

**SPENCER COUNTY PUBLIC SCHOOLS**  
**Board of Education Agenda Item**

Meeting Date 6/26/2023

Topic/Title \_\_\_\_\_

Maternity Leave

Presenter(s) \_\_\_\_\_

**Type of Information/Board Action**

- ☐ Information only. No Board action required.
- ☐ Action requested at a future meeting: Click or tap to enter a date.
- ☒ **Consent agenda for approval at this meeting.**
- ☐ Action requested at this meeting.

**Board review is a result of:**

- ☐ State or federal law or regulation.
- ☐ Board of Education policy.
- ☐ Past practice.
- ☐ Other: \_\_\_\_\_

**Previous Review, Discussion, or Action**

- ☐ No previous Board review, discussion, or action.
- ☐ Previous review/action on: Click or tap to enter a date.

Action: Click or tap here to enter text.

**Background/Summary of Presented Information**

Maternity leave request for Ashley Browning.

**Financial Considerations**

- ☐ There is NO financial impact on resources.
- ☐ There is a financial impact on Board resources. Chief Financial Officer must review.

Click or tap here to enter text. Chief Financial Officer's initials, if required

**Superintendent's Recommendation**

- ☐ Recommend approval as presented.

Recommend based on -

Policy 03.1233 – Certified Personnel – Maternity Leave

Paid Sick Leave - An employee may use up to thirty (30) days of sick leave immediately following the birth or adoption of a child or children. Additional sick leave days may be used when the need is verified by a physician's statement.

Unpaid Maternity Leave - On written request, the parent of a newborn or the employee who adopts a child or children shall be granted unpaid leave of absence not to exceed the remainder of the school year. Thereafter, leave may be extended in increments of one (1) year.

**Maternity/Adoption/Childrearing Leave Request**

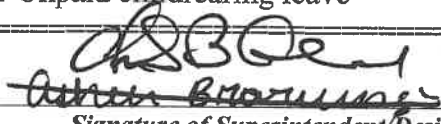
THIS AFFIDAVIT IS ESSENTIAL FOR PAYROLL PURPOSES. PLEASE COMPLETE THE FORM WITH CARE AND RETURN IT AS DIRECTED BY THE PRINCIPAL/DESIGNEE.

**MATERNITY/ADOPTION/CHILDREARING LEAVE: GRANTED UNDER THE TERMS OF POLICY 03.1233.**

Estimated dates of leave: 9/2/2023 to \*min 10/23/2023 - max 11/27/2023

Check one:

- ☒ Paid maternity leave. Number of sick leave days 10 days  
☒ Unpaid maternity leave  
☐ Paid birth or adoption leave, not to exceed thirty (30) days. Number of sick leave days: \_\_\_\_\_  
☐ Unpaid childrearing leave

  
Signature of Superintendent/Designee

6/1/23  
5/30/2023  
Date

  
Employee's Signature

5/30/2023  
Date

Review/Revised:5/18/1998