

KSBA Procedure Service

2023 Procedure Update (#27) Checklist

District: Woodford County Schools

To enable KSBA to track and store your District's administrative procedures in our procedure database, please indicate below what decision you have made on the proposed new/revised procedures enclosed for your review. We will forward printed or reproducible copies of the procedures when we receive this form and update your online manual if you belong to that service.

Procedure Number	Adopt as Written	Adopt with Modification*	Date of District/ Board Review	Keep Current Procedure	Delete Procedure
03.11 AP.2521	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
03.123 AP.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
03.19 AP.23	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
03.223 AP.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
05.4 AP.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
05.4 AP.23	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
05.4 AP.231	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
05.4 AP.232	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
07.13 AP.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
08.23 AP.21	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
09.4341 AP.11	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
10.5 AP.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
FRC Evaluation Tool	<input type="checkbox"/>	<input checked="" type="checkbox"/>	New Procedure	<input type="checkbox"/>	<input type="checkbox"/>
05.31 AP.21	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

\*Please attach a copy of the modified policy. DO NOT RETYPE A DRAFT - simply indicate the district-initiated changes by writing in colored ink, circling, highlighting, etc.

Danny Adley  
Superintendent's Signature

6-7-23  
Date

Please return this completed form to KSBA at your earliest opportunity. Please contact your KSBA Consultant IF you need KSBA to completely reprint all policy pages or to order additional new manuals, instead of just getting copies of the updated policies.

04.31 AP.1    
 02:4331 AP.1

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

03.11 AP.2521

## **Criminal History Record Information**

### **PURPOSE**

The District 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 District 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, District personnel changes, training, and security are conducted. The NAC and LASO will receive and disseminate communication from KSP to all authorized District 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 District 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 District 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 District will ensure authorized users complete recertification of Security Awareness Training every ~~twelvetwenty-four~~ (1224) 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.

## **Criminal History Record Information**

### **FINGERPRINT CARD PROCESSING**

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

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

### **PHYSICAL SECURITY**

The District 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 District 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 District will control physical access to information system distribution and transmission lines within the physically secure location. The District 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 District will monitor physical access to the information system to detect and respond to physical security incidents. The District 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.

## **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 District 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.

## **Criminal History Record Information**

### **MEDIA TRANSPORT**

The District 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 District will properly sanitize or destroy physical or electronic CHRI per the Kentucky Department of Libraries and Archives (KDLA) Public School District 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 District 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 District 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 District 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.

PERSONNEL

03.123.AP.2

**Leave Request Form and Statement-Affidavit**

NAME: \_\_\_\_\_ Today's Date \_\_\_\_\_  
LOCATION: \_\_\_\_\_

**SICK LEAVE:**  
DATE(S) OF SICK LEAVE: \_\_\_\_\_  
FULL DAY \_\_\_\_\_ HALF DAY  AM  PM  
CHECK ONE:  
 EMPLOYEE'S ILLNESS  ILLNESS OF FAMILY MEMBER \*  MOURNING  
IS SICK LEAVE BEING USED FOR EMERGENCY LEAVE PURPOSES, PURSUANT TO  
POLICY?  YES  NO  
REQUESTED UNDER THE TERMS OF POLICIES 03.1232/03.2232. (COMPLETE FOR REQUIRED  
~~STATEMENT-AFFIDAVIT~~)

**PERSONAL LEAVE:**  
DATE(S) OF PERSONAL LEAVE: \_\_\_\_\_  
FULL DAY \_\_\_\_\_ HALF DAY  AM  PM  
REQUESTED UNDER THE TERMS OF POLICIES 03.1231/03.2231. (COMPLETE FOR REQUIRED  
~~STATEMENT-AFFIDAVIT~~)

**EMERGENCY LEAVE:**  
DATE(S) OF EMERGENCY LEAVE: \_\_\_\_\_  
FULL DAY \_\_\_\_\_ HALF DAY  AM  PM  
 BEREAVEMENT  DISASTERS  COURT /LEGAL  
 OTHER, SPECIFY: \_\_\_\_\_  
REQUESTED UNDER THE TERMS OF POLICIES 03.1236/03.2236. (COMPLETE FOR REQUIRED  
~~STATEMENT-AFFIDAVIT~~)

**SUBSTITUTE NEEDED, NAME OF SUB** \_\_\_\_\_

~~LEAVE STATEMENT-AFFIDAVIT~~ (KRS 161.152, KRS 161.154, KRS 161.155)

~~Comes the affiant, \_\_\_\_\_, after being duly sworn, and states as follows:~~ I am submitting this request for the use of leave for the following purpose(s) (check applicable boxes); that the facts supporting the request for leave as indicated are true and correct; and that to the best of my knowledge, information, and belief, I am qualified for the leave requested pursuant to applicable state statute and Board policy.

~~Employee-Affiant's Signature (sign in presence of Notary)~~ \_\_\_\_\_ Date \_\_\_\_\_

~~Employee-Affiant's Name (Print or Type)~~ \_\_\_\_\_

~~Subscribed and sworn to before me this~~ \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

~~Notary Public:~~ \_\_\_\_\_, \_\_\_\_\_ County, ~~Kentucky~~

~~My Commission Expires:~~ \_\_\_\_\_

\*Immediate family member shall mean the employee's spouse, children (including stepchildren and foster children), grandchildren, daughters-in-law and sons-in-law, brothers and sisters, parents, spouse's parents, grandparents, and spouse's grandparents, without reference to the location or residence of said relative and any other blood relative who resides in the employee's home.

PERSONNEL

**Leave Request Form and Statement Affidavit**

NAME: \_\_\_\_\_ LOCATION: \_\_\_\_\_ TODAY'S DATE  
: \_\_\_\_\_

=====  
=====  
 LEAVE WITHOUT PAY: DATE(S) OF LEAVE: \_\_\_\_\_ / \_\_\_\_\_ FULL DAY \_\_\_\_\_ HALF DAY  AM  
 PM

=====  
=====  
 JURY LEAVE: DATE(S) OF JURY LEAVE: \_\_\_\_\_ / \_\_\_\_\_ FULL DAY \_\_\_\_\_ HALF DAY  AM  PM

EMPLOYEE WILL REIMBURSE DISTRICT FOR ANY JURY PAY RECEIVED AND ATTACH CERTIFICATE OF SERVICE FROM COURT.  
REQUESTED UNDER THE TERMS OF POLICIES 03.1237/03.2237.

=====  
=====  
 MILITARY/DISASTER SERVICES LEAVE: DATE(S) OF LEAVE: \_\_\_\_\_ / \_\_\_\_\_ FULL DAY \_\_\_\_\_ HALF DAY  AM  PM

REQUESTED UNDER THE TERMS OF POLICIES 03.1238/03.2238.

=====  
=====  
 PROFESSIONAL LEAVE: ACCOUNT CODE FOR PAYMENT: (ORG) \_\_\_\_\_  
(OBJECT) \_\_\_\_\_ (PROJECT) \_\_\_\_\_  
DATE(S) OF PROFESSIONAL LEAVE: \_\_\_\_\_ / \_\_\_\_\_ FULL DAY \_\_\_\_\_ HALF DAY  AM  PM

=====  
=====  
 SUBSTITUTE NEEDED, IF CHECKED INCLUDE NAME OF SUB \_\_\_\_\_

I understand that if I have provided information that is not true, I may be subject to disciplinary action.

\_\_\_\_\_  
Employee's Signature Date

**NOTARY NOT REQUIRED FOR ABOVE LEAVES**



**Temporary Leave Without Pay Request**

(10 WORK DAYS OR LESS)

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

Dear Woodford County Board of Education:

I am requesting a(n)  
\_\_\_\_\_  
(educational, professional, illness, maternity, adoption of child,  
disability, other)  
leave starting \_\_\_\_\_ and ending  
\_\_\_\_\_

(not to exceed 10 working days). I understand that my leave will be without pay for any portion of the leave not covered by sick days, personal days, sick bank donation, etc.

If applicable, a copy of my most recent doctor's statement or explanation of leave covering the timeframe listed above is attached.

I understand that if I wish to extend this leave that I must notify the Board of Education **in writing** prior to the ending date of this leave and furthermore I understand that a beginning date and ending date must always be included in the request.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Building Principal or Administrator Signature  Recommended  Not Recommended

\_\_\_\_\_  
Superintendent Signature  Recommended  Not Recommended



EXPLANATION: HB 331 AMENDS KRS 158.162 REGARDING TRAINING REQUIREMENTS FOR USE OF AUTOMATED EXTERNAL DEFIBRILLATORS(AEDS)  
FINANCIAL IMPLICATIONS: COSTS OF PURCHASING, MAINTAINING AEDS, TRAINING COSTS  
EXPLANATION: SB 1 (2022) CHANGED THE PROCESS FOR HIRING THE PRINCIPAL FROM THE COUNCIL TO THE SUPERINTENDENT WITH CONSULTATION  
WITH THE COUNCIL AND REMOVED THE REQUIRED TRAINING ON INTERVIEWING TECHNIQUES.  
FINANCIAL IMPLICATIONS: SAVINGS ON TRAINING COSTS



### District Training Requirements

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

This form may be used to track completion of local and state employee training requirements that apply across the District and maintain a record for the information of the Superintendent and Board.

TOPIC	LEGAL CITATION	RELATED POLICY	EMPLOYEES OR OTHERS AS DESIGNATED			DATE COMPLETED
			CERTIFIED	ALL	DESIGNATED	
District planning committee members.		01.111			✓	
Board member training hours.	KRS 160.180; 702 KAR 1:115; 701 KAR 8:020	01.83			✓	
Superintendent training program to be completed within two (2) years of taking office.	KRS 160.350	02.12			✓	
Certified Evaluation Training.	KRS 156.557; 704 KAR 3:370	02.14/03.18	✓		✓	
Supervisors shall receive appropriate training to equip them to meet the standards of Personnel Management.		02.3			✓	
All School Resource Officers (SROs) shall successfully complete forty (40) hours of annual in service training that has been certified or recognized by the Kentucky Law Enforcement Council for SROs.	KRS 158.4414	02.31			✓	
<b>Council member training required for Principal selection:</b>	<b>KRS 160.345</b>	<b>02.4244</b>			✓	
Council member training hours.	KRS 160.345	02.431			✓	
Employees authorized to use Criminal History Record Information (CHRI) will complete Security Awareness Training via Criminal Justice Information Services (CJIS)	KRS 160.380	03.11 AP.2521			✓	
Initial/follow-up training for coaches of interscholastic athletic activities or sports.	KRS 160.445; KRS 161.166; KRS 161.185; 702 KAR 7:065	03.1161 03.2141 09.311			✓	
Asbestos Containing Building Material (ACBM), Lockout/Tagout and personal protective equipment (PPE) training for designated employees.	40 C.F.R. Part 763 401 KAR 58:010 803 KAR 2:308 OSHA 29 C.F.R. 1910.132 29 C.F.R. 1910.147 29 C.F.R. 1910.1200	03.14/03.24			✓	
Bloodborne pathogens.	OSHA 29 C.F.R. 1910.1030	03.14/03.24		✓		
Behaviors prohibited/required reporting of harassment/discrimination.	34 C.F.R. 106.1-106.71, U.S. Department of Education Office for Civil Rights Guidance	03.162/03.262		✓		

## District Training Requirements

TOPIC	LEGAL CITATION	RELATED POLICY	EMPLOYEES OR OTHERS AS DESIGNATED		DATE COMPLETED
			CERTIFIED	DESIGNATED	
Title IX Sexual Harassment	34 C.F.R. § 106.45	03.1621/03.2621/09.428111	✓		
Teacher professional development/learning.	KRS 156.095	03.19	✓		
Active Shooter Situations.	KRS 156.095	03.19/03.29		✓	
Instructional leader training.	KRS 156.101	03.1912		✓	
The Superintendent shall develop and implement a program for continuing training for selected classified personnel.		03.29		✓	
Training of the instructional teachers' aide with the certified employee to whom s/he is assigned.	KRS 161.044	03.5		✓	
Orientation materials for volunteers.	KRS 161.048	03.6		✓	
Integrated Pest Management (7a) Certification.	302 KAR 29:060	05.11		✓	
Training for designated personnel on use and management of equipment.		05.4		✓	
<del>IF District owns</del> Automated external defibrillators (AEDs), training on use of such.	<del>KRS 158.162</del> KRS 311.667	<del>03.1161/03.2241</del> 05.4/09.311/09.224		✓	
School Safety Coordinator (SSC) training program developed by the Kentucky Center for School Safety (KCSS)	KRS 158.4412	05.4		✓	
School Principal training on procedures for completion of the required school security risk assessment.					
Fire drill procedure system.	KRS 158.162	05.41	✓		
Lockdown drill procedure system.	KRS 158.162 KRS 158.164	05.411	✓		
Severe Weather/Tornado drill procedure system.	KRS 158.162 KRS 158.163	05.42	✓		
Earthquake drill procedure system.	<del>KRS 158.162</del> KRS 158.163	05.47	✓		
First Aid and Cardiopulmonary Resuscitation (CPR) Training.	702 KAR 5:080	06.221		✓	
Annual in-service school bus driver training.	702 KAR 5:030	06.23		✓	
Designated training for School Nutrition Program Directors and food service personnel.	KRS 158.852 7 C.F.R. §210.31	07.1 07.16		✓	
Teachers of gifted/talented students required training on identifying and working with gifted/talented students. All other personnel working with gifted students shall be prepared through appropriate professional development to address the individual needs, interests, and abilities of the students.	704 KAR 3:285	08.132	✓		

**District Training Requirements**

TOPIC	LEGAL CITATION	RELATED POLICY	EMPLOYEES OR OTHERS AS DESIGNATED			DATE COMPLETED
			CERTIFIED	ALL	DESIGNATED	
KDE to provide training to address the characteristics and instructional needs of students at risk of school failure and most likely to drop out of school.	KRS 156.095	08.141	✓		✓	
Student training on appropriate online behavior on social networking sites and cyberbullying awareness and response.	47 U.S.C. 254/Children's Internet Protection Act; 47 C.F.R. 54.520	08.2323			✓	
Confidentiality of student record information.	34 C.F.R. 300.623	09.14		✓		
Student suicide prevention training: Minimum of one (1) hour in-person, live stream, or via video recording every year including the recognition of signs and symptoms of possible mental illness. New hires during off year to receive suicide prevention materials to review. [Employees with job duties requiring direct contact with students in grades six (6) through twelve (12).]	KRS 156.095; KRS 158.070	09.22			✓	
At least one (1) hour of self-study review of seizure disorder materials required for all principals, guidance counselors, and teachers by July 1, 2019, and for all principals, guidance counselors, and teachers hired after July 1, 2019.	KRS 158.070	09.22			✓	
Training for school personnel authorized to give medication.	KRS 158.838 KRS 156.502 702 KAR 1:160	09.22 09.224 09.2241			✓	
Training on employee reports of criminal activity.	KRS 158.148; KRS 158.154; KRS 158.155; KRS 158.156; KRS 620.030	09.2211		✓		
Personnel training on restraint and seclusion and positive behavioral supports.	704 KAR 7:160	09.2212		✓	✓	
Personnel training child abuse and neglect prevention, recognition, and reporting.	KRS 156.095	09.227	✓		✓	
Age appropriate training for students during the first month of school on behaviors prohibited/required reporting of harassment/discrimination.	34 C.F.R. 106.1-106.71, U.S. Department of Education Office for Civil Rights Guidance	09.42811			✓	

District Training Requirements

TOPIC	LEGAL CITATION	RELATED POLICY	EMPLOYEES OR OTHERS AS DESIGNATED			DATE COMPLETED
			CERTIFIED	ALL	DESIGNATED	
Training to build capacity of staff and administrators to deliver high-quality services and programming in the District's Alternative Education Program. Student discipline code.	704 KAR 19:002	09.4341			✓	
Intervention and response training on responding to instances of incivility.	KRS 158.148; KRS 158.156; KRS 158.444; KRS 525.070; KRS 525.080	09.438	✓			
Training for Supervisors of Student Teachers.		10.21	✓			
Career Tech – If funds available, High School teachers to receive training regarding embedding reading, math, and science in career tech courses.	16 KAR 5:040 KRS 158.818				✓	
Committee for Mathematics Achievement – training for teachers based on available funds.	KRS 158.832		✓			
KDE to provide or facilitate statewide training for teachers and administrators regarding content standards, integrating performance assessments, communication, and higher order thinking.	KRS 158.6453 (SB 1)		✓			
Grants regarding training for state-funded community education directors.	KRS 160.156				✓	
Local Board to develop and implement orientation program for adjunct instructors.	KRS 161.046				✓	
KDE shall provide technical assistance and training for multi-tiered system of supports upon District request.	KRS 158.305				✓	

**THIS IS NOT AN EXHAUSTIVE LIST – CONSULT OSHA/ADA AND BOARD POLICIES FOR OTHER TRAINING REQUIREMENTS.**

For training provided in person, participants should sign in at the end of the meeting to document their attendance. The sign-in sheet shall be maintained in paper or electronic format as required by the Kentucky Records Retention/Public School District Schedule.





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

03.223 AP.2

**Leave Request Form and ~~Statement~~Affidavit**

See updates made on Procedure 03.123 AP.2/Leave Request Form and ~~Statement~~Affidavit.

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~~ Automatic 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.

An automated external defibrillator (AED) is used to treat victims who experience sudden cardiac arrest (SCA). It is only to be applied to victims who are unconscious, not breathing normally and showing no signs of circulation, such as normal breathing, coughing and movement. The AED will analyze the heart rhythm and advise the operator if a shockable rhythm is detected. If a shockable rhythm is detected, the AED will charge to the appropriate energy level and advises the operator to deliver a shock.

#### **COORDINATOR OF DISTRICT-WIDE PROGRAMS**

Responsibilities:

- ◆ Supervision of Health Services
- ◆ Coordination of training for Authorized Users by school nurses
- ◆ Maintaining documentation of equipment checks and accessory maintenance
- ◆ Revision of this policy as required
- ◆ Monitoring the effectiveness of this system
- ◆ Communication with medical director on issues related to medical emergency response program to include post event summaries

#### **SCHOOL NURSES**

- ◆ Will provide CPR/AED Certification training and maintain a listing of currently certified staff
- ◆ Will perform and document a monthly system check of all AED. The monthly system check will include a check of the batteries for the AED cabinet's alarm
- ◆ Will perform cleaning and maintenance of units after use
- ◆ Will notify the building principal when a unit goes out of service and when a unit is returned to service
- ◆ Will download event data and provide it to the Medical Advisor for review

#### **MEDICAL ADVISOR**

The medical advisor of the AED program is <Physician Name>. The medical advisor of the AED program is responsible for:

- ◆ Providing medical direction for use of AEDs
- ◆

## Use of ~~Automated~~ Automatic External Defibrillators (AEDs)

### MEDICAL ADVISOR (CONTINUED)

- ◆ Writing a prescription for AEDs
- ◆ Reviewing and approving guidelines for emergency procedures related to use of AEDs and CPR
- ◆ Evaluation of post-event review forms and digital files downloaded from AED

### AUTHORIZED AED USERS/RESPONSIBILITIES

- ◆ All staff members who have successfully completed training
- ◆ Any trained person (volunteer responder) who has successfully completed an approved CPR+AED training program within the last two years and has a current successful course completion card
- ◆ Responding to an emergency event and providing aid to include CPR and use of the AED in accordance with training and experience
- ◆ Understanding and complying with the requirements of this policy

### VOLUNTEER RESPONDER RESPONSIBILITIES

Anyone can, at their discretion, provide voluntary assistance to victims of medical emergencies. The extent to which these individuals respond shall be appropriate to their training and experience. These responders are encouraged to contribute to emergency response only to the extent that they are comfortable. The emergency medical response of these individuals may include CPR, AED or medical first aid.

### ADMINISTRATIVE OFFICE

- ◆ Receiving emergency medical calls from internal locations
- ◆ Contacting the external community 911 response team (EMS) if required
- ◆ Deploying Authorized Users to the location of the emergency
- ◆ Assigning team members to meet the responding EMS vehicle to direct EMS personnel to the site of the emergency

### EQUIPMENT

The AED and first aid emergency care kit will be brought to all medical emergencies. The AED may be used on any person who is at least 1 year of age and displays ALL the symptoms of cardiac arrest. The AED will be placed only after the following symptoms are confirmed:

- ◆ Victim is unconscious
- ◆ Victim is not breathing
- ◆ Victim has no pulse and/or shows signs of circulation such as normal breathing, coughing or movement

If pediatric pads are not available, cardiopulmonary resuscitation (CPR) has been tried for a minute, and the child is over one (1) year old, regular adult pads may be used.

**Use of Automated Automatic External Defibrillators (AEDs)**

**LOCATION OF AEDS**

- ◆ \_\_\_\_\_
- ◆ \_\_\_\_\_
- ◆ \_\_\_\_\_
- ◆ \_\_\_\_\_
- ◆ \_\_\_\_\_
- ◆ \_\_\_\_\_

Each AED will have at least one (1) set of defibrillation electrodes. One resuscitation kit will be stored with the AED pads. This kit contains one pair of gloves, one razor, one pair scissors, one pre-moistened towelette, one dry towel, and one facemask barrier device.

**INITIAL TRAINING**

AUTHORIZED USERS:

Must complete training adequate to provide CPR and use of the AED. AED training course must be one approved by the state Department of Health. Authorized Users will also be trained in universal precautions against Bloodborne pathogens. The school nurse(s) shall maintain training records for Authorized Users.

VOLUNTEER RESPONDERS:

These responders will possess various amounts of training in emergency medical response and their training may be supplied by sources outside of the company. Volunteer responders can assist in emergencies, but must only participate to the extent allowed by their training and experience. Volunteer responders may have training adequate to administer first aid, CPR and use of the AEDs deployed throughout the campus. Any volunteer wishing to potentially use one of the AEDs deployed on campus should have successfully completed a state approved AED course including CPR within the last two years.

**REFRESHER TRAINING**

- ◆ Authorized Users will renew CPR and AED training every two years.
- ◆ Volunteer responders should obtain documented renewal training at least once every two years. Volunteer responders are encouraged to periodically refresh their AED skills.

**MEDICAL RESPONSE DOCUMENTATION**

Post Event Documentation:

- ◆ The *Event Summary Form* shall be completed post event by the Authorized User and submitted to the Coordinator of District-wide Programs.
- ◆ Data will be downloaded from the AED within 24 hours (weekdays) and a copy submitted to the Medical Director.

## Use of ~~Automated~~ Automatic External Defibrillators (AEDs)

### EQUIPMENT MAINTENANCE

All equipment and accessories necessary for support of medical emergency response shall be maintained in a state of readiness. Specific maintenance requirements include:

- ◆ The Principal shall be informed of changes in availability of emergency medical response equipment.
- ◆ If equipment is withdrawn from service, the Principal shall be informed and then notified when equipment is returned to service.
- ◆ The Principal shall be responsible for informing response teams of changes to availability of emergency medical equipment.
- ◆ The School Nurse shall be responsible for having regular equipment checks. All maintenance tasks shall be performed according to equipment maintenance procedures as outlined in the operating instructions.
- ◆ Following use of emergency response equipment, all equipment shall be cleaned and/or decontaminated as required. If contamination includes body fluids, the equipment shall be disinfected according to procedures.

### ANNUAL SYSTEM ASSESSMENT

Once each calendar year, the Coordinator of District-wide Programs or their designee shall conduct and document a system readiness review. This review shall include review of the following elements:

- ◆ Training records
- ◆ Equipment operation and maintenance records

### AED SYSTEM CHECK

The School Nurse will conduct a monthly systems check.

Once each calendar month, a systems check will be conducted and recorded. This will include:

- AED battery life
- AED operation & supplies
- Emergency kit supplies

### POST EVENT REVIEW

The Coordinator of District-wide Programs or their designee will review the *Event Summary Form* to ensure appropriate procedures were followed. If deemed necessary, the Coordinator of District-wide Programs may call a meeting to summarize the incident or implement critical incident debriefing. All staff involved in the incident will attend.

NOTE: If AED is not immediately available, perform CPR until AED arrives on the scene. Use of the AED is authorized for emergency response personnel trained in CPR and use of the AED.
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## Use of ~~Automated~~ Automatic External Defibrillators (AEDs)

### IN CASE OF AN EMERGENCY AT WOODFORD COUNTY SCHOOLS

- ◆ Assess scene for safety before approaching the patient.
- ◆ Follow universal personal precautions.
- ◆ Assess airway, breathing, and circulation. If there is no sign of circulation (normal breathing, coughing, or movement), obtain the AED and call 911.
- ◆ Perform CPR until the defibrillator is applied.
- ◆ Make certain that patient is dry and that s/he is not placed in close proximity to metal (aluminum bleachers, etc.).
- ◆ Turn on the AED – follow voice prompts.
- ◆ Stop CPR.
- ◆ Apply pads to patient's bare chest (it may be necessary to shave chest hair).
- ◆ Stand clear of victim while machine analyzes heart rhythm.

#### SHOCK ADVISED

- ◆ Clear area, making sure no one is touching the victim.
- ◆ Push the shock button when instructed. Device will analyze and shock up to three (3) times.
- ◆ After three (3) shocks, device will prompt to check pulse (or for breathing and movement) and if absent, start CPR. If pulse and/or signs of circulation such as normal breathing and movement are absent, perform CPR for one (1) minute. Device will countdown one (1) minute of CPR and will analyze when CPR is over.
- ◆ Continue to follow voice prompts until EMS arrives.

#### NO SHOCK ADVISED

- ◆ Device will prompt to check for pulse, breathing or movement. If absent, start CPR.
- ◆ If pulse and/or signs of circulation (normal breath, and movement) are absent perform CPR for one (1) minute.
- ◆ If pulse, signs of circulation are present, check for normal breathing. If victim is not breathing, give rescue breaths at a rate of 12 per minute. AED will re-analyze after one (1) minute.
- ◆ Continue cycles of analysis, shock (if advised), and CPR until professional help arrives. Victim must be transported to hospital.
- ◆ Leave AED attached to victim until EMS arrives and disconnects AED.
- ◆ Complete an *Event Summary Form*.
- ◆ AED data will be downloaded within 24 hours (weekdays), and a copy, along with the *Event Summary Form*, will be submitted to the Medical Director
- ◆ After use, the AED will be cleaned and stocked with new electrodes and resuscitation kit.

**Use of ~~Automated~~Automatic External Defibrillators (AEDs)**

**USE OF THE AED DURING EVENINGS, WEEKENDS, AND NON-SCHOOL DAY HOURS**

- ◆ Trained staff may not be available to assist in the event of an emergency.
- ◆ If an individual has been trained in CPR and the use of the AED, they may use the AED available in the building.
- ◆ Notify the Coordinator of District-wide Programs in the event that an AED is used by calling 873-2421 ext. 2223.
- ◆ The District assumes no liability for rendering of care or use of the AED after normal business/school hours.



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

S05.4 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

\_\_\_\_\_  
Superintendent/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

SCHOOL FACILITIES

05.4 AP.231

## **Automated External Defibrillator (AED) Forms**

### AED SITE INFORMATION FORM FOR EMS

**Submit this form to Superintendent/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:**

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**Were efforts terminated?**     Yes     No    If yes, please explain.

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**Signature of AED User** \_\_\_\_\_

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

**Automated External Defibrillator (AED) Forms**

AED SERIAL # _____
PAD EXPIRATION DATE _____

AED SITE/LOCATION: \_\_\_\_\_

SITE ADDRESS: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_

WORK HOURS (REGULAR HOURS): \_\_\_\_\_

NUMBER OF PEOPLE AT SITE EACH DAY: \_\_\_\_\_ AFTER HOURS \_\_\_\_\_

AED PROGRAM COORDINATOR: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

TYPE OF AEDS: \_\_\_\_\_

NUMBER OF AEDS: \_\_\_\_\_

LOCATION OF AEDS:

# 1 \_\_\_\_\_ # 2 \_\_\_\_\_

# 3 \_\_\_\_\_ # 4 \_\_\_\_\_

# 5 \_\_\_\_\_ # 6 \_\_\_\_\_

DATE AED PUT INTO SERVICE: \_\_\_\_\_

TRAINING PROGRAM: \_\_\_\_\_

NAME OF INSTRUCTOR: \_\_\_\_\_ TEL #: \_\_\_\_\_

NUMBER OF PEOPLE TRAINED: \_\_\_\_\_

DATE TRAINING COMPLETE: \_\_\_\_\_ RENEWAL DATE: \_\_\_\_\_

MEDICAL DIRECTOR: \_\_\_\_\_ TEL #: \_\_\_\_\_

LOCAL FIRE DEPT.: \_\_\_\_\_

**Automated External Defibrillator (AED) Forms**

EVENT SUMMARY FORM

LOCATION OF EVENT: \_\_\_\_\_

DATE OF EVENT: \_\_\_\_\_ TIME OF EVENT \_\_\_\_\_

**PATIENT/VICTIM** INFORMATION:

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

ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_

AGE: \_\_\_\_\_ GENDER: MALE: \_\_\_\_\_ FEMALE: \_\_\_\_\_

WITNESSED ARREST: YES: \_\_\_\_\_ NO: \_\_\_\_\_

Breathing upon arrival of designated responders: Yes  No

Pulse or signs of circulation upon arrival of designated responders: Yes  No

Was 911 activated? Yes  No

Total number of shocks: \_\_\_\_\_

DID VICTIM....

Regain a pulse? Yes  No

Resume breathing? Yes  No

Regain consciousness? Yes  No

Any complications? Yes  No

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

ADDITIONAL COMMENTS: \_\_\_\_\_

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

NAME OF TRAINED **AED USER-RESCUER**(S):

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

SIGNATURE OF PERSON COMPLETING FORM:

\_\_\_\_\_

**Woodford County Schools Automated External Defibrillator (AED) Notice**

Dear \_\_\_\_\_,

The Woodford County School District is committed to providing students, staff, and visitors with a safe environment. Automated External Defibrillators (AED's) have been placed in the District's school Facilities. Cabinets are alarmed but not locked. The alarm will stop when the door is closed.

We have trained staff available during regular school/business hours. However, please be advised that trained staff ***MAY NOT*** be available to assist in the event of an emergency. If someone with your group is certified in CPR and the use of the AED, please feel free to utilize our defibrillator. We encourage everyone to participate in our community effort to be cardiac safe.

If a medical emergency event occurs, please be advised to call 911 immediately. If you use the AED, please contact the Coordinator of Student Services at 873-4701 x224, so that we may replace any materials used in the resuscitation effort.

We would encourage everyone to learn CPR and how to use the AED. It could be the difference between life and death. For information on classes scheduled for our area, please call the Bluegrass Chapter of the American Red Cross at 859-253-1331.

Sincerely,

\_\_\_\_\_  
Superintendent  
Woodford County Schools

***I have read and understand the above.***

Signed: \_\_\_\_\_

Group \_\_\_\_\_

Signed: \_\_\_\_\_

Group \_\_\_\_\_

Any group using a school facility must complete this form and file it with the building principal.









EXPLANATION: HB 522 AMENDS KRS 45A.385 AND KRS 424.260 INCREASING THE AGGREGATE CONTRACT AMOUNT MAXIMUM FOR SMALL PURCHASE TO \$40,000.  
FINANCIAL IMPLICATIONS: LARGER AMOUNT FOR SMALL PURCHASE PROCEDURES

SUPPORT SERVICES

07.13 AP.1

### **Bidding of School Food Service Supplies**

#### **LIKE ITEMS IN EXCESS OF ~~\$30,000~~40,000**

If the total amount of purchases for like items is ~~\$30,000~~40,000 or more, formal bid procedures will be utilized. Food, food products, supplies, and equipment will be bid as follows:

Through or in accordance with a schedule determined by the Kentucky Procurement Coop (KPC) or local educational cooperative (CKEC)

#### **BID SPECIFICATIONS**

1. The bid specifications, including delivery and storage instructions, for all lunchroom/cafeteria supplies shall be prepared by the School Food Service/School Nutrition Program Director.
2. The request for bid shall be advertised in the local newspaper with the greatest circulation in the District.
3. Specifications and bid documents shall be mailed to all potential bidders.
4. Bids shall be opened and tabulated by the CKEC or KPC.

The bids shall be submitted to the CKEC or KPC for action.

#### **PERISHABLES**

Applicable federal law does not provide a bidding exception for perishable food items purchased with school food service funds. Perishables purchased using school food service funds shall be procured in accordance with 2 C.F.R. 200.320.

#### **EMERGENCY PURCHASES**

If it is necessary to make an emergency purchase in order to continue service, the purchase shall be made and a log of all such purchases shall be maintained and reviewed by the School Food Service/School Nutrition Program Director.

The log of emergency purchases shall include: item name, dollar amount, vendor, and reason for emergency.

#### **RECORDS MANAGEMENT**

The following records will be maintained for a period of three (3) years plus the current year:

1. CKEC or KPC Bid Documents
2. Logs of all emergency and noncompetitive purchases
3. Comparison of all price quotes and bids with the effective dates shown
4. Price comparison showing bid or quote awarded
5. Log of approval substitutions

**Bidding of School Food Service Supplies**

**BID DEVIATION FORM**

COMPANY ITEM PURCHASED FROM: \_\_\_\_\_

ITEM PURCHASED: \_\_\_\_\_

PRICE OF ITEM PURCHASED: \_\_\_\_\_

REASON FOR ITEM PURCHASED OFF BID: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SCHOOL: \_\_\_\_\_

MANAGER: \_\_\_\_\_

**RELATED PROCEDURE:**

04.32 AP.1

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

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

#### **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.

**“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 Signature Date

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.

=====

**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.

**“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 Signature Date

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: \_\_\_\_\_

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

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

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Board Chair’s Signature Date

EXPLANATION: REVISIONS TO 704 KAR 19:002 REQUIRE THE DISTRICT TO DEVELOP PROCEDURES FOR MONITORING THE ALTERNATIVE EDUCATION PROGRAM.  
FINANCIAL IMPLICATIONS: NONE ANTICIPATED

STUDENTS

09.4341 AP.11

## **Alternative Education**

### **MONITORING**

**The District shall provide for:**

1. **Regular, periodic monitoring of the alternative education program; and**
2. **Selecting, implementing, and monitoring the impact of professional learning designed to meet the needs of the teachers and students served by the alternative education program.**

## Visitors to the Schools

### REPORT TO FRONT OFFICE

As soon as practicable but no later than July 1, 2022, all visitors to the school are to report to the front office of the building, provide valid identification, and state the purpose of the visit. The school shall provide a visitor's badge to be visibly displayed on a visitor's outer garment.

### CLASSROOM VISITATION

Requests for classroom observation by parents, educators, or others 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.
4. All visitors must register on the visitor entry/exit log upon entering and exiting the school.

### LUNCH WITH FAMILY MEMBERS

Parents, guardians, grandparents, other immediate family members, **or others** as approved by the Principal/designee may request to have lunch with their child/grandchild. Otherwise, except for authorized District personnel, each school shall observe a closed campus at lunch.

### 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 by any outside public or private service provider.

The following information/documentation is required by the District before a private, outside therapist/service provider can observe its student/client within a District facility, with no direct interaction beyond a simple greeting with any student. Information/documentation must be sent in writing to the 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/Director of Pupil Personnel (DPP) (regular education students) not less than three (3) school days prior to the observation:

- Background check clearance on file with District Schools Central Office;
- Individual liability insurance certificate or worker's compensation insurance certificate;

## Visitors to the Schools

### OBSERVATION BY OUTSIDE AGENCIES (CONTINUED)

- 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.

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;
- All outside therapists/service providers will be restricted to specified locations on school property and not permitted open access to a school facility or grounds;-
- Outside therapists/service providers are not permitted to be alone with any child on District property, including their student/client, provided, however, if it has been determined by District personnel and approved by the Principal/designee a student would benefit from receiving services during the school day, an outside therapist/service provider may meet with a student in a reasonable manner appropriate to the situational needs of a student for a period not exceeding twenty (20) minutes;
- Due to privacy concerns, recording devices such as, but not limited to, cell phones, smartphones, tablets, and cameras, are not to be used to create video or audio recordings or to take pictures except with the prior permission of the Principal/designee and the parent/legal guardian of only the specified student who is the subject of the recording/picture;
- Observation notes by therapists/service providers cannot include identifying information concerning any student other than their designated student/client; and
- Any failure by a therapist/service provider to respect the privacy and confidentiality of other students, or any act by a therapist/service provider which violates this procedure, will result in a loss of future visitation privileges for that therapist/service provider/agency.



**CLASSIFIED PERSONNEL**

**Classified Personnel Evaluation**

(ALL CLASSIFIED PERSONNEL EXCEPT INSTRUCTIONAL ASSISTANTS)

EMPLOYEE'S NAME \_\_\_\_\_ SCHOOL YEAR \_\_\_\_\_

WORKSITE/SCHOOL \_\_\_\_\_ SUPERVISOR \_\_\_\_\_

**POSITION:**

- BUS DRIVER
- CUSTODIAN
- CLERICAL PERSONNEL
- OTHER, SPECIFY \_\_\_\_\_
- FOOD SERVICE EMPLOYEE
- MAINTENANCE PERSONNEL
- BUS MECHANIC

**EXPLANATION OF THE SCALE:**

SATISFACTORY (S)                      UNSATISFACTORY (U)  
 IMPROVEMENT NEEDED (IN)              NOT APPLICABLE (NA)

**JOB KNOWLEDGE:**

Evaluate skill/knowledge of the information, procedures, materials, equipment, techniques, etc., required for the position.

- (a) Has necessary skills to complete tasks required in current job.
- (b) Understands and completes all records, reports, and documents required.
- (c) Has working knowledge of equipment/material that is necessary for completion of assigned task.
- (d) Attends appropriate in-service programs.
- (e) Adheres to Board policies.

S	IN	U	NA

Comments: \_\_\_\_\_

**PRODUCTIVITY AND QUALITY OF WORK:**

Rate the completion, accuracy, timeliness, and volume of work.

- (a) Completes the required tasks.
- (b) Completes tasks accurately.
- (c) Completes tasks in a timely manner.
- (d) Uses proper safety measures when working.
- (e) Takes initiative in seeking and completing tasks without supervision.

S	IN	U	NA

Comments: \_\_\_\_\_

**Classified Personnel Evaluation**

(ALL CLASSIFIED PERSONNEL EXCEPT INSTRUCTIONAL ASSISTANTS)

**RESPONSIBILITY, DEPENDABILITY, AND ATTENDANCE:**

Consider efforts to ensure the successful completion of tasks, extra efforts made to meet work demands, attendance, dependability, and general assistance.

- (a) Uses discretion with confidential or privileged information.
- (b) Follows directions.
- (c) Uses good judgment in performing responsibilities.
- (d) Organizes work responsibilities and sets priorities.
- (e) Has a good attendance record.
- (f) Reports to work punctually.
- (g) Returns to work from break and/or lunch punctually.

S	IN	U	NA

Comments: \_\_\_\_\_  
\_\_\_\_\_

**INTERPERSONAL RELATIONS:**

Consider relationships with other employees, students, and the community, and willingness to perform required duties and to help others accomplish tasks.

- (a) Deals with students and parents in a positive, constructive manner.
- (b) Deals with colleagues and supervisors in a positive, constructive manner.
- (c) Cooperates in accomplishing school and District goals and objectives.
- (d) Handles problems in a constructive and fair manner.
- (e) Works through line/staff relationships when addressing problems.
- (f) Offers differing opinions in a constructive and helpful manner.
- (g) Demonstrates effective written and verbal communication skills.

S	IN	U	NA

Comments: \_\_\_\_\_  
\_\_\_\_\_

**SUMMARY**

Overall job performance on applicable items.

S	IN	U	NA

\_\_\_\_\_  
EVALUATEE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
EVALUATOR

\_\_\_\_\_  
DATE

**Evaluation for Classified Instructional Assistant**

(INSTRUCTIONAL ASSISTANTS ONLY)

EVALUATEE \_\_\_\_\_

DATE \_\_\_\_\_

EVALUATOR \_\_\_\_\_

SCHOOL \_\_\_\_\_

Standards Performance Criteria	(May check more than one rating)			Professional Growth/ Comments
	Met	Growth Needed	Not Met	
<b>Standard 1: Communicates Effectively</b>				
1.1 Communicates positively/effectively with students, co-workers, and others.				
1.2 Listens to others, showing an interest in and sensitivity to their ideas, answers and opinions.				
1.3 Speaks, communicates so others can understand.				
1.4 Displays awareness of space and proximity when communicating with others.				
1.5 Follows proper channels to address issues and problems.				
1.6 Prepares and maintains accurate, neat, and appropriate written reports and communication as requested/needed.				
1.7 Responds to others in a courteous and respectful manner.				
<b>Standard 2: Manages Time/Resources</b>				
2.1 Manages use of time and available resources property.				
2.2 Meets assigned time frames as stipulated.				
2.3 Assists supervisor and others in effective and efficient use and maintenance of materials/supplies/equipment/resources.				
2.4 Adapts behavior to accommodate changes in environment/student behaviors/climate/schedules, etc.				
2.5 Assists with and corrects situations that may be potentially or are dangerous to self, students, co-workers, and others.				
2.6 Corrects/manages student behaviors (when applicable) in a positive, effective manner.				
2.7 Follows directions in an appropriate, accurate, and timely manner.				
<b>Standard 3: Maintains Effective Interpersonal Skills</b>				
3.1 Acts and reacts to others in an effective and respectful manner.				
3.2 Displays respect when dealing with others.				
3.3 Shares pertinent information regarding students/others with appropriate school personnel.				
3.4 Operates as a "team" member to complete work assignments.				
3.5 Maintains appropriate confidentiality regarding students/co-workers/behaviors and performances.				
3.6 Displays supportive attitude toward students and co-workers.				

**Evaluation for Classified Instructional Assistant**

(INSTRUCTIONAL ASSISTANTS ONLY)

Standards Performance Criteria	(May check more than one rating)			Professional Growth/ Comments	
	Met	Growth Needed	Not Met		
<b>Standard 4: Exhibits Professionalism</b>					
4.1 Displays the language, behaviors, and attitudes appropriate to a school society					
4.2 Demonstrates a positive attitude toward acquiring knowledge and skills necessary to perform duties.					
4.3 Maintains a positive attitude toward school's/District's mission and goals.					
4.4 Participates in required school/District training.					
4.5 Seeks and completes professional growth activities to improve job performance.					
4.6 Chooses vocabulary and behaviors that are appropriate models for others.					
<b>Standard 5: Meets Job Expectations</b>					
5.1 Meets expectations and requirements of local school District job description.					
5.2 Follows school/District policies and procedures as specified.					
5.3 Adheres to District expectations/criteria outlined in job description of assigned duties.					
5.4 Maintains regular, punctual attendance and adheres to work schedule.					
5.5 Follows school/District/State safety, health, and operating rules/regulations.					
5.6 Performs other assignments consistent with contract/job description.					

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
EVALUATEE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
EVALUATOR

\_\_\_\_\_  
DATE



**Evaluation for Classified Instructional Assistant**  
**FAMILY RESOURCE YOUTH SERVICES CENTER (FRYSC) EVALUATION**  
**SUMMATIVE CONFERENCE FORM**

**Center Coordinator** \_\_\_\_\_ **Date of Conference** \_\_\_\_\_

**Center Name** \_\_\_\_\_

**Supervisor** \_\_\_\_\_ **Position** \_\_\_\_\_

<u>CENTER SITE</u>	<u>Meets</u>	<u>Meets With Growth Needed</u>	<u>Does Not Meet Growth Needed</u>	<u>N/A</u>	<u>Activities Discussed</u>
1. The center's hours of operation posted.					
2. The center has a designated place or way to interview participants so that the conversation remains confidential or not easily overheard.					
3. The center provides a safe, "family friendly" environment in which the staff can work and/or provide services.					
4. The center has an updated, accurate flyer.					
5. The center has an updated webpage and calendar that can be accessed by parents and the community.					
6. The center is clean, well maintained, and organized to provide a professional and family environment.					
<u>ADVISORY COUNCIL</u>	<u>Meets</u>	<u>Meets With Growth Needed</u>	<u>Does Not Meet Growth Needed</u>	<u>N/A</u>	<u>Activities Discussed</u>
1. The advisory council meets every other month. (Regular meeting dates are set at the beginning of the year, excluding June and July.)					
2. All members are to be notified and minutes recorded.					
3. The role of the advisory council during meetings is to provide input, oversight and commendations with regard to planning development, implementation and coordination of services programs, activities and finances. During the advisory council meetings, members review the following information: a. Status of action plan implementation b. Financial status, including budget balance					
4. There is regular communication between the SBDM and the FRYSC. (FRYSC should be on the SBDM Agenda once every school year during the CPP Cycle.)					
5. The center coordinator and advisory council demonstrates a good working relationship.					
<u>ADMINISTRATION</u>	<u>Meets</u>	<u>Meets With Growth Needed</u>	<u>Does Not Meet Growth Needed</u>	<u>N/A</u>	<u>Activities Discussed</u>
1. The center coordinator has a copy of the following items: a. Approved Continuation Program Plan and amendments b. Contract c. Administrator's Guidebook d. Job description					
2. The center coordinator has documentation of involvement with the Comprehensive School Improvement Plan (CSIP) and the District Comprehensive School Improvement Plan (CDIP).					
3. The center coordinator serves on district level committees					
4. The center coordinator engages school, district, and community partners in planning and conducting events.					
5. The center coordinator maintains good communication with building administration through written, oral, and face-to-face communication.					
6. The center coordinator submits the following monthly: Infinite Campus entries; and budget amendments/reports and Advisory Council minutes within FRYSC Counts.					

**Evaluation for Classified Instructional Assistant**

<u>RECORD KEEPING</u>	<u>Meets</u>	<u>Meets With Growth Needed</u>	<u>Does Not Meet Growth Needed</u>	<u>N/A</u>	<u>Activities Discussed</u>
1. The center coordinator has a current needs assessment with appropriate questions.					
2. The assessment includes a process for identifying those families most in need of services.					
3. Each activity is outlined on a FRYSC Large Group Activity Form with participant sign in sheets.					
4. The center coordinator maintains a Daily Contact Log.					
5. The center coordinator maintains documentation of services for accountability to the district and Cabinet for Health and Family Services through Infinite Campus and DFRYSC data system.					
6. The center coordinator maintains an inventory of FRYSC and district equipment and resources located in the FRYSC Center.					
7. The center coordinator requires that records in the computer and /or file cabinets be secured and confidential.					
1. The student/family records contain the following items: a. Participant information b. Parental/guardian consent to participate forms c. Confidentiality and/or consent to case conference forms					
8. Service activity and referrals					
9. The center coordinator maintains confidentiality.					
<u>PERSONAL AND PROFESSIONAL QUALITIES</u>	<u>Meets</u>	<u>Meets With Growth Needed</u>	<u>Does Not Meet Growth Needed</u>	<u>N/A</u>	<u>Activities Discussed</u>
1. The center coordinator is punctual and has regular attendance					
2. The center coordinator maintains a neat and professional appearance.					
3. The center coordinator show enthusiasm for job (prepared to work).					
4. The center coordinator is punctual for all assignments.					
5. The center coordinator accepts constructive criticism.					
6. The center coordinator exhibits good work habits					
7. The center coordinator interacts with staff members effectively.					
8. The center coordinator models appropriate behavior patterns.					
9. The center coordinator follows policy of the school, district, & state.					
10. The center coordinator completes records, reports, inventories, and requisitions in an accurate and timely manner.					
11. The center coordinator performs professional responsibilities and duties as outlined by the center's work plan and as requested by district/building administrators (as they conform to FRYSC's mission of removing barriers to learning).					
12. The center coordinator upgrades own professional knowledge and skills through readings, workshops, training sessions, and conferences.					
13. The center coordinator demonstrates professionalism					
<u>BUDGET</u>	<u>Meets</u>	<u>Meets With Growth Needed</u>	<u>Does Not Meet Growth Needed</u>	<u>N/A</u>	<u>Activities Discussed</u>
1. The center coordinator keeps an updated balance of grant fund expenditures. The center coordinator keeps monthly detailed MUNIS reports on file.					
2. The center coordinator keeps records of grant fund balance; these match the districts' ledger.					
3. The center coordinator turns in a current inventory to the district each fiscal year.					
4. The advisory council, District Contact and Regional Program Manager approve non-expendables over \$500.00, expendables and subcontracts over \$1,000.00.					
5. The advisory council, District Contact and Regional Program Manager approves all single purchases \$500.00 and over.					
6. The center coordinator supervises the requisition, inventory, and distribution of supplies and materials necessary for the operation of the center.					
7. The center coordinator writes grants to supplement the center budget to provide services for students and families.					

### Evaluation for Classified Instructional Assistant

<u>SCHOOL ENVIRONMENT</u>	<u>Meets</u>	<u>Meets With Growth Needed</u>	<u>Does Not Meet Growth Needed</u>	<u>N/A</u>	<u>Activities Discussed</u>
1. <u>The center coordinator demonstrates a timely and positive customer service.</u>					
2. <u>The center coordinator acts as a resource person to students.</u>					
3. <u>The center coordinator acts as a resource person to school staff.</u>					
4. <u>The center coordinator makes all students aware of all services provided by the center.</u>					
5. <u>The center coordinator provides the correct documentation for attendance (i.e. sign – in and sign-out sheets in the school office, emails to staff if absent or out of center office, calendar of work days, etc.) This documentation is completed in the appropriate amount of time.</u>					
6. <u>The center coordinator maintains confidentiality.</u>					
7. <u>The center coordinator demonstrates a good working relationship with the school principal and school staff.</u>					
8. <u>The center coordinator collaborates with school personnel to identify students in need of services by collaborating with other agencies.</u>					
9. <u>The center coordinator assists students and/or families in obtaining appropriate community resources.</u>					
10. <u>The center coordinator demonstrates a positive and caring attitude and behavior.</u>					
11. <u>The center coordinator exhibits a positive and professional attitude toward staff, students, parents, and community members.</u>					
12. <u>The center coordinator collaborates with appropriate agencies to provide services for students, parents, families, the school, and the community.</u>					
13. <u>The center coordinator establishes and follows defined on-site hours for the center and informs principal and/or school personnel of necessary meetings and activities scheduled outside the center.</u>					
<u>MEETINGS/PLANS/NEEDS ASSESSMENT/MISCELLANEOUS</u>	<u>Meets</u>	<u>Meets With Growth Needed</u>	<u>Does Not Meet Growth Needed</u>	<u>N/A</u>	<u>Activities Discussed</u>
1. <u>The center coordinator attends district meetings regularly.</u>					
2. <u>The center coordinator attends regional meetings regularly. (This depends on how many meetings the Regional Program Manager schedules;</u>					
3. <u>The center coordinator attends state, district, and/or regional-mandated trainings</u>					
4. <u>The center coordinator has the current Program Plan-Implementation and Result (I &amp; R) report approved on the Advisory Council Meeting agenda as an informational item once annually. The center coordinator has the grant application approved on the SBDM council meeting agenda prior to the Board of Education agenda in accordance with CPP cycle (every two years).</u>					
5. <u>The center coordinator develops, implements, and evaluates yearly a plan which includes goals and objectives for the Family Resource and Youth Service Center.</u>					
6. <u>The center coordinator conducts a needs assessment as a part of the program planning process.</u>					
7. <u>The center coordinator interprets and carries out the Policies established by the Board of Education, the Kentucky State Board of Education, the Kentucky Revised Statutes and the Kentucky Administrative Regulations, and Federal law.</u>					



**Evaluation for Classified Instructional Assistant**

Overall does the employee meet the designated performance standards?  Yes  No

Would you recommend this employee for re-employment?  Yes  No

Comment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Growth and Development: Activities in which the employee has participated which could increase job effectiveness. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Improvement in the areas noted on this evaluation can be achieved by the following: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**This review has been discussed with the employee who has been given a copy. Signatures acknowledge completion of the evaluation and not necessarily agreement.**

\_\_\_\_\_  
**Employee's Signature**                      **Date**                      **Supervisor's Signature:**                      **Date**

Employee's Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**RELATED PROCEDURE:**

03.28 AP.22

### Agreement for Use of School Facilities

This Agreement, made and entered into this, the \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_, by and between the WOODFORD COUNTY BOARD OF EDUCATION, hereinafter referred to as Lessor and \_\_\_\_\_ Hereinafter referred to as Lessee;

#### WITNESSETH:

It is mutually agreed by and between Lessor and Lessee as follows:

1. The Lessor hereby leases unto Lessee the following portions and no other of the premises known as the (building and locations) \_\_\_\_\_ together with the usual entrances and exits for the following dates and times: \_\_\_\_\_ for the following purpose and no other: \_\_\_\_\_.
2. The Lessee agrees to pay Lessor in consideration for the use of the said facilities, the sum of \$\_\_\_\_\_ in addition to any other sums to be paid to Lessor pursuant to subsequent sections of this Agreement. The Lessee shall pay to Lessor, upon execution of this Agreement, a deposit in the amount of \$\_\_\_\_\_. All remaining indebtedness shall be paid upon rendition of Lessor's invoice(s).
3. Neither the entire premises nor any part thereof may be sublet, nor may this Lease Agreement be assigned.
4. Lessor reserves the right to assign priorities among Lessees and to cancel this Lease Agreement with Lessee in favor of leasing the premises to another Lessee. If cancellation is made by Lessor, Lessee will be notified as soon as practicable and be refunded its deposit. Lessee hereby waives any and all claims for damages or loss of profit or other compensation which might arise out of such cancellation.
5. Lessee shall, and shall cause its servants, agents, employees, licensees, patrons, and guests, to abide by any rules and regulations adopted by Lessor for the use, occupancy and operation of said premises. Such rules and regulations may be changed from time to time.
6. No activities in violation of Federal, State or Local Laws shall be permitted on the premises, and it shall be the responsibility of the Lessee to enforce this provision. Lessee agrees to abide and be bound by the decision of the Lessor, or its representatives, should any questions arise under this paragraph.
7. No use of any tobacco products, alternative nicotine products or vapor products as defined in [KRS 438.305](#) shall occur within the building or on school-owned property.
8. Lessee agrees to collect, where required by law, and to pay and deliver over to the proper governmental agency, any and all licenses, fees, permits, and taxes required to be issued or paid in connection with Lessee's use of said premises, sale of tickets, and performance(s), by any Federal, State, County, or Municipal law or regulation, all such collections and payments to be in addition to the rents herein provided, and to hold Lessor harmless therefrom, including any and all costs, penalties, interest, and expenses pertaining thereto.

**Agreement for Use of School Facilities**

9. Lessee hereby agrees that it will not sell or dispose of, or permit to be sold or disposed of, tickets in excess of the seating capacity.
10. No portion of any passageway or exitway shall be blocked or obstructed in any manner whatsoever, and no exit door or any exitway shall be locked, blocked or bolted while the facility is in use. Moreover, all designated exitways shall be maintained in such manner as to be visible at all times.
11. Lessee agrees not to bring onto the leased premises any materials, substances, equipment, or object which is likely to endanger the life of, or to cause bodily injury to, any persons on the premises or which is likely to constitute a hazard to property thereon without the prior approval of Lessor. Lessor shall have the right to refuse to allow any such materials, substances, equipment, or object to be brought onto said premises and further the right to require its immediate removal therefrom if found thereon. Lessee agrees that all of its property and the property of others brought in or near the premises shall be at the risk of Lessee and that Lessor shall not be liable to Lessee or others, for any loss or damage to any such property no matter how any such loss or damage may be caused.
12. Should Lessee present or allow the presentation of any composition, work, or material covered by copyright, Lessee shall furnish to Lessor, prior to any performance, evidence that is satisfactory to Lessor that any royalty or other charge had been paid. Lessee agrees to indemnify and save harmless the Lessor for any loss, damage, or expense arising from any claim or judgment of infringement of such copyright.
13. Lessor agrees to furnish Lessee the premises "as is", together with heat, water, light, and ventilation. Any services requested by Lessee to be performed by Lessor or its agents shall be charged to Lessee at the rates established to fully reimburse the Lessor for its costs.
14. Advertisements or solicitations of funds in or about the building are prohibited.
15. Lessee shall be responsible for any and all damage to the premises and to Lessor's property caused by the acts of Lessee or Lessee's agents, servants, employees, patrons, or guests, whether accidental or otherwise; and Lessee further agrees to leave the premises in the same condition as existed on the date that possession thereof commenced, and Lessee agrees to pay Lessor upon demand, such sums as shall be necessary to restore said premises to their present condition, ordinary use and wear thereof excepted.
16. Lessee acknowledges that the leased premises shall at all times be under the control of Lessor. Duly authorized representatives of Lessor may enter the premises at any time and on any occasion without restrictions whatsoever.

**Agreement for Use of School Facilities**

17. In the event the premises are destroyed or damaged by fire or other elements, or by civil commotion, or should any part of the premises be made impractical for use by any cause, Lessor may, at its discretion terminate and void this Agreement. If such termination occurs before the lease period begins, Lessor will refund to Lessee any deposit theretofore paid by Lessee after deducting from such deposit, any expense incurred to that time by Lessor in connection with this Agreement. In the event such termination occurs during the term of this lease, Lessee will pay to Lessor a prorated portion of the consideration plus any expenses incurred by Lessor to that time, in connection with this Agreement; and Lessor will refund any part of the consideration already paid by Lessee that exceeds such amount. In the event of termination, Lessee hereby waives any and all claims for damages or loss of profit, or other compensation which might arise out of such termination.
18. As an additional consideration for this Lease Agreement for use of the premises, Lessee agrees to provide comprehensive public liability insurance issued by a company licensed to do business in the Commonwealth of Kentucky insuring both Lessee and Lessor, with policy limits of \$1,000,000.00 combined single limit, including broad form comprehensive general liability to insure against all claims or damages arising out the event that is the subject of this Agreement. Lessee agrees to deliver a certificate of insurance reflecting the coverage seven days before the date first mentioned above. The insurance hereby required to be maintained by the Lessee will be in full force and effective throughout this lease.
19. Notwithstanding any other provision of this Agreement, if Lessee violates any of the terms, conditions, or covenants provided herein, such violations shall work as a forfeiture of all monies previously paid to Lessor, the same to be treated as liquidated damages, and no portion shall be returned to Lessee. Lessor shall, in addition, be entitled to any other sums to which it may be entitled to under this Agreement. Upon any violation, Lessor shall also have the right to terminate this Agreement if it elects to do so.
20. Lessee agrees to indemnify and hold Lessor and each of its agents, employee, officers, directors, trustees and affiliates, in either their individual or official capacities, harmless against all loss and expense which may result in any way from any accident, injury or damage, either to person or property arising from the purpose of the lease set out herein or any other cause that arises from this Agreement, except as may result from willful or intentional misconduct of Lessor and its agents, employees, officers, directors, trustees and affiliates.
21. Lessee acknowledges that approval of this request does not signify District sponsorship, endorsement or approval of your organization or the activity.

**Agreement for Use of School Facilities**

Lessee hereby full releases, discharges and absolves from liability, on behalf of itself and its assigns and successors, the following: the Woodford County Board of Education and each of their agents, employees, officers, directors, trustees, and affiliates, in either their individual or official capacities from any and all claims, agreements, contracts, covenants, actions, suits, causes of action, damages, costs, expenses, attorneys' fees, judgments, and liabilities of whatsoever kind of nature in law, equity, or otherwise whether now known or unknown, suspected or unsuspected, which Lessee may hold or which Lessee may hold or which Lessee may in the future hold as against the Woodford County Board of Education or the other persons or entities named above and which arise out of or may in any way be connected with this Agreement, except if such results from willful or intentional misconduct of Lessor and its agents, employees, officers, directors, trustees and affiliates.

IN WITNESS THEREOF, this Agreement has been executed by the duly authorized representatives of Lessor and Lessee, all as of the date first above written.

LESSOR:

BY: \_\_\_\_\_  
Building Administrator

BY: \_\_\_\_\_  
For Woodford County Board of Education

LESSEE:

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

Rental fees shall be as follows (minimum charge of two hours):

Gymnasium/Cafeteria	<del>\$20.00/hour</del> <b>\$50.00/hour</b>
Classroom	<del>\$15.00/hour</del> <b>\$45.00/hour</b>
Custodian/Supervision Fees	Employee's Hourly Wage <b>Included in rental fee</b>

Groups that rent the building on a continuous basis will pay a fee set by the Superintendent or designee.

**Agreement for Use of School Facilities**

**AED NOTICE**

Dear \_\_\_\_\_,

The Woodford County School District is committed to providing students, staff, and visitors with a safe environment. Automated External Defibrillators (AED's) have been placed in the District's school Facilities. Cabinets are alarmed but not locked. The alarm will stop when the door is closed.

We have trained staff available during regular school/business hours. However, please be advised that trained staff ***MAY NOT*** be available to assist in the event of an emergency. If someone with your group is certified in CPR and the use of the AED, please feel free to utilize our defibrillator. We encourage everyone to participate in our community effort to be cardiac safe.

If a medical emergency event occurs, please be advised to call 911 immediately. If you use the AED, please contact the Coordinator of Student Services at 879-4600 ext. 2110, so that we may replace any materials used in the resuscitation effort.

We would encourage everyone to learn CPR and how to use the AED. It could be the difference between life and death. For information on classes scheduled for our area, please call the Bluegrass Chapter of the American Red Cross at 859-253-1331.

Sincerely,

Superintendent,  
Woodford County Schools

***I have read and understand the above.***

Signed: \_\_\_\_\_

Group: \_\_\_\_\_

Review/Revised:6/27/2016

## Purchasing

### GENERAL INFORMATION

1. A purchase order is required for **ALL** purchases.
2. Purchases are to be made **after** the receipt of an approved purchase order. The invoice date cannot be prior to the purchase order date. Generally purchase orders are processed within one (1) – two (2) days. Please plan accordingly.
3. Purchase orders are to include detailed information on the items/services being purchased, including complete description, unit cost, extended cost and any associate shipping/handling charges. **If estimated unit cost are used, an additional approval is required if actual cost exceeds 10% of Purchase Order price.**
4. Purchases must comply with the Model Procurement Code ([KRS 45A. 345-45A.460](#)).
5. Effective July 1, 2012, non-technology items costing \$1,000 **\$5,000** or more will be tracked as fixed assets for purposes of complying with reporting standards established by GASB 34. Technology items costing \$5000 or more will be tracked as fixed assets. Items designated as fixed assets must be labeled and inventoried before being placed into service.
6. A completed W-9 form is required of vendors prior to adding them to our vendor list or issuing payment.

### REQUISITION INSTRUCTIONS

1. Requisition is entered into MUNIS. After approval by the Financial Services, the Requisition is submitted to the Principal for approval.
2. Financial Services reviews Requisition for Model Procurement compliance, account coding, sufficient detail, budget appropriation, bid references, fixed asset status, etc.
3. If the Requisition is for any grant fund, it will be forwarded to the appropriate grant director for approval.
4. If the Requisition is for \$3000 or more, it will be forwarded to the Superintendent for approval.
5. Approved Requisition is converted to purchase order that is distributed back to the school/department for ordering/purchasing.
6. All orders for the current fiscal year must be entered and released as a MUNIS requisition prior to April 15.

### PURCHASE ORDER INSTRUCTIONS

1. Purchase orders may be entered directly into MUNIS by a user with purchase order entry access, which only include Food Services, Transportation, District Maintenance, and Emergency Purchases (which must be approved by the Superintendent).
2. Financial Services reviews all purchase orders for Model Procurement compliance, account coding, sufficient detail, budget appropriation, bid references, technology commodity codes, fixed asset status, etc.
3. Approved purchase orders are printed and distributed back to Principals or program coordinators/department heads for ordering.

## Purchasing

### RECEIVING INSTRUCTIONS

1. Merchandise received and/or shortages should be confirmed by receiver's notations and signature on the packing slip. In the absence of a packing slip, these notations must be made on ~~the gold~~ a copy of the purchase order, signed by the receiver.
2. After review by the Principal/coordinator/department head, the packing slip and ~~gold~~ copy of the purchase order are to be promptly forwarded to the Financial Services for payment. Approval should be indicated by the signature of the Principal/coordinator/department head on the ~~gold~~ copy of the purchase order

Review/Revised:6/27/2016



### School Staffing Procedures

CERTIFIED STAFFING - ELEMENTARY 2 - 2
---------------------------------------

1. In keeping with applicable Kentucky statutes and administrative regulations and availability of funds, provide each elementary school with an allocation for full-time personnel as follows:

- 
- Principal
- Guidance Counselor
- Media Specialist
- Physical Education Teacher
- Art Teacher
- Music Teacher
- Curriculum Specialists

2.

\* Elementary schools with an enrollment of 500 or more will be allocated an additional counselor/social worker position.

3. Do not include staffing units for special programs such as special education, Title I, or preschool. (Each of these areas will be assigned staff based on other criteria.)

The formula will use the following guidelines:

- 
- K and P1 enrollment divided by 23
- P2 and P3 enrollment divided by 23
- Grade 4 enrollment divided by 27
- Grade 5 enrollment divided by 28

Each school will be given a tentative staffing allocation by March 1 based on projected enrollment and a final staffing allocation for the next school year by May 1. The final staffing allocation will be maintained, increased, or reduced based on the fifth day of school enrollment.

CLASSIFIED STAFFING - ELEMENTARY 2 - 2
--

The elementary level will be provided with the positions indicated below. Additional positions are the decisions of the council.

Kindergarten aides

0-12 Students	.5	61-72 Students	3.0
13-24 Students	1.0	73-84 Students	3.5
25-36 Students	1.5	85-96 Students	4.0
37-48 Students	2.0	97-108 Students	4.5
49-60 Students	2.5	109-120 Students	5.0

Primary aides

0-7 Teachers	1.0
8-13 Teachers	1.5
14 or more Teachers	2.0

Secretary 1.0

Bookkeeper 1.0

Custodians 1.0 (rounded up to the nearest whole number) per every 20,000 square

feet of building space

Additional Positions 1.0 per every 300 students

The positions included in this additional funding may be:

- Instructional Assistants
- Library Clerks
- Attendance Clerks
- Volunteer Aide Coordinators
- Safe Room Monitors
- Laboratory Aides
- Day Care Workers
- Satellite Facilitators
- Computer Technology Aides
- Computer Operator
- Office Aides
- Additional Custodial and Secretarial Help
- Bookkeepers

Round to the nearest one-half position.

### School Staffing Procedures

CERTIFIED STAFFING - MIDDLE SCHOOL 2 - 2
--

1. In keeping with applicable Kentucky statutes and administrative regulations and availability of funds, provide the middle school with an allocation for full-time personnel as follows:
  - 1 Principal
  - 2 Assistant Principals
  - 2 Guidance Counselors
  - 1 Media Specialist
  - 7 Rotational Teachers

\* To meet student needs, a District-wide counselor/social worker will be allocated to be shared by the middle and high schools.
2. Do not include staffing units for special programs such as special education, Title I, or preschool. (Each of these areas will be assigned staff based on other criteria.)

The formula will use the following guidelines:

- 6<sup>th</sup> grade enrollment divided by 27
- 7<sup>th</sup> grade enrollment divided by 27
- 8<sup>th</sup> grade enrollment divided by 27

Each school will be given a tentative staffing allocation by March 1 based on projected enrollment and a final staffing allocation for the next school year by May 1. The final staffing allocation will be maintained, increased, or reduced based on the fifth day of school enrollment.

CLASSIFIED STAFFING - MIDDLE SCHOOL 2 - 2
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The middle school level will be provided with the positions indicated below. Additional positions are the decisions of the council.

- |   |   |
|---|---|
| <input type="checkbox"/> Secretary            | 1.0   |
| <input type="checkbox"/> Bookkeeper           | 1.0   |
| <input type="checkbox"/> Custodians           | 1.0 (rounded up to the nearest whole number) per every 20,000 square feet of building space |
| <input type="checkbox"/> Additional Positions | 1.0 per every 300 students  |

The positions included in this additional funding may be:

- |  |  |
|--|--|
| <input type="checkbox"/> Instructional Assistants    | <input type="checkbox"/> Satellite Facilitators                    |
| <input type="checkbox"/> Library Clerks              | <input type="checkbox"/> Computer Technology Aides                 |
| <input type="checkbox"/> Attendance Clerks           | <input type="checkbox"/> Computer Operator                         |
| <input type="checkbox"/> Volunteer Aide Coordinators | <input type="checkbox"/> Office Aides                              |
| <input type="checkbox"/> Safe Room Monitors          | <input type="checkbox"/> Additional Custodial and Secretarial Help |
| <input type="checkbox"/> Laboratory Aides            | <input type="checkbox"/> Bookkeepers                               |
| <input type="checkbox"/> Day Care Workers            |  |

Round to the nearest one-half position.

### School Staffing Procedures

CERTIFIED STAFFING - HIGH SCHOOL 2 \_\_\_\_ - 2 \_\_\_\_

1. In keeping with applicable Kentucky statutes and administrative regulations and availability of funds, provide the high school staff with an allocation for full-time personnel as follows:
  - Principal
  - 2.5 Assistant Principals
  - 4 Counselors
  - 1 Media Specialist

\* To meet student needs a District-wide counselor/social worker will be allocated to be shared by the middle and high schools.
2. Do not include staffing units for special programs such as special education, Title I, or preschool. (Each of these areas will be assigned staff based on other criteria.)

The formula will use the following guideline:

- 1 teacher for every 22 students\*

\* Adjustment will be made for dropout rate based on ½ the previous year’s average.

Each school will be given a tentative staffing allocation by March 1 based on projected enrollment and a final staffing allocation for the next school year by May 1. The final staffing allocation will be maintained, increased, or reduced based on the fifth day of school enrollment.

CLASSIFIED STAFFING - HIGH SCHOOL 2 \_\_\_\_ - 2 \_\_\_\_

The high school level will be provided with the positions indicated below. Additional positions are the decisions of the council.

- |   |   |
|---|---|
| <input type="checkbox"/> Secretary            | 1.0   |
| <input type="checkbox"/> Bookkeeper           | 1.0   |
| <input type="checkbox"/> Custodians           | 1.0 (rounded up to the nearest whole number) per every 20,000 square feet of building space |
| <input type="checkbox"/> Additional Positions | 1.0 per every 250 students  |

The positions included in this additional funding may be:

- |  |  |
|--|--|
| <input type="checkbox"/> Instructional Assistants    | <input type="checkbox"/> Computer Operator                         |
| <input type="checkbox"/> Library Clerks              | <input type="checkbox"/> Office Aides                              |
| <input type="checkbox"/> Attendance Clerks           | <input type="checkbox"/> Additional Custodial and Secretarial Help |
| <input type="checkbox"/> Volunteer Aide Coordinators | <input type="checkbox"/> Bookkeepers                               |
| <input type="checkbox"/> Safe Room Monitors          |  |
| <input type="checkbox"/> Laboratory Aides            |  |
| <input type="checkbox"/> Day Care Workers            |  |
| <input type="checkbox"/> Satellite Facilitators      |  |
| <input type="checkbox"/> Computer Technology Aides   |  |

Round to the nearest one-half position.

Review/Revised:6/12/2017