date(s) of jury leave: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Total Days: \_\_\_\_\_\_\_\_\_\_\_ Substitute Needed 🞏

🞏 Employee Signs Over Court-Issued Jury Duty Check.

🞏 Employee Reimburses District.

==========================================================================================

🞏 MILITARY/DISASTER SERVICES LEAVE: Granted under the terms of Policies 03.1238/03.2238.

Date(s) of leave: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Total Days: \_\_\_\_\_\_\_\_\_\_\_ Substitute Needed 🞏

=======================================================================================

🞏 EMERGENCY LEAVE: Granted under the terms of Policies 03.1236/03.2236.

Date(s) of emergency leave: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Total Days: \_\_\_\_\_\_\_\_\_\_\_ Substitute Needed 🞏

🞏 Bereavement 🞏 Disasters

🞏Court /Legal 🞏 Other, specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is sick leave being used for emergency leave purposes, per policy? 🞏 Yes 🞏 No

==========================================================================================

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

 ***Executive Director/designee’s Signature Date***

The information I have provided is true and, under provisions of law and NKCES policy, qualifies me to take the leave indicated. I understand that if I have provided information that is not true, I may be subject to disciplinary action.

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

 ***Employee’s Signature Date***

EXPLANATION: HB 32 AMENDS KRS 161.011 TO PERMIT HIRING OF CLASSIFIED PERSONNEL WITHOUT A HIGH SCHOOL DIPLOMA IF OPPORTUNITY TO OBTAIN A HIGH SCHOOL EQUIVALENCY DIPLOMA IS PROVIDED BY THE DISTRICT AND PERMITS CERTAIN GOVERNMENT ISSUED CERTIFICATIONS OR LICENSES TO SUBSTITUTE.

FINANCIAL IMPLICATIONS: POTENTIAL COSTS ASSOCIATED WITH ADMINISTERING THE EQUIVALENCY PROGRAM.

EXPLANATION: HB 13 AMENDS KRS 281A.175 RELATED TO THE PHYSICAL EXAM REQUIREMENT FOR SCHOOL BUS DRIVERS. IT CHANGES THE REQUIRED PHYSICAL EXAM FROM EVERY YEAR TO EVERY TWO (2) YEARS.

FINANCIAL IMPLICATIONS: LESS FREQUENT EXAMS COULD BE A COST SAVINGS.

# PERSONNEL AZ03.221 AP.22

‑ Classified Personnel ‑

Personnel Documents

|  |  |  |
| --- | --- | --- |
| Name: | DOB: | Social: |
| Hire Date: | Dept: | Position: |
| Daily Rate: | AOD # | Phone: |
| Benefits Effective: | Email: |
| Recommendation for Employment |  | To Exec Director: |
| Job Description |  |  |
| Application |  |  |
| Resume |  |  |
| Contract Signed by Employee |  | To Exec Director: |
| Contract Signed by Executive Director |  |  |
| High School Diploma, GED, License, or Credential |  |  |
| Central Registry Background Check |  | To KY Cabinet: |
| CAN Report from KY Cabinet |  |  |
| Fingerprint Card / Previous Check Within 6 Mos |  | To KSP: |
| Fingerprint Report from KSP |  |  |
| Physical Report KDESHS001 |  |  |
| TB Report TB-3 |  |  |
| Verification of Professional Experience |  |  |
| I-9 Employment Eligibility |  |  |
| Copy of Driver's License |  |  |
| Copy of Social Security Card |  |  |
| W-4 Federal Tax Withholding |  |  |
| K-4 or IT-4 State Tax Withholding |  |  |
| Direct Deposit Form / Void Check |  |  |
| KRS Application & Beneficiary |  | To KRS: |
| Women's Rights |  |  |
| Health Insurance Application |  | To KEHP: |

# PERSONNEL AZ03.221 AP.22

#  (Continued)

Personnel Documents

|  |  |  |
| --- | --- | --- |
| Marriage / Birth Certificates |  | To KEHP: |
| FSA Application |  | To KEHP: |
| Nationwide Life Insurance Application |  | To KEHP: |
| Nationwide Life Insurance Beneficiary |  | To KEHP: |
| Dental Insurance Application |  | To KEHP: |
| Vision Insurance Application |  | To KEHP: |
| Dental Insurance Application |  | To Gross: |
| Vision Insurance Application |  | To Gross: |
| Grange Life Insurance |  | To Gross: |
| American Fidelity Packet |  | To Adeana: |
| Emergency Contacts |  |  |
| NKCES Handbook Acknowledgement |  |  |
| AOD Policies & Directions |  |  |

EXPLANATION: HB 331 AMENDS KRS 158.162 TO REQUIRE EACH SCHOOL TO HAVE A WRITTEN CARDIAC EMERGENCY RESPONSE PLAN. IT ALSO REQUIRES THE DISTRICT TO MAINTAIN A PORTABLE AUTOMATED EXTERNAL DEFIBRILLATOR (AED) IN EVERY MIDDLE AND HIGH SCHOOL BUILDING, AND AS FUNDS BECOME AVAILABLE, AT SCHOOL-SANCTIONED MIDDLE AND HIGH SCHOOL ATHLETIC PRACTICES AND COMPETITIONS, AND TO ADOPT PROCEDURES FOR THE USE OF AEDS DURING EMERGENCIES.

FINANCIAL IMPLICATIONS: COSTS OF PURCHASING, MAINTAINING AEDS, COPYING AND DISTRIBUTING PLANS, AND PERSONNEL TRAINING COSTS

# SCHOOL FACILITIES $05.4 AP.1

Use of Automated External Defibrillators (AEDs)

Each school’s emergency plan shall include procedures to be followed in case of a medical emergency, a written cardiac emergency response plan, and a diagram that clearly identifies the location of each AED. Procedures for the use and training of AEDs shall be included in the emergency response plan.

explanation: HB 331 amends KRS 158.162 to require each school to have a written cardiac emergency response plan. IT also requires The district to maintain a portable automated external defibrillator (AED) in every middle and high school building, and as funds become available, at school-sanctioned middle and high school athletic practices and competitions, AND to ADOPT procedures for the use of AEDs during emergencies.

FINANCIAL implications: Costs of purchasing, maintaining aeds, copying and distributing plans, and personnel training costs

Draft 5/16/23

# SCHOOL FACILITIES C05.4 AP.23

Compliance with Automated External Defibrillator (AED) Requirements

Name of Employee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Training: \_\_\_\_\_\_\_\_\_\_

Having completed the required AED training, I hereby confirm that I have read and understand the policies and procedures for use of AEDs for the District.

Should I have questions at any time while serving as an Expected AED User, I shall contact the designated AED contact for clarification. I agree to follow the terms and guidelines set forth in policy and procedures for this District.

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

Expected AED User’s Signature Date

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

Executive Director/designee’s Signature Date

explanation: HB 331 amends KRS 158.162 to require each school to have a written cardiac emergency response plan. IT also requires The district to maintain a portable automated external defibrillator (AED) in every middle and high school building, and as funds become available, at school-sanctioned middle and high school athletic practices and competitions, AND to ADOPT procedures for the use of AEDs during emergencies.

FINANCIAL implications: Costs of purchasing, maintaining aeds, copying and distributing plans, and personnel training costs

Draft 5/16/23

# SCHOOL FACILITIES D05.4 AP.231

Automated External Defibrillator (AED) Reporting Form

**Submit this form to Executive Director/designee within forty-eight (48) hours of AED use.**

AED User: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location of AED Use: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Incident: \_\_\_\_\_\_\_\_\_\_

🞏 Staff Member 🞏 Student 🞏 Parent/Visitor

Condition upon arrival (check all that apply)

🞏 unconscious

🞏 not breathing

🞏 no pulse and/or shows signs of circulation such as normal breathing, coughing or

movement

Number of Defibrillations: \_\_\_\_\_\_\_\_\_\_

Please describe the incident from the beginning of the emergency until its conclusion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Were efforts terminated? 🞏 Yes 🞏 No If yes, please explain.

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Signature of AED User Date

explanation: HB 331 amends KRS 158.162 to require The district to maintain a portable automated external defibrillator (AED) in every middle and high school building, and as funds become available, at school-sanctioned middle and high school athletic practices and competitions.

FINANCIAL implications: Costs of purchasing, maintaining aeds, copying and distributing plans, and personnel training costs

# SCHOOL FACILITIES $05.4 AP.232

Automated External Defibrillator Inspection Log

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date | Inspected/In-Service | Inspected/Out-of-Service | Supt/Designee &Site /Supervisors Notified and Date | Missing/Faulty Equipment (list) | Initials of Inspector |
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|  | 🞏 | 🞏 | 🞏 \_\_\_\_\_\_\_\_\_ |  |  |

EXPLANATION: SB 5 CREATES A NEW SECTION OF KRS 158 TO REQUIRE THE BOARD TO ADOPT A COMPLAINT RESOLUTION POLICY FOR PARENTS OR GUARDIANS ALLEGING THAT MATERIAL, A PROGRAM, OR AN EVENT THAT IS “HARMFUL TO MINORS” HAS BEEN PROVIDED OR IS CURRENTLY AVAILABLE TO THEIR STUDENT ENROLLED IN THE DISTRICT.

FINANCIAL IMPLICATIONS: TIME SPENT INVESTIGATING, RESPONDING TO APPEALS, COST OF NEWSPAPER ADVERTISEMENT REGARDING FINAL OUTCOME

This needs to be reviewed by legal counsel for applicability to NKCES

# STUDENTS $08.23 AP.21

“Harmful to Minors” Complaint Resolution Process

This parent or guardian complaint must be submitted in writing to the Principal of the school where the student is enrolled alleging that material, a program, or an event that is “harmful to minors” has been provided or is currently available to the child of the parent or guardian.

**“Harmful to minors” is defined in KRS 158.192 and Policy 08.23**.

Complainant (Parent or Guardian)

Complainant Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Name(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade Level \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complaint(s)

A reasonably detailed description of the material, program, or event that is alleged to be “harmful to minors,” and how the material, program, or event is believed to be “harmful to minors.” (Use additional sheet if necessary.)

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Complainant’s SignatureDate

Level one: School Principal Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Within seven (7) business days of receiving a written complaint, the Principal shall review the complaint and take reasonable steps to investigate the allegations in the complaint, including but not limited to reviewing the material, program, or event that is alleged to be “harmful to minors;”

Per **KRS 158.192**, the Principal shall determine whether:

* The material, program, or event that is the subject of the complaint is “harmful to minors;”
* Student access to material that is the subject of the complaint shall remain, be restricted, or be removed;
* A program or event that is the subject of the complaint shall be eligible for future participation by students in the school.

# STUDENTS $08.23 AP.21

#  (Continued)

“Harmful to Minors” Complaint Resolution Process

Complaint(s) (continued)

Within ten (10) business days of receiving the complaint, unless another schedule is mutually agreed to by the parent or guardian and the Principal, the Principal shall confer with the parent or guardian and inform him or her whether the material, program, or event that is the subject of the complaint was determined to be “harmful to minors” and what the resolution will be.

Principal’s Determination (Use additional sheet if necessary.)

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

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Principal’s SignatureDate

A parent or guardian not having filed the appeal may request in writing access to the appealed materials, programs, or events for review and shall abide by the school's and District's policies and procedures when requesting and reviewing such information.

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Level Two: Appeal of the Principal’s Determination to the Board

Complainant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date appeal received at this level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The parent or guardian shall make any appeal within ten (10) days. The appeal shall:

* Be subject to full administrative and substantive review by Board and shall not be delegated;
* Include an opportunity for the parent or guardian to provide input during public comment at a Board meeting;
* Be completed within thirty (30) calendar days of receiving the written appeal unless another time frame is mutually agreed upon by the parent or guardian and the Board; and
* Be discussed and voted on during a meeting of the Board subject to the open records and open meeting requirements under KRS Chapter 61.

# STUDENTS $08.23 AP.21

#  (Continued)

“Harmful to Minors” Complaint Resolution Process

Level Two: Appeal of the Principal’s Determination to the Board (continued)

(Use additional sheet if necessary.)

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Complainant’s SignatureDate

The Board's final disposition of the appeal shall be made in writing and shall state whether the material, program, or event was determined to be “harmful to minors” and whether student access to the material will remain, be restricted, or be removed and whether the program or event shall be eligible for future participation by students in the school.

Within fifteen (15) business days from the date of a final disposition, the title of the material or a description of the program or event submitted for appeal, whether the material, program, or event was determined to be “harmful to minors,” whether student access to the material will remain, be restricted, or be removed or whether the program or event shall be eligible for future participation by students in the school, and the vote cast by each individual Board member shall:

* Be published on the website of the Board where it shall remain available for review; and
* Be published in the newspaper with the largest circulation in the county.

Board’s Final Disposition (Use additional sheet if necessary.)

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Board Member Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Vote:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Board Member Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Vote:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Board Member Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Vote:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Board Chair’s SignatureDate

LEGAL: HB 538 AMENDS KRS 158.150 TO INCLUDE BEHAVIORS THAT OCCUR OFF SCHOOL PROPERTY IF THE INCIDENT IS LIKELY TO SUBSTANTIALLY DISRUPT THE EDUCATIONAL PROCESS AND OPTIONS FOR REMOVAL OF STUDENTS.

FINANCIAL IMPLICATIONS: COST OF EDUCATING EXPELLED STUDENTS AND CONDUCTING HEARINGS

# STUDENTS L09.425 AP.21

Record of Removal

An employee who removes a student, or causes a student to be removed, from a classroom setting or NKCES transportation system shall complete and submit this form to the Principal/designee as soon as practicable following the removal. Per KRS 158.150, a student who is removed from the same classroom three (3) times within a thirty (30) day period shall be considered “chronically disruptive” and may be suspended from school and no other basis for suspension shall be deemed necessary.

|  |
| --- |
| **Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_** ***Last Name First Name Middle Initial*****School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade (if known) \_\_\_\_\_ Date of Removal \_\_\_\_\_\_\_\_****Classroom/NKCES vehicle from which the student was removed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Site to which the student was removed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Employee who removed the student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**Cause(s) for Removal**

🞏 Disrupting the classroom environment and educational process or challenging the authority of a supervising adult.

🞏 Threatening behavior, such as verbal or written statements or gestures by the student indicating intent to harm themselves, others or property.

Describe (*Use additional sheet(s) if necessary.*):

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

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🞏 Violent behavior, such as a physical attack by the student so as to intentionally inflict harm to himself/herself, others or property.

Describe (*Use additional sheet(s) if necessary.*):

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# STUDENTS L09.425 AP.21

#  (Continued)

Record of Removal

**Witness(es) *(Use additional sheet(s) if necessary.)***

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***Name Note if student/employee/other (specify)***

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

***Name Note if student/employee/other (specify)***

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

 ***Employee’s Signature Date***

Explanation: HB 522 AMENDS KRS 45A.385 INCREASING THE aggregate contract amount maximum for small purchase TO $40,000.

Financial implications: larger amount for small purchase procedures

# FISCAL MANAGEMENT DU04.31 AP.1

Purchasing

For the procurement of equipment, merchandise or services, the following documents and procedures will be used for all purchases and are the primary documents to be used by staff for any purchase of goods and services.

Expenditures, individually or in the aggregate, which exceed $40,000 shall be subject to the bidding process or competitive pricing (obtaining at least three [3] quotes).

After a purchase order is submitted by a Program Director, the Accounts Payable Coordinator will check the purchase order to ensure policies and procedures for purchasing are being followed. Purchase Order Requests must be filled out completely and include:

* Name and mailing address of vendor
* Name of person requesting goods/services
* Program name and # to be charged
* General ledger (GL) #
* Quantity, price, brief description of each item
* Attached documentation to support purchase
* Shipping costs if applicable

Additional info needed for food purchases:

* Name of event
* Date of event
* Location of event
* Pickup or delivery
* Time of pickup or delivery

The Accounts Payable Coordinator will enter the Purchase Order into the accounting system and assign a purchase order number. The purchase order will then be forwarded for final approval by the Executive Director/designee and then returned to the Accounts Payable Coordinator.

The original purchase order will be retained in the finance department until an invoice is received. A copy of the purchase order, along with all supporting documentation, will be given to the Program and Purchasing Assistant to purchase all materials, place registrations, make travel arrangements, etc.

Once the order is placed, an order confirmation is attached to the original purchase order, by the Program and Purchasing Assistant. When the goods or services are received, a packing slip or receipt will be used to document on the original purchase order that the goods and services have been received. The Program and Purchasing Assistant will attach packing slip, initial and date the receipt.

# FISCAL MANAGEMENT DU04.31 AP.1

#  (Continued)

Purchasing

When the invoice is received, the Accounts Payable Coordinator will review the purchase documentation and prepare the check for payment.

For all contracts funded in whole or in part by NKCES, the reciprocal preference for resident bidders required by law shall be applied. Geographical preferences relating to school nutrition service purchases may be utilized only as permitted by applicable federal law.