

EAST BUCHANAN COMMUNITY SCHOOL DISTRICT
AGENDA - Regular School Board Meeting
January 12, 2022 at 5:00 p.m. in Library - Middle School Entrance

1. Call To Order/Mission Statement - To challenge students to think critically, communicate effectively, develop values and contribute to society.
2. Public Forum - During this time we welcome interested persons who may wish to present comments, suggestions, or concerns in regard to any programs operated by the school district. However, an item must be included on the Agenda before the Board can officially act upon it.
3. Approve Agenda
4. Approve Consent Agenda
 - a. Minutes from Regular Meeting on December 8, 2021
 - b. Minutes from Special Meeting on January 7, 2022
 - c. Minutes from Special Meeting on January 10, 2022
 - d. Personnel Changes
 - e. Inter-agency Agreements
 - f. Early Graduation Requests
 - g. List of Bills
 - h. Financial Reports
5. Community/Program Presentations
 - a. FIRST Tech Challenge robotics team
6. Administrative Updates & Reports
 - a. Secondary Update
 - b. District/Elementary Update
 - c. Facilities Update
7. Agenda
 - a. SBRC Application for At-Risk/Dropout Modified Supplement Amount (MSA)
 - b. Bus Purchase
 - c. Athletic Complex & Playground
 - d. Board Policy - OSHA Vaccine Mandate
 - e. Board Policy Review - 2nd Reading of IASB Quarterly Policy Updates (6/26/20)
 - ☐ 409 series
 - ☐ 414 series
 - f. Board Policy Review - 1st Reading of IASB Quarterly Policy Updates (10/7/21)
 - ☐ 105 - Assistance Animals
 - ☐ 200.1 - Organization of the Board of Directors
 - ☐ 210.8 - Board Meeting Agenda
 - ☐ 212 - Closed Sessions
 - ☐ 212.1 - Exempt Meetings
 - ☐ 307 - Communication Channels
 - ☐ 401.4 - Employee Complaints
 - ☐ 502.4 - Student Complaints & Grievances
 - ☐ 606.6 - Insufficient Classroom Space
8. Buccaneer Brag-About
9. Student Questions
10. Adjourn

**East Buchanan Community School District
Regular Board Meeting Minutes – December 8, 2021**

Call to Order: President Greg Schmitt called the meeting to order at 5:00 pm. The board recited the East Buchanan Mission Statement. Board members present were Greg Schmitt, Scott Cooksley, Andy Sperflage, Heather Steffens, and Shawn Stone. Administration attending were Superintendent/Elementary Principal Dan Fox, HS/MS Principal Eric Dockstader, and Business Manager/Board Secretary Teresa Knipper. Several visitors attended the meeting.

Approve Agenda: Motion to approve the agenda was made by Cooksley, second by Stone. Motion carried with all ayes.

Approve Consent Agenda: Motion to approve the Consent Agenda was made by Cooksley, second by Steffens. Motion carried with all ayes. Items included on the Consent Agenda: minutes from the regular meeting on November 17, 2021; expenditures listed; financial reports; hiring of Thomas Crawford as MS boy's basketball coach; approval of inter-agency agreements for special education with West Delaware and Starmont; and early graduation requests.

FY2021 Financial Reports: The FY2021 financial reports were submitted to the board. Motion to approve the reports was made by Stone, second by Cooksley. Motion carried with all ayes.

Acceptance of Abstract of Votes: Results of the election were presented as Tim Recker for District 1 and Scott Cooksley for Director at Large. Motion to accept the abstract of election was made by Sperflage, second by Steffens. The board thanked Greg Schmitt for his dedication to the district as a school board member for eight years.

Appointment of President Pro-tem: Motion by Sperflage, second by Stone to appoint the board secretary as President Pro-tem. Motion carried with all ayes.

Adjourn: Motion was made by Sperflage, second by Stone to adjourn the annual meeting at 5:07 pm.

Call to Order: The organizational meeting was called to order at 5:08 pm by the board secretary.

Oath of office to new board member: The board secretary administered the Oath of Office to newly elected board member Tim Recker.

Election of President: The board secretary took nominations for president. Motion by Stone to nominate Sperflage. Steffens motioned to cease nominations. Motion carried with all ayes to approve Sperflage as president. The oath of office was administered by the board secretary.

Election of Vice-President: Sperflage took nominations for vice-president. Motion by Cooksley to nominate Steffens. Motion by Sperflage to nominate Stone. Steffens was elected vice-president with a vote of 3 to 2. The oath of office was administered by the president.

Appoint Board Secretary: Motion by Stone, second by Steffens to appoint Teresa Knipper as board secretary. Motion carried with all ayes. The oath of office was administered by the president.

Appoint Board Treasurer: Motion by Steffens, second by Recker to appoint Marilyn Steinkamp as board treasurer. Motion carried with all ayes.

Appoint Legal Counsel: Motion by Cooksley, second by Sperflage to appoint Steve Weidner of Swisher and Cohrt as legal counsel. Motion carried with all ayes.

Approve Official Depositories: Motion by Stone, second by Cooksley to approve the official depositories and maximum deposits as: Citizens State Bank (\$10 million), UMB (\$2 million), and ISJIT (\$2 million). Motion carried with all ayes.

**East Buchanan Community School District
Regular Board Meeting Minutes – December 8, 2021**

Name Official Publication: Motion by Cooksley, second by Steffens to approve The Winthrop News as official publication for the district. Motion carried with all ayes.

Establish dates and times of school board meetings: Motion by Stone, second by Steffens to approve the second Wednesday of each month at 5:00 pm as the school board meeting date and time. Motion carried with all ayes.

Facilities Update: Architect Josh Demmer and engineer Brian Crawford presented plans, time line, and estimates for improvements to the athletic complex and playground/outdoor learning center. After discussing the options, the board directed Fox to get an estimate to move the Kids Corner building from its current location to the vacant lot to the south so that the maintenance building and playground/outdoor learning center could be built west of the elementary building. Demmer Architecture submitted a cost of services proposal for \$78,400. Crawford Engineering & Services submitted a work authorization totaling \$19,000 to the board for both projects. Motion by Stone, second by Recker to approve the Crawford Engineering authorization to proceed.

Administrative Updates and Reports: Dockstader presented attendance policy ideas based on policies from surrounding districts and provided MS/HS attendance data. Fox reported that weather alerts will no longer be through govdelivery but did state that they will continue to be done through the designated television and radio stations. Fox also reported that the elementary concert is on December 13th and that the new district website will be active on December 13th.

Buchanan County Conference Board – Shawn Stone volunteered to be the district's representative for the Buchanan County Conference Board. His appointment was approved by all members.

Board Policy Review – 2nd Reading – Motion by Steffens, second by Cooksley to approve the second reading of policies 407.6 and 413.2 regarding certified and classified employee retirement policies. Motion carried with all ayes.

Board Policy Review – 1st Reading – Motion by Steffens, second by Cooksley to approve the first reading of the 409 and 414 series. Motion carried with all ayes.

Buccaneer Brag-About – Scott Cooksley has been in the 1st grade classrooms to read to them, ten students have had perfect attendance for the first 71 days of school, the FFA fruit is here, the female wrestlers placed at a recent tournament, and the elementary teachers do a great job getting the students excited for the holidays.

Student Questions – Students asked the board about the track and plans for the old playground.

Adjourn – Motion by Stone, second by Cooksley to adjourn the meeting at 7:32 pm. Motion carried with all ayes.

The above are not official minutes until approved at the next regular board meeting. A copy of the official minutes may be viewed in the office of the Board Secretary any Monday through Friday between 8:00 a.m. and 4:00 p.m.

**East Buchanan Community School District
Special Board Meeting Minutes – January 7, 2022**

Call to Order: President Andy Sperfslage called the meeting to order at 5:00 pm. Board members present were Scott Cooksley, Tim Recker, and Andy Sperfslage. Board members attending by phone were Heather Steffens and Scott Cooksley. Superintendent/Elementary Principal Dan Fox attended for administration. One visitor was present.

Approve Agenda: Motion to approve the agenda was made by Recker, second by Stone. Motion carried with all ayes.

Board Policy 403.7 Series - Motion by Cooksley, second by Recker to table 403.7 series board policy, regulation, and examples until Monday, January 10, 2022 so the board could get results from the Supreme Court before any action was taken. Motion carried with all ayes.

Adjourn – Motion by Stone, second by Cooksley to adjourn the meeting. Motion carried with all ayes.

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**East Buchanan Community School District
Special Board Meeting Minutes – January 10, 2022**

Call to Order: President Andy Sperflage called the meeting to order at 7:00 am. Board members present were Scott Cooksley, Tim Recker, Andy Sperflage, and Shawn Stone. Board Member Heather Steffens was absent. Superintendent/Elementary Principal Dan Fox attended for administration.

Approve Agenda: Motion to approve the agenda was made by Recker, second by Stone. Motion carried with all ayes.

Board Policy 403.7 Series – Superintendent Fox recommended (per school attorney recommendation) the motion to act on 403.7 series board policy, regulation, and examples be tabled because Iowa OSHA has clearly indicated that it will not be implementing or enforcing the federal ETS. It was recommended that the board act once there is clear guidance from the state. Motion by Stone, second by Cooksley to table the policy series. Motion carried with all ayes.

Adjourn – Motion by Stone, second by Recker to adjourn the meeting. Motion carried with all ayes.

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East Buchanan CSD**Personnel Changes**

SB Mtg date	Employee	Type	Position	Notice Date	Effective Date	Salary Schedule
1/12/2022	Lauren James	Hire	Associate			
1/12/2022	Courtney Snyder	Resignation	Associate			

EAST BUCHANAN COMMUNITY SCHOOLS

ADMINISTRATION

Daniel J. Fox
Superintendent
Eric Dockstader
Secondary Principal
Daniel J. Fox
Elementary Principal
Teresa Knipper
Board Secretary/Business Manager



414 5TH STREET NORTH
WINTHROP, IOWA 50682

PHONE: (319) 935-3367
FAX: (319) 935-3749

<http://www.eastbuchananschools.com>
@EB_Bucs #BucPr1de



BOARD OF EDUCATION

Andy Sperfslage
President
Heather Steffens
Vice President
Scott Cooksley
Tim Recker
Shawn Stone

January 11, 2022

Early Graduation Applicants

The seniors listed below have applied for early graduation. They will graduate on February 23, 2022, at the end of trimester 2 if they have earned the required credits, reached the necessary 66 credits and their request is approved by the East Buchanan School Board.

Shania Rasmussen
Hayden Weber

Thank you.

Paula McGraw, Counselor
Eric Dockstader, MS/HS Principal

Invoice Listing (vendor subtotal)

Unposted: Batch Description General/Etc-January 2022: Fund Description

Vendor ID	Vendor Name	Description	Check Date	Checking Account ID	Check Number	Invoice Amount
ACCELASER	ACCENT LASER SERVICE, INC.	Toner and Maintenance Kit for Printers				399.95
						399.95
ACER	Acer Service Corp	REPLACEMENT CHROMEBOOK				305.36
ACER	Acer Service Corp	Acer CB Parts				71.70
ACER	Acer Service Corp	CHROMEBOOK REPLACEMENT				305.36
ACER	Acer Service Corp	Acer CB Parts				79.76
ACER	Acer Service Corp	Acer CB Parts				6.24
ACER	Acer Service Corp	Acer CB Parts				5.36
						773.78
ADVELIGH	ADVENTURE LIGHTING	ELECTRICAL SUPPLIES				263.47
						263.47
AGVAFS	AgVantage FS	GREENHOUSE LP				514.94
AGVAFS	AgVantage FS	GREENHOUSE LP				544.60
						1,059.54
ALLIUTIL	ALLIANT ENERGY	GAS/ELECTRIC				15,662.36
						15,662.36
BLACKHAWK	BLACK HAWK WAST DISP, INC.	GARBAGE				693.00
						693.00
BUCHAUDI	BUCHANAN COUNTY AUDITOR	ELECTION FEES				1,492.68
						1,492.68
CAMBASSE	Cambium Assessment Inc	ELP SCREENING				11.00
						11.00
CDWG	CDW GOVERNMENT, INC	TECH PURCHASED SERVICE				553.64
CDWG	CDW GOVERNMENT, INC	OFFICE 365 SOFTWARE				2,600.00
CDWG	CDW GOVERNMENT, INC	TECH SUPPLIES				22.84
						3,176.48
CRAEA	CENTRAL RIVERS AEA	CPI TRAINING				3,920.00
						3,920.00
CHASCARD	CHASE CARD SERVICES	WALMART-FCS SUPPLIES				37.34

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Invoice Listing (vendor subtotal)

Unposted: Batch Description General/Etc-January 2022: Fund Description

GENERAL FUND

Vendor ID	Vendor Name	Description	Check Date	Checking Account ID	Check Number	Invoice Amount
CHASCARD	CHASE CARD SERVICES	WINTHROP FOODS-FCS SUPPLIES				37.06
CHASCARD	CHASE CARD SERVICES	ZORO-B&G SUPPLIES				245.70
CHASCARD	CHASE CARD SERVICES	UPS-SHIPPING				78.87
CHASCARD	CHASE CARD SERVICES	AMAZON-ELEM OFFICE SUPPLIES				25.23
CHASCARD	CHASE CARD SERVICES	WALMART-ELEM SUPPLIES				28.80
CHASCARD	CHASE CARD SERVICES	LEARNING A-Z				354.00
						807.00
CITYLAUN	CITY LAUNDERING CO.	TRANSPORTATION PURCHASED SERVICE				39.42
						39.42
CITYWINT	CITY OF WINTHROP	WATER/SEWER	01/07/2022	1	29708	727.35
						727.35
CJCOOP	CJ COOPER & ASSOCIATES, INC.	SCREENING TESTS				245.10
CJCOOP	CJ COOPER & ASSOCIATES, INC.	SCREENING TESTS				60.00
						305.10
COPYSYST	COPY SYSTEMS INC	COPIER MAINTENANCE				1,237.94
						1,237.94
CORDHEAT	CORDS HEATING & COOLING LLC	ICE MACHINE REPAIR				265.50
						265.50
DHS	DHS CASHIER 1ST FL.	STATE MEDICAID MATCH				4,479.36
						4,479.36
DONWALT	DON & WALT L.L.C.	PURCHASED SERVICE				180.24
						180.24
DUBUFIRE	DUBUQUE FIRE EQUIPMENT, INC.	FIRE EXTINGUISHER SERVICE				2,452.00
DUBUFIRE	DUBUQUE FIRE EQUIPMENT, INC.	FIRE EXTINGUISHER SERVICE				720.70
						3,172.70
EBTELEPH	EAST BUCHANAN COOP TELEPHONE	TELEPHONE				3,688.55
						3,688.55
EDGEOL	Edgewood Oil, Inc.	TRANSPORTATION SUPPLIES				126.00
						126.00

Invoice Listing (vendor subtotal)

Unposted: Batch Description General/Etc-January 2022: Fund Description

GENERAL FUND

Vendor ID	Vendor Name	Description	Check Date	Checking Account ID	Check Number	Invoice Amount
NAPA	ESCHEN TARPY NAPA	CUSTODIAL VEHICLE PARTS				80.46
NAPA	ESCHEN TARPY NAPA	CUSTODIAL VEHICLE PARTS				9.24
NAPA	ESCHEN TARPY NAPA	BUS PARTS				138.66
NAPA	ESCHEN TARPY NAPA	CUSTODIAL EQUIP PARTS				5.69
						234.05
GORDFLES	GORDON FLESCH CO	COPIER MAINTENANCE				574.00
						574.00
GUMDROP	GUMDROP BOOKS	LMC BOOKS				486.60
						486.60
HOGLBUSMN	Hoglund Bus Company	BUS PARTS				166.34
						166.34
HOTLUNCH	HOT LUNCH PROGRAM	PS MILK				129.90
HOTLUNCH	HOT LUNCH PROGRAM	PS SNACKS				27.36
						157.26
INDECS	INDEPENDENCE CSD	OPEN ENROLLMENT TUITION				118,733.58
						118,733.58
INTEALLBAT	INTERSTATE ALL BATTERY CENTER	B&G REPAIRS				63.00
						63.00
IASB	IOWA ASSOC OF SCHOOL BOARDS	AWARD				50.00
						50.00
IOWAWALL	IOWA WALL SAWING	PURCHASED SERVICE				580.00
						580.00
JWPEPPER	J.W. PEPPER & SON, INC.	Music for HS Choir				24.49
JWPEPPER	J.W. PEPPER & SON, INC.	HS CHOIR MUSIC				75.00
JWPEPPER	J.W. PEPPER & SON, INC.	BAND MUSIC				471.99
						571.48
JOHNDEERE	JOHN DEERE FINANCIAL	BUS BARN SUPPLIES				457.55
						457.55

Invoice Listing (vendor subtotal)

Unposted: Batch Description General/Etc-January 2022: Fund Description

GENERAL FUND

Vendor ID	Vendor Name	Description	Check Date	Checking Account ID	Check Number	Invoice Amount
JUNIACHIE	JUNIOR ACHIEVEMENT	PARTNERSHIP AGREEMENT				1,240.89
						<u>1,240.89</u>

*KAISWELD	KAISER'S WELDING & REPAIR	HOIST REPAIR				3,500.00
						<u>3,500.00</u>

KAMINOTABL	Kami Notable	KAMI SUBSCRIPTION				2,750.00
						<u>2,750.00</u>

LINNCOOP	LINN CO-OPERATIVE OIL CO	GAS/DIESEL				858.58
LINNCOOP	LINN CO-OPERATIVE OIL CO	GAS/DIESEL				2,004.17
LINNCOOP	LINN CO-OPERATIVE OIL CO	GAS				845.57
LINNCOOP	LINN CO-OPERATIVE OIL CO	DIESEL				1,931.06
						<u>5,639.38</u>

MACHANDR	Machacek, Andrew	DOT physical				100.00
						<u>100.00</u>

MANCSIGN	MANCHESTER SIGNS	PURCHASED SERVICE				75.00
						<u>75.00</u>

MIDWALAR	MIDWEST ALARM SERVICES	FIRE INSPECTION				937.44
						<u>937.44</u>

THENEWS	NEWS, THE	PUBLIC NOTICES/ADVERTISING				372.40
						<u>372.40</u>

PRESTOX	PRESTO-X	KITCHEN-PEST SERVICE				64.00
						<u>64.00</u>

QUILCORP	QUILL CORPORATION	ELEM SUPPLIES				24.68
						<u>24.68</u>

SAI	SAI	School Law Conference				110.00
						<u>110.00</u>

SCHOBUSS	SCHOOL BUS SALES CO	VAN/BUS REPAIR				266.16
						<u>266.16</u>

SCHOSPEC	SCHOOL SPECIALTY LLC	HS SUPPLIES				37.55

East Buchanan Community School
01/12/2022 12:32 PM

Invoice Listing (vendor subtotal)

Page: 5
User ID: TMK

Unposted: Batch Description General/Etc-January 2022: Fund Description

<u>Vendor ID</u>	<u>Vendor Name</u>	<u>Description</u>	<u>Check Date</u>	<u>Checking Account ID</u>	<u>Check Number</u>	<u>Invoice Amount</u>
SCHUMARY	SCHUBICH, MARY	Accompanist for Winter Concert				37.55
SUPEWELD	SUPERIOR WELDING SUPPLY	IND ARTS SUPPLIES				125.00
SUPEWELD	SUPERIOR WELDING SUPPLY	CO2 RENT				125.00
SUPEWELD	SUPERIOR WELDING SUPPLY	IND ARTS SUPPLIES				172.57
SUPEWELD	SUPERIOR WELDING SUPPLY	CO2 RENT				14.00
SUPEWELD	SUPERIOR WELDING SUPPLY	IND ARTS SUPPLIES				186.57
SWISCOHR	SWISHER & COHRT	LEGAL SERVICES				55.50
SWISCOHR	SWISHER & COHRT	LEGAL SERVICES				55.50
TIMDAVIS	Tim Davis Lawn Care	LAWN CARE SERVICE				835.00
TIMDAVIS	Tim Davis Lawn Care	LAWN CARE SERVICE				835.00
TIMBILL	TIMBERLINE BILLING SERVICE LLC	MEDICAID PURCH SERVICE				580.13
TIMBILL	TIMBERLINE BILLING SERVICE LLC	MEDICAID PURCH SERVICE				580.13
TRANUSINC	Trane US Inc	BAS UPGRADE				615.30
TRANUSINC	Trane US Inc	BAS UPGRADE				615.30
USCELL	US CELLULAR	Cell Phones				264.61
USCELL	US CELLULAR	Cell Phones				264.61
USCELL	US CELLULAR	Cell Phones				529.22
WALMART	WALMART COMMUNITY BRC	PD SUPPLIES				109.46
WALMART	WALMART COMMUNITY BRC	PD SUPPLIES				109.46
WESTDELA	WEST DELAWARE CSD	OPEN ENROLLMENT				22,166.67
WESTDELA	WEST DELAWARE CSD	OPEN ENROLLMENT				22,166.67
WESTMUSI	WEST MUSIC COMPANY	BAND INSTRUMENT REPAIR				187.50
WESTMUSI	WEST MUSIC COMPANY	BAND INSTRUMENT REPAIR				187.50
WINTBUIL	WINTHROP BUILDING SUPPLY	B&G SUPPLIES				89.61
WINTBUIL	WINTHROP BUILDING SUPPLY	BUS BARN SUPPLIES				86.94
WINTBUIL	WINTHROP BUILDING SUPPLY	IND ARTS SUPPLIES				40.45
WINTBUIL	WINTHROP BUILDING SUPPLY	IND ARTS SUPPLIES				58.49
WINTBUIL	WINTHROP BUILDING SUPPLY	IND ARTS SUPPLIES				39.97

Invoice Listing (vendor subtotal)

Unposted: Batch Description General/Etc-January 2022: Fund Description

GENERAL FUND

Vendor ID	Vendor Name	Description	Check Date	Checking Account ID	Check Number	Invoice Amount
X WINTBUIL	WINTHROP BUILDING SUPPLY	Woodworking consumables				37.98
X WINTBUIL	WINTHROP BUILDING SUPPLY	IND ARTS SUPPLIES				16.99
						<u>370.43</u>

Batch Total: 205,433.56

Report Total: 205,433.56

East Buchanan Community School
01/12/2022 12:31 PM

Vendor ID Vendor Name

2080MEDIA 2080 Media Inc

Invoice Listing (vendor subtotal)

Unposted: Batch Description General/Etc-January 2022: PPEL & SAVE

Description

LIVE STREAMING

Check Date Checking Account ID Check Number

Invoice Amount

7,000.00

7,000.00

20,400.00

20,400.00

3,511.00

1,985.00

5,496.00

Batch Total:

32,896.00

Report Total:

32,896.00

Batch Description: Nutrition Invoices - January 2022

Vendor ID: BIMBBAKE BIMBO BAKERIES USA

Description: Bread
Sequence: 1 Check Type:
Chart of Account Number Detail Description
61 0000 3110 000 0000 631 Food Purchased

Processing Month: 01/2022 Credit Card Vendor ID:

PO Number: Invoice Number: 123121
Invoice Date: 12/31/2021 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00 Amount: 462.60
Check Number: Check Date:

Checking Account ID:

Cost Center ID Detail Amount Asset/Asset Tag In Full
462.60 N

Vendor ID: MARTBROT MARTIN BROTHERS

Description: Food/Supplies/Fees
Sequence: 1 Check Type:
Chart of Account Number Detail Description
61 0000 3110 000 0000 631 Food Purchased
61 0000 3110 000 0000 618 General Supplies
61 0000 3110 000 0000 632 Other Expenses

PO Number: Invoice Number: 123121
Invoice Date: 12/31/2021 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00 Amount: 14,452.85
Check Number: Check Date:

Checking Account ID:

Cost Center ID Detail Amount Asset/Asset Tag In Full
13,979.39 N
265.46 N
208.00 N

Vendor ID: PRAIFARM PRAIRIE FARMS DAIRY, INC.

Description: Milk/Yogurt
Sequence: 1 Check Type:
Chart of Account Number Detail Description
61 0000 3110 000 0000 631 Food Purchased

PO Number: Invoice Number: 123121
Invoice Date: 12/31/2021 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00 Amount: 2,135.83
Check Number: Check Date:

Checking Account ID:

Cost Center ID Detail Amount Asset/Asset Tag In Full
2,135.83 N

Batch 1099 Total: 0.00 Batch Total: 17,051.28

Report 1099 Total: 0.00 Report Total: 17,051.28

Omit from Dec 2021 list of bills

East Buchanan Community School
12/01/2021 9:53 AM

Invoice Listing - Detail
Activity Extra Invoices - November 2021

Page: 1
User ID: KLG

Batch Description: Activity Extra Invoices - November 2021

Processing Month: 11/2021 Credit Card Vendor ID: End of Fiscal Year Expense Invoices:

Vendor ID: BRADYBO BRADY, BO
Description: MS G-Basketball Official - 11/18/21
Sequence: 1 Check Type: Check
Chart of Account Number
21 0000 1400 920 6600 345 MS G-Basketball Official - 11/18/21
Invoice Number: 111821 Status: PP 1099 Amount: 85.00
Invoice Date: 11/18/2021 Due Date: 11/19/2021 Check Number: 13072 Check Date: 11/19/2021
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
85.00 85.00 N Amount: 85.00

Vendor ID: BRADYBO BRADY, BO
Description: MS G-Basketball Official - 11/29/21
Sequence: 1 Check Type: Check
Chart of Account Number
21 0000 1400 920 6600 345 MS G-Basketball Official - 11/29/21
Invoice Number: 112921 Status: PP 1099 Amount: 85.00
Invoice Date: 11/29/2021 Due Date: 11/30/2021 Check Number: 13084 Check Date: 11/30/2021
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
85.00 85.00 N Amount: 85.00

Vendor ID: CITIZENS CSB-CASH
Description: Change - Book Fair
Sequence: 1 Check Type: Check
Chart of Account Number
21 0000 1400 950 7018 618 Change - Book Fair
Invoice Number: 1129-12321 Status: PP 1099 Amount: 0.00
Invoice Date: 11/22/2021 Due Date: 11/23/2021 Check Number: 13075 Check Date: 11/23/2021
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
310.00 N Amount: 310.00

Vendor ID: GENFUND GENERAL FUND
Description: MS G-BB Official - K. Hesner - 11/18/21
Sequence: 1 Check Type: Check
Chart of Account Number
21 0000 1400 920 6600 391 MS G-BB Official - K. Hesner - 11/18/21
Invoice Number: 111821 Status: PP 1099 Amount: 0.00
Invoice Date: 11/18/2021 Due Date: 11/19/2021 Check Number: 13073 Check Date: 11/19/2021
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
85.00 N Amount: 85.00

Vendor ID: GENFUND GENERAL FUND
Description: MS G-BB Official - K. Hesner - 11/29/21
Sequence: 1 Check Type: Check
Chart of Account Number
21 0000 1400 920 6600 391 MS G-BB Official - K. Hesner - 11/29/21
Invoice Number: 112921 Status: PP 1099 Amount: 0.00
Invoice Date: 11/29/2021 Due Date: 11/30/2021 Check Number: 13085 Check Date: 11/30/2021
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
85.00 N Amount: 85.00

Vendor ID: GIBBJOE GIBBS, JOE
Description: G-Basketball Official - 11/23/21
Sequence: 1 Check Type: Check
Chart of Account Number
21 0000 1400 920 6600 345 G-Basketball Official - 11/23/21
Invoice Number: 112321 Status: PP 1099 Amount: 120.00
Invoice Date: 11/23/2021 Due Date: 11/29/2021 Check Number: 13081 Check Date: 11/29/2021
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
120.00 120.00 N Amount: 120.00

Vendor ID: LOUGHPATR LOUGHREN, PATRICK
Description: MS Wrestling Official - 11/23/21
Sequence: 1 Check Type: Check
Chart of Account Number
21 0000 1400 920 6600 345 MS Wrestling Official - 11/23/21
Invoice Number: 112321 Status: PP 1099 Amount: 50.00
Invoice Date: 11/23/2021 Due Date: 11/29/2021 Check Number: 13078 Check Date: 11/29/2021
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
50.00 50.00 N Amount: 50.00

Vendor ID: MEYERUST MEYER, RUSTY
Description: MS Wrestling Official - 11/23/21
Sequence: 1 Check Type: Check
Chart of Account Number
21 0000 1400 920 6600 345 MS Wrestling Official - 11/23/21
Invoice Number: 112321 Status: PP 1099 Amount: 90.00
Invoice Date: 11/23/2021 Due Date: 11/29/2021 Check Number: 13079 Check Date: 11/29/2021
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
90.00 90.00 N Amount: 90.00

OnCd from Dec 2021 list of bills

East Buchanan Community School
12/01/2021 9:53 AM

Invoice Listing - Detail
Activity Extra Invoices - November 2021

Sequence: 1	Check Type: Check	Checking Account ID: 2	Check Number: 13079	Check Date: 11/29/2021	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6600 345	MS Wrestling Official - 11/23/21		90.00	90.00	N
Vendor ID: NASSPNHS	NASSPNHS	PO Number: 22-0205	Invoice Number: 9001452791	Amount: 385.00	
Description: NHS Membership		Invoice Date: 03/24/2021	Due Date: 11/23/2021	Status: PP	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 2	Check Number: 13076	Check Date: 11/29/2021	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 950 7013 899	National Honor Society Membership		385.00		N
Vendor ID: OGLEBEN	OGLE, BEN	PO Number:	Invoice Number: 112321	Amount: 50.00	
Description: MS Wrestling Official - 11/23/21		Invoice Date: 11/23/2021	Due Date: 11/29/2021	Status: PP	1099 Amount: 50.00
Sequence: 1	Check Type: Check	Checking Account ID: 2	Check Number: 13080	Check Date: 11/29/2021	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6600 345	MS Wrestling Official - 11/23/21		50.00		N
Vendor ID: SADLDENN	SADLER, DENNIS	PO Number:	Invoice Number: 112321	Amount: 110.00	
Description: G-Basketball Official - 11/23/21		Invoice Date: 11/23/2021	Due Date: 11/29/2021	Status: PP	1099 Amount: 110.00
Sequence: 1	Check Type: Check	Checking Account ID: 2	Check Number: 13082	Check Date: 11/29/2021	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6600 345	G-Basketball Official - 11/23/21		110.00		N
Vendor ID: SCHNWAYN	SCHNIER, WAYNE	PO Number:	Invoice Number: 112321	Amount: 110.00	
Description: G-Basketball Official - 11/23/21		Invoice Date: 11/23/2021	Due Date: 11/29/2021	Status: PP	1099 Amount: 110.00
Sequence: 1	Check Type: Check	Checking Account ID: 2	Check Number: 13083	Check Date: 11/29/2021	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6600 345	G-Basketball Official - 11/23/21		110.00		N
Vendor ID: SHOPSCRIP	SHOP WITH SCRIP	PO Number: 22-0209	Invoice Number: 119289607	Amount: 1,851.10	
Description: Gift Card Fundraiser		Invoice Date: 11/19/2021	Due Date: 11/19/2021	Status: PP	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 2	Check Number: 13074	Check Date: 11/19/2021	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 950 7010 618	Gift Cards		1,842.35		N
21 0000 1400 950 7010 618	Shipping		8.75		N
Vendor ID: SHOPSCRIP	SHOP WITH SCRIP	PO Number: 22-0214	Invoice Number: 20211129	Amount: 750.75	
Description: Scrip Cards		Invoice Date: 11/29/2021	Due Date: 11/29/2021	Status: PP	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 2	Check Number: 13077	Check Date: 11/29/2021	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 950 7010 618	Gift Cards		742.00		N
21 0000 1400 950 7010 618	Shipping		8.75		N
Batch 1099 Total:			700.00	Batch Total:	4,166.85
Report 1099 Total:			700.00	Report Total:	4,166.85

Invoice Listing - Detail

Activity Extra Invoices - December 2021

Batch Description: Activity Extra Invoices - December 2021

Vendor ID: BRUNCORB BRUNGARD, CORBIN

Description: Basketball Official - 12/7/21

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

21 0000 1400 920 6600 345 Basketball Official - 12/7/21

Processing Month: 12/2021 Credit Card Vendor ID:

PO Number: Invoice Number: 12721

Invoice Date: 12/07/2021 Due Date: 12/09/2021 Status: PP 1099 Amount: 110.00

Checking Account ID: 2 Check Number: 13110 Check Date: 12/09/2021

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag

110.00 110.00 N

End of Fiscal Year Expense Invoices:

Amount: 110.00

Vendor ID: CITIZENS

Description: Change - Cookie Walk

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

21 0000 1400 910 6210 618 Change - Cookie Walk

PO Number:

Invoice Date: 12/20/2021 Due Date: 12/20/2021 Status: PP 1099 Amount: 0.00

Checking Account ID: 2 Check Number: 13117 Check Date: 12/20/2021

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag

200.00 N

Amount: 200.00

Vendor ID: DVORJOHN

Description: DVORAK, JOHN

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

21 0000 1400 920 6600 345 Basketball Official - 12/17/21

PO Number:

Invoice Date: 12/17/2021 Due Date: 12/20/2021 Status: PP 1099 Amount: 115.00

Checking Account ID: 2 Check Number: 13118 Check Date: 12/20/2021

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag

115.00 115.00 N

Amount: 115.00

Vendor ID: FITZMICH

Description: FITZGERALD, MICHAEL

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

21 0000 1400 920 6600 345 Basketball Official - 12/11/21

PO Number:

Invoice Date: 12/11/2021 Due Date: 12/30/2021 Status: PP 1099 Amount: 80.00

Checking Account ID: 2 Check Number: 13127 Check Date: 12/30/2021

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag

80.00 80.00 N

Amount: 80.00

Vendor ID: GLAWGENE

Description: GLAWNE, GENE

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

21 0000 1400 920 6600 345 Basketball Official - 12/11/21

PO Number:

Invoice Date: 12/11/2021 Due Date: 12/30/2021 Status: PP 1099 Amount: 90.00

Checking Account ID: 2 Check Number: 13126 Check Date: 12/30/2021

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag

90.00 90.00 N

Amount: 90.00

Vendor ID: GRAWROBE

Description: GRAWNE, ROBERT

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

21 0000 1400 920 6600 345 Basketball Official - 12/17/21

PO Number:

Invoice Date: 12/17/2021 Due Date: 12/20/2021 Status: PP 1099 Amount: 85.00

Checking Account ID: 2 Check Number: 13119 Check Date: 12/20/2021

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag

85.00 85.00 N

Amount: 85.00

Vendor ID: GRAWROBE

Description: GRAWNE, ROBERT

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

21 0000 1400 920 6600 345 Basketball Official - 12/17/21

PO Number:

Invoice Date: 12/07/2021 Due Date: 12/09/2021 Status: PP 1099 Amount: 90.00

Checking Account ID: 2 Check Number: 13112 Check Date: 12/09/2021

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag

90.00 90.00 N

Amount: 90.00

Vendor ID: HAGEPAUL

Description: HAGEMAN, PAUL

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

21 0000 1400 920 6600 345 Basketball Official - 12/17/21

PO Number:

Invoice Date: 12/17/2021 Due Date: 12/20/2021 Status: PP 1099 Amount: 0.00

Checking Account ID: 2 Check Number: 13112 Check Date: 12/09/2021

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag

0.00 0.00 N

Amount: 125.00

Invoice Listing - Detail
Activity Extra Invoices - December 2021

Sequence: 1	Check Type: Check	Checking Account ID: 2	Check Number: 13120	Check Date: 12/20/2021	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6600 345	Basketball Official - 12/17/21		125.00	N	In Full
Vendor ID: HEIDCHRI	HEIDELBAUER, CHRIS	PO Number:	Invoice Number: 121721	Amount:	115.00
Description: Basketball Official - 12/17/21		Invoice Date: 12/17/2021	Due Date: 12/20/2021	Status: PP	1099 Amount: 115.00
Sequence: 1	Check Type: Check	Checking Account ID: 2	Check Number: 13121	Check Date: 12/20/2021	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6600 345	Basketball Official - 12/17/21		115.00	115.00 N	In Full
Vendor ID: HUBEAUST	HUBER, AUSTIN	PO Number:	Invoice Number: 121721	Amount:	85.00
Description: Basketball Official - 12/17/21		Invoice Date: 12/17/2021	Due Date: 12/20/2021	Status: PP	1099 Amount: 85.00
Sequence: 1	Check Type: Check	Checking Account ID: 2	Check Number: 13122	Check Date: 12/20/2021	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6600 345	Basketball Official - 12/17/21		85.00	85.00 N	In Full
Vendor ID: MATBOSS	MatBoss LLC	PO Number:	Invoice Number: 6007597453	Amount:	499.00
Description: VideoStats Subscription		Invoice Date: 08/22/2021	Due Date: 12/09/2021	Status: PP	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 2	Check Number: 13115	Check Date: 12/09/2021	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6600 810	MatBoss-VideoStats Subscription		499.00	N	In Full
Vendor ID: MEYERYAN	MEYER, RYAN	PO Number:	Invoice Number: 12721	Amount:	120.00
Description: Basketball Official - 12/7/21		Invoice Date: 12/07/2021	Due Date: 12/09/2021	Status: PP	1099 Amount: 120.00
Sequence: 1	Check Type: Check	Checking Account ID: 2	Check Number: 13111	Check Date: 12/09/2021	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6600 345	Basketball Official - 12/7/21		120.00	120.00 N	In Full
Vendor ID: MTVERNON	MT. VERNON HIGH SCHOOL	PO Number:	Invoice Number: 121121	Amount:	125.00
Description: Wrestling Entry Fee - 12/11/21		Invoice Date: 12/11/2021	Due Date: 12/20/2021	Status: PP	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 2	Check Number: 13123	Check Date: 12/20/2021	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6600 810	Wrestling Entry Fee - 12/11/21		125.00	N	In Full
Vendor ID: PEEPJAMA	PEEPLES, JAMAAL	PO Number:	Invoice Number: 12721	Amount:	100.00
Description: Basketball Official - 12/7/21		Invoice Date: 12/07/2021	Due Date: 12/09/2021	Status: PP	1099 Amount: 100.00
Sequence: 1	Check Type: Check	Checking Account ID: 2	Check Number: 13113	Check Date: 12/09/2021	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6600 345	Basketball Official - 12/7/21		100.00	100.00 N	In Full
Vendor ID: SCHOFAR	SCHOLASTIC BOOK FAIRS - 15	PO Number:	Invoice Number: VV5016952BF	Amount:	2,853.61
Description: Scholastic Book Fair		Invoice Date: 12/13/2021	Due Date: 12/20/2021	Status: PP	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 2	Check Number: 13125	Check Date: 12/20/2021	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 950 7018 618	Scholastic Book Fair		2,853.61	N	In Full

Invoice Listing - Detail

Activity Extra Invoices - December 2021

Vendor ID: SHOPSCRIP		SHOP WITH SCRIP		PO Number:		Invoice Number: I19523514		Amount:	
Description: Scrip Cards				Invoice Date: 12/13/2021		Due Date: 12/13/2021		Status: PP	
Sequence: 1		Check Type: Check		Checking Account ID: 2		Check Number: 13116		Check Date: 12/13/2021	
<u>Chart of Account Number</u>		<u>Detail Description</u>		<u>Cost Center ID</u>		<u>Detail Amount</u>		<u>Asset/Asset Tag</u>	
21 0000 1400 950 7010 618		Scrip Cards				2,180.26		N	
								In Full	

Batch Description: Activity Invoices - January 2022

Processing Month: 01/2022 Credit Card Vendor ID:

End of Fiscal Year Expense Invoices:

Vendor ID: ANAMOSA ANAMOSA SCHOOL DISTRICT

PO Number:

Invoice Number: 1322

Amount: 75.00

Description: Girls Wrestling Tournament Entry-1/3/22

Invoice Date: 01/03/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00

Check Number: Check Date:

Sequence: 1 Check Type: Checking Account ID:

Check Number: Check Date:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag

In Full

21 0000 1400 920 6600 810 Girls Wrestling Tournament Entry

75.00 N

* Vendor ID: CAMPBOB CAMP, BOB

PO Number:

Invoice Number: 1722

Amount: 115.00

Description: Basketball Official - 1/7/22

Invoice Date: 01/07/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 115.00

Check Number: Check Date:

Sequence: 1 Check Type: Checking Account ID:

Check Number: Check Date:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag

In Full

21 0000 1400 920 6600 345 Basketball Official - 1/7/22

115.00 115.00 N

* Vendor ID: CEDAFALL CEDAR FALLS CSD

PO Number:

Invoice Number: 11022

Amount: 21.00

Description: Girls Wrestling Entry - 1/10/22

Invoice Date: 01/10/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00

Check Number: Check Date:

Sequence: 1 Check Type: Checking Account ID:

Check Number: Check Date:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag

In Full

21 0000 1400 920 6600 810 Girls Wrestling Entry - 1/10/22

21.00 N

Vendor ID: CENTSCHO CENTRAL COMMUNITY SCHOOL DISTRICT

PO Number:

Invoice Number: 1722

Amount: 60.00

Description: Girls Wrestling Entry - 1/7/22

Invoice Date: 01/07/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00

Check Number: Check Date:

Sequence: 1 Check Type: Checking Account ID:

Check Number: Check Date:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag

In Full

21 0000 1400 920 6600 810 Girls Wrestling Entry - 1/7/22

60.00 N

Vendor ID: CRAEA CENTRAL RIVERS AEA

PO Number: 22-0222

Invoice Number: 212201629

Amount: 51.00

Description: Office Discipline Referral Forms

Invoice Date: 12/21/2021 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00

Check Number: Check Date:

Sequence: 1 Check Type: Checking Account ID:

Check Number: Check Date:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag

In Full

21 0000 1400 950 7049 618 Elementary Office Discipline Referral Fo

51.00 N

Vendor ID: CHASCARD CHASE CARD SERVICES

PO Number:

Invoice Number: 120821

Amount: 712.50

Description: State Wrestling Tickets

Invoice Date: 12/08/2021 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00

Check Number: Check Date:

Sequence: 1 Check Type: Checking Account ID:

Check Number: Check Date:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag

In Full

21 0000 1400 920 6600 618 ATHLETICS SUPPLIES

712.50 N

* Vendor ID: CHASCARD CHASE CARD SERVICES

PO Number:

Invoice Number: 1221

Amount: 480.42

Description: Supplies - Feed Store

Invoice Date: 01/07/2021 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00

Check Number: Check Date:

Sequence: 1 Check Type: Checking Account ID:

Check Number: Check Date:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag

In Full

21 0000 1400 950 7015 618 Supplies - Feed Store

480.42 N

* Vendor ID: COOKAARO COOK, AARON AND TRISH

PO Number:

Invoice Number: 11122

Amount: 462.00

Description: Refund - Kirby Music Trip

Invoice Date: 01/11/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00

Check Number: Check Date:

Sequence: 1 Check Type:
Chart of Account Number
21 0000 1400 910 6221 899 Refund - Kirby Music Trip

Checking Account ID:

Cost Center ID
462.00 Check Number:
1099 Detail Amount Asset/Asset Tag
N

In Full

Vendor ID: DESIUNLI DESIGNS UNLIMITED

Description: Polo Shirt

Amount: 28.00

Sequence: 1 Check Type:
Chart of Account Number
21 0000 1400 950 7010 618 Polo Shirt

Checking Account ID:

PO Number:
Invoice Date: 11/30/2021 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00
Cost Center ID
28.00 Check Number:
1099 Detail Amount Asset/Asset Tag
N

In Full

Vendor ID: FAREWAY FAREWAY STORES, INC.

Description: FFA Ham Donation

Amount: 99.97

Sequence: 1 Check Type:
Chart of Account Number
21 0000 1400 950 7026 618 FFA Ham Donation

Checking Account ID:

PO Number: 22-0240 Invoice Number: 06121G
Invoice Date: 12/23/2021 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00
Cost Center ID
99.97 Check Number:
1099 Detail Amount Asset/Asset Tag
N

In Full
Final

*** Vendor ID: FULTMIND FULTS, GLEN AND MINDY**

Description: Refund-Chase/Mindy Music Trip

Amount: 1,057.00

Sequence: 1 Check Type:
Chart of Account Number
21 0000 1400 910 6221 899 Refund-Chase/Mindy Music Trip

Checking Account ID:

PO Number:
Invoice Date: 01/11/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00
Cost Center ID
1,057.00 Check Number:
1099 Detail Amount Asset/Asset Tag
N

In Full

*** Vendor ID: FBFA FUTURE BUSINESS LEADERS OF AMERICA**

Description: Membership Dues

Amount: 240.00

Sequence: 1 Check Type:
Chart of Account Number
21 0000 1400 950 7010 899 Membership Dues

Checking Account ID:

PO Number:
Invoice Date: 01/06/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00
Cost Center ID
240.00 Check Number:
1099 Detail Amount Asset/Asset Tag
N

In Full

Vendor ID: GALLBLUE GBPAC-UNI

Description: 1st/2nd Grade - Rosie Revere

Amount: 100.00

Sequence: 1 Check Type:
Chart of Account Number
21 0000 1400 950 7050 899 1st/2nd Grade Field Trip

Checking Account ID:

PO Number:
Invoice Date: 10/16/2021 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00
Cost Center ID
100.00 Check Number:
1099 Detail Amount Asset/Asset Tag
N

In Full

*** Vendor ID: GENFUND GENERAL FUND**

Description: Basketball Official - K. Hesner - 1/8/22

Amount: 90.00

Sequence: 1 Check Type:
Chart of Account Number
21 0000 1400 920 6600 391 Basketball Official - K. Hesner - 1/8/22

Checking Account ID:

PO Number:
Invoice Date: 01/08/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00
Cost Center ID
90.00 Check Number:
1099 Detail Amount Asset/Asset Tag
N

In Full

*** Vendor ID: GRAWROBE GRAWWE, ROBERT**

Description: Basketball Official - 1/7/22

Amount: 85.00

Sequence: 1 Check Type:
Chart of Account Number
21 0000 1400 920 6600 345 Basketball Official - 1/7/22

Checking Account ID:

PO Number:
Invoice Date: 01/07/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 85.00
Cost Center ID
85.00 Check Number:
1099 Detail Amount Asset/Asset Tag
85.00 N

In Full

Vendor ID: GRAWROBE GRAWIE, ROBERT

Description: Basketball Official - 1/8/22

Sequence: 1 Check Type:

Chart of Account Number Detail Description

21 0000 1400 920 6600 345 Basketball Official - 1/8/22

Checking Account ID:

PO Number:

Invoice Date: 01/08/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 85.00

Check Number: Check Date:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

85.00 85.00 N

Amount:

85.00

Vendor ID: HOTLUNCH

Description: Holiday Treats

Sequence: 1 Check Type:

Chart of Account Number Detail Description

21 0000 1400 950 7049 618 Holiday Treats

Checking Account ID:

PO Number:

Invoice Date: 12/15/2021 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00

Check Number: Check Date:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

177.25 N

Amount:

177.25

Vendor ID: IHSSA

Description: District Large Group Speech Entry Forms

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

21 0000 1400 910 6120 899 TV News Entry

21 0000 1400 910 6120 899 Short Film Entry

21 0000 1400 910 6120 899 Improv Entry

Checking Account ID:

PO Number:

Invoice Date: 01/03/2022 Due Date: 01/03/2022 Status: PP 1099 Amount: 0.00

Check Number: 13131 Check Date: 01/03/2022

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

18.00 N

In Full

Incomplete

Incomplete

Incomplete

Amount:

72.00

* Vendor ID: KELEJERR KELEHER, JERRY

Description: Basketball Official - 1/7/22

Sequence: 1 Check Type:

Chart of Account Number Detail Description

21 0000 1400 920 6600 345 Basketball Official - 1/7/22

Checking Account ID:

PO Number:

Invoice Date: 01/07/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 115.00

Check Number: Check Date:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

115.00 115.00 N

Amount:

115.00

Vendor ID: LOUGPATR LOUGHREN, PATRICK

Description: Wrestling Official - 1/6/22

Sequence: 1 Check Type:

Chart of Account Number Detail Description

21 0000 1400 920 6600 345 Wrestling Official - 1/6/22

Checking Account ID:

PO Number:

Invoice Date: 01/06/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 105.00

Check Number: Check Date:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

105.00 105.00 N

Amount:

105.00

Vendor ID: MAQVALL MAQUOKETA VALLEY CSD

Description: Wrestling Entry - 1/8/22

Sequence: 1 Check Type:

Chart of Account Number Detail Description

21 0000 1400 920 6600 810 Wrestling Entry - 1/8/22

Checking Account ID:

PO Number:

Invoice Date: 01/08/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00

Check Number: Check Date:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

80.00 N

Amount:

80.00

Vendor ID: MAYANDR MAY, ANDREW

Description: Wrestling Entry - 1/6/22

Sequence: 1 Check Type:

Chart of Account Number Detail Description

21 0000 1400 920 6600 345 Wrestling Entry - 1/6/22

Checking Account ID:

PO Number:

Invoice Date: 01/06/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 110.00

Check Number: Check Date:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

110.00 110.00 N

Amount:

110.00

Vendor ID: MONTSPOR MONTICELLO SPORTS

PO Number: 22-0159

Invoice Number: 121721-2

Amount:

195.00

Invoice Listing - Detail
Activity Invoices - January 2022

Description: Basketballs Sequence: 1 Check Type: Chart of Account Number 21 0000 1400 920 6600 739 Basketballs	Invoice Date: 12/17/2021 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00 Check Number: Detail Amount 1099 Detail Amount Asset/Asset Tag 195.00 N	In Full Final	Amount:
* Vendor ID: NIEHJEFF NIEHAUS, JEFF Description: Basketball Official - 1/7/22 Sequence: 1 Check Type: Chart of Account Number 21 0000 1400 920 6600 345 Basketball Official - 1/7/22	PO Number: Invoice Date: 01/07/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 125.00 Check Number: Detail Amount 1099 Detail Amount Asset/Asset Tag 125.00 N	In Full Final	125.00
Vendor ID: NLGBB NORTH LINN GIRLS BASKETBALL Description: 6th Grade Girls BB Tournament Entry Sequence: 1 Check Type: Check Chart of Account Number 21 0000 1400 950 7052 899 EB HOOPSTERS CLUB OTHER EXPENSES	PO Number: Invoice Date: 01/04/2022 Due Date: 01/04/2022 Status: PP 1099 Amount: 0.00 Check Number: 13132 Check Date: 01/04/2022 Detail Amount 1099 Detail Amount Asset/Asset Tag 160.00 N	In Full Final	160.00
Vendor ID: NEWPARL Parliamentary Procedure Instructional Material Center Description: Competitive Handbook Package Sequence: 1 Check Type: Chart of Account Number 21 0000 1400 950 7026 618 Dunbar Competitive Handbook Package	PO Number: 22-0212 Invoice Number: 21100 Invoice Date: 11/23/2021 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00 Check Number: Detail Amount 1099 Detail Amount Asset/Asset Tag 108.50 N	In Full Final	108.50
* Vendor ID: PEEPJAMA PEEPLES, JAMAAL Description: Basketball Official - 1/7/22 Sequence: 1 Check Type: Chart of Account Number 21 0000 1400 920 6600 345 Basketball Official - 1/7/22	PO Number: Invoice Date: 01/07/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 100.00 Check Number: Detail Amount 1099 Detail Amount Asset/Asset Tag 100.00 N	In Full Final	100.00
Vendor ID: PIECPIPE PIECES BY PIPER Description: Wristlets Sequence: 1 Check Type: Chart of Account Number 21 0000 1400 910 6120 618 Wristlets	PO Number: Invoice Date: 01/04/2022 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00 Check Number: Detail Amount 1099 Detail Amount Asset/Asset Tag 44.00 N	In Full Final	44.00
Vendor ID: SHOPSCRIP SHOP WITH SCRIP Description: Scrip Cards Sequence: 1 Check Type: Check Chart of Account Number 21 0000 1400 950 7010 618 Gift Cards	PO Number: 22-0253 Invoice Number: 119692989 Invoice Date: 01/07/2022 Due Date: 01/07/2022 Status: PP 1099 Amount: 0.00 Check Number: 13133 Check Date: 01/07/2022 Detail Amount 1099 Detail Amount Asset/Asset Tag 2,395.31 N	In Full Final	2,395.31
Vendor ID: STARMONT STARMONT CSD Description: Wrestling Entry Fee - 12/18/21 Sequence: 1 Check Type:	PO Number: Invoice Date: 12/18/2021 Due Date: 01/12/2022 Status: A 1099 Amount: 0.00 Check Number:	In Full Final	90.00

<u>Chart of Account Number</u>	<u>Detail Description</u>
21 0000 1400 920 6600 810	Wrestling Entry Fee - 12/18/21

Vendor ID: WALMART WALMART COMMUNITY BRC

Description: Feed Store Supplies
Sequence: 1 Check Type:

Checking Account ID:

<u>Chart of Account Number</u>	<u>Detail Description</u>
21 0000 1400 950 7015 618	FEED STORE SUPPLIES

<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
'		N		
	90.00			

PO Number:		Invoice Number:	125552	Amount:	27.62
Invoice Date:	12/20/2021	Due Date:	01/12/2022	Status:	A 1099 Amount: 0.00
		Check Number:		Check Date:	
Cost Center ID		Detail Amount	1099	Detail Amount	<u>Asset/Asset Tag</u>
			27.62	N	In Full

Batch 1099 Total:	840.00	Batch Total:	7,666.57
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Report 1099 Total:	840.00
Report Total:	7,666.57

Activity Fund Balance Report - Summary - Exclude Encumbrances
12/2021 - 12/2021

Chart of Account Number	Chart of Account Description	Beginning Balance	Expenses	Revenues	Balance Change	Balance
21 0000 729 000	Fund Balance	0.00	0.00	0.00	0.00	0.00
21 6111 729 910	DRAMA	8,894.31	845.00	0.00	0.00	8,049.31
21 6120 729 910	SPEECH	597.78	160.00	413.00	0.00	850.78
21 6210 729 910	MUSIC CLUB	764.38	200.00	353.00	0.00	917.38
21 6220 729 910	PEP BAND	1,279.28	0.00	153.00	0.00	1,432.28
21 6221 729 910	MUSIC TRIP	3,081.40	50.00	0.00	0.00	3,031.40
21 6222 729 910	COLOR GUARD	775.15	0.00	0.00	0.00	775.15
21 6600 729 920	ATHLETICS	15,250.86	3,559.00	3,575.00	0.00	15,266.86
21 6645 729 920	CROSS COUNTRY	14.50	0.00	0.00	0.00	14.50
21 6693 729 920	CHEERLEADING	2,945.89	0.00	0.00	0.00	2,945.89
21 6694 729 920	DANCE TEAM	1,819.02	0.00	630.00	0.00	2,449.02
21 6710 729 920	BOYS' BASKETBALL	1,378.72	0.00	0.00	0.00	1,378.72
21 6720 729 920	FOOTBALL	5,703.02	192.00	0.00	0.00	5,511.02
21 6730 729 920	BASEBALL	1,403.09	0.00	0.00	0.00	1,403.09
21 6740 729 920	BOYS' TRACK	376.59	0.00	0.00	0.00	376.59
21 6760 729 920	BOYS' GOLF	1,470.67	0.00	0.00	0.00	1,470.67
21 6790 729 920	WRESTLING	300.82	0.00	0.00	0.00	300.82
21 6810 729 920	GIRLS BASKETBALL	493.15	0.00	0.00	0.00	493.15
21 6815 729 920	VOLLEYBALL	2,936.41	0.00	0.00	0.00	2,936.41
21 6835 729 920	SOFTBALL	332.65	0.00	0.00	0.00	332.65
21 6840 729 920	GIRLS TRACK	412.27	0.00	0.00	0.00	412.27
21 6860 729 920	GIRLS' GOLF	216.93	0.00	0.00	0.00	216.93
21 7010 729 950	FBLA	11,186.91	2,438.26	4,185.00	0.00	12,933.65
21 7011 729 950	HS STUDENT COUNCIL	3,736.11	59.40	1,055.85	0.00	4,732.56
21 7012 729 950	SPANISH CLUB	1,823.45	0.00	0.00	0.00	1,823.45
21 7013 729 950	NHS	109.90	0.00	21.17	0.00	131.07
21 7015 729 950	FEED STORE	181.59	48.93	594.25	0.00	726.91
21 7016 729 950	FITNESS CLUB	37.55	0.00	0.00	0.00	37.55
21 7018 729 950	LIBRARY CLUB	221.36	2,853.61	3,163.61	0.00	531.36
21 7020 729 950	NEWSPAPER	1,736.84	0.00	0.00	0.00	1,736.84
21 7021 729 950	ROBOTICS CLUB	1,167.78	44.50	0.00	0.00	1,123.28
21 7025 729 950	TECHNOLOGY	906.97	0.00	0.00	0.00	906.97
21 7026 729 950	FFA	22,904.40	7,430.09	788.00	0.00	16,262.31
21 7027 729 950	ART CLUB	1,060.81	0.00	0.00	0.00	1,060.81
21 7040 729 950	MS STUDENT COUNCIL	143.18	0.00	0.00	0.00	143.18
21 7041 729 950	SOUND SYSTEM	1,026.50	0.00	0.00	0.00	1,026.50
21 7042 729 950	TRAPSHOOTING	2,327.94	0.00	0.00	0.00	2,327.94
21 7043 729 950	LIL BUC B-BASKETBALL	763.91	0.00	0.00	0.00	763.91

Chart of Account Number	Chart of Account Description	Beginning Balance	Expenses	Revenues	Balance Change	Balance
21 7049 729 950	PBIS	3,665.37	0.00	0.00	0.00	3,665.37
21 7050 729 950	ELEM. ST. COUNCIL	1,741.12	200.00	15.60	0.00	1,556.72
21 7051 729 950	CAMP WAPSIE	7,603.05	0.00	0.00	0.00	7,603.05
21 7052 729 950	EB HOOPSTERS CLUB	1,730.66	0.00	0.00	0.00	1,730.66
21 7053 729 950	BREAKFAST CLUB	1,145.86	0.00	0.00	0.00	1,145.86
21 7077 729 950	CLASS OF 2022	1,543.60	0.00	0.00	0.00	1,543.60
21 7078 729 950	CLASS OF 2023	1,242.98	0.00	0.00	0.00	1,242.98
21 7079 729 950	CLASS OF 2024	1,379.41	0.00	0.00	0.00	1,379.41
21 7080 729 950	CLASS OF 2025	755.76	0.00	0.00	0.00	755.76
21 7081 729 950	CLASS OF 2026	525.00	0.00	0.00	0.00	525.00
21 7082 729 950	CLASS OF 2027	55.00	0.00	0.00	0.00	55.00
21 8000 729 910	ANNUAL	7,898.42	0.00	0.00	0.00	7,898.42
21 8001 729 910	BUCCANEER CLUB	1,986.93	0.00	0.00	0.00	1,986.93
21 8002 729 910	THE BUCCANEER NETWORK	2,109.81	0.00	0.00	0.00	2,109.81
21 8004 729 910	INTEREST	439.73	0.00	86.48	0.00	526.21
Fund Total: 21		133,604.79	18,080.79	15,033.96	0.00	130,557.96

[illegible]

EAST BUCHANAN SCHOOL
MILEAGE REPORT
2021-2022

MONTH	VAN/CAR ROUTE MILES	VAN/CAR ADMIN. MILES	VAN/CAR SPECIAL ED. MILES	VAN/CAR ACTIVITY MILES	VAN/CAR CUSTODIAL MILES	VAN/CAR TRANSP. MILES	VAN/CAR DRIVERSED MILES	VAN/CAR OTHER MILES	VAN/CAR MISC. MILES	VAN/CAR TOTAL MILES
JULY	8	0	188	202	229	18	0	0	32	677
AUGUST	0	70	1,013	1,895	315	0	0	0	28	3,321
SEPTEMBER	0	187	3,089	1,391	210	194	0	0	59	5,130
OCTOBER	0	503	4,410	3,937	323	311	0	0	0	9,484
NOVEMBER	0	702	3,803	1,249	164	165	0	0	0	6,083
DECEMBER	0	125	4,354	526	182	163	0	0	0	5,350
JANUARY	0	0	0	0	0	0	0	0	0	0
FEBRUARY	0	0	0	0	0	0	0	0	0	0
MARCH	0	0	0	0	0	0	0	0	0	0
APRIL	0	0	0	0	0	0	0	0	0	0
MAY	0	0	0	0	0	0	0	0	0	0
JUNE	0	0	0	0	0	0	0	0	0	0
TOTAL	8	1,587	16,857	9,200	1,423	851	-	-	119	30,045
BUS/VAN TOTAL	32,302	1,587	16,857	14,248	1,423	970	-	-	181	67,568

EAST BUCHANAN COMMUNITY SCHOOL

GASOLINE/DIESEL EXPENSE REPORT

2020-2021

MONTH	GALS. GAS PURCH.	COST PER GAL.	COST GAS PURCH.	GALS. DIESEL PURCH.	COST PER GAL.	COST DIESEL PURCH.	TOTAL COST GAS/DIESEL PURCHASED	GALS. GAS CONS.	COST GAS CONS.	GALS DIESEL CONS.	COST DIESEL CONS.	TOTAL COST GAS/DIESEL CONSUMED
JULY	484.000	\$ 2.650	\$ 1,282.35	747.000	\$ 2.432	\$ -	\$ 3,099.36	51.000	\$ 135.12	203.000	\$ 493.78	\$ 628.90
AUG.	-	\$ -	\$ -	-	\$ -	\$ -	\$ -	268.000	\$ 710.07	303.000	\$ 730.84	\$ 1,440.91
SEPT.	499.000	\$ 2.670	\$ 1,332.18	751.000	\$ 2.546	\$ 1,912.05	\$ 3,244.23	469.000	\$ 1,252.09	1,157.000	\$ 1,912.05	\$ 3,164.14
OCT.	346.000	\$ 2.886	\$ 998.39	552.000	\$ 2.891	\$ 1,595.89	\$ 2,594.28	635.000	\$ 1,832.29	1,107.000	\$ 3,200.45	\$ 5,032.74
NOV.	454.000	\$ 2.886	\$ 1,310.06	872.000	\$ 2.771	\$ 2,416.40	\$ 3,726.46	468.000	\$ 1,350.46	1,111.000	\$ 3,078.69	\$ 4,429.15
DEC.	621.000	\$ 2.744	\$ 1,704.15	1,479.000	\$ 2.661	\$ 3,935.23	\$ 5,639.38	453.000	\$ 1,243.03	1,180.000	\$ 3,139.98	\$ 4,383.01
JAN.	-	\$ -	\$ -	-	\$ -	\$ -	\$ -	-	\$ -	-	\$ -	\$ -
FEB.	-	\$ -	\$ -	-	\$ -	\$ -	\$ -	-	\$ -	-	\$ -	\$ -
MARCH	-	\$ -	\$ -	-	\$ -	\$ -	\$ -	-	\$ -	-	\$ -	\$ -
APR.	-	\$ -	\$ -	-	\$ -	\$ -	\$ -	-	\$ -	-	\$ -	\$ -
MAY	-	\$ -	\$ -	-	\$ -	\$ -	\$ -	-	\$ -	-	\$ -	\$ -
JUNE	-	\$ -	\$ -	-	\$ -	\$ -	\$ -	-	\$ -	-	\$ -	\$ -
TOTALS	2,404.000		\$6,627.13	4,401.000		\$9,859.57	\$18,303.71	2,344.000	\$6,523.06	5,061.000	\$12,555.79	\$19,078.85

East Buchanan Community School District
Cash Summary Report

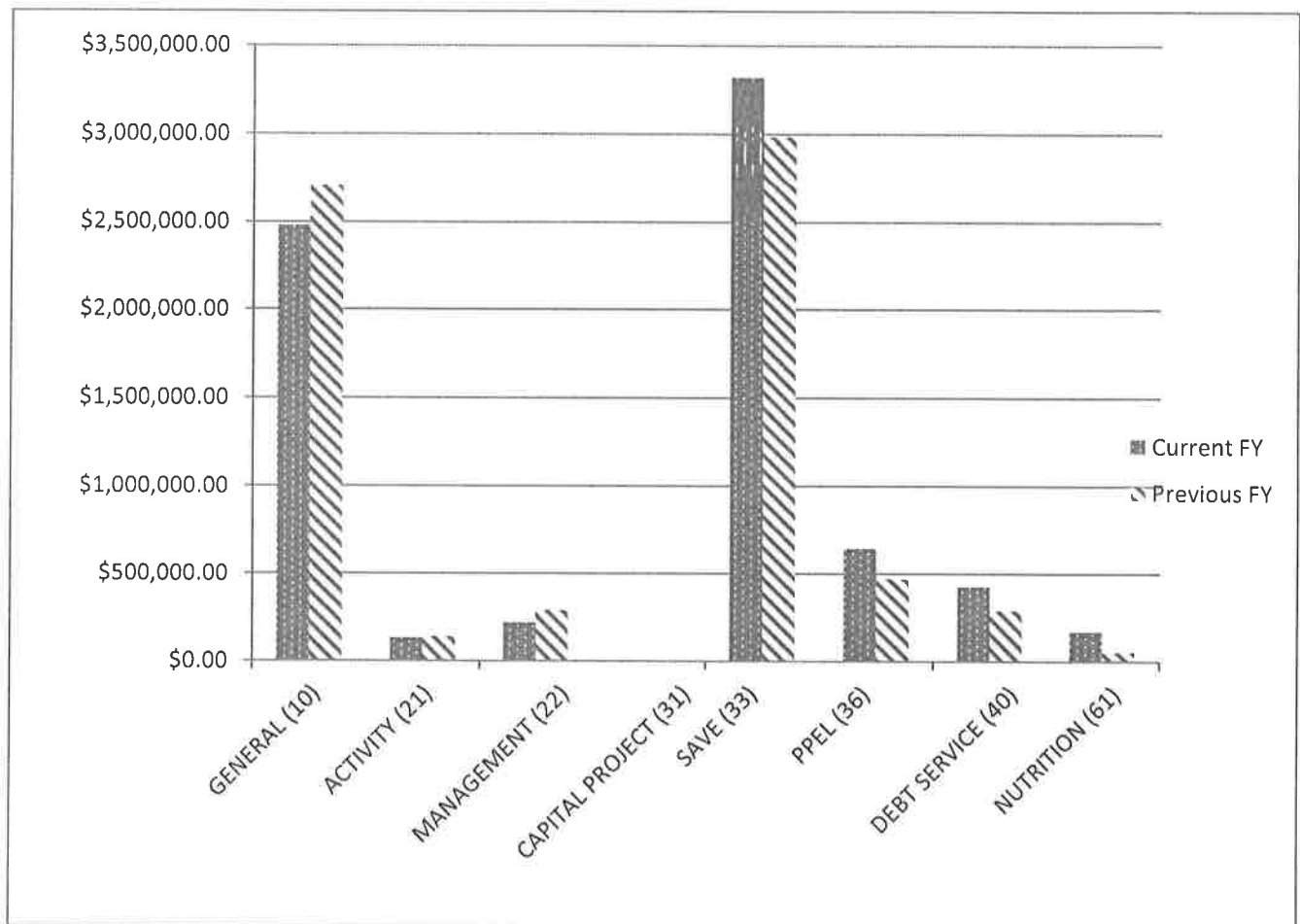
	<u>Jul-21</u>	<u>Aug-21</u>	<u>Sep-21</u>	<u>Oct-21</u>	<u>Nov-21</u>	<u>Dec-21</u>
10-GENERAL FUND						
Beginning Balance	2,950,610.76	2,448,296.94	1,895,154.69	1,785,715.27	2,555,393.19	2,491,530.81
Revenue	81,773.40	170,952.28	445,736.85	1,353,982.72	584,114.21	591,644.61
Expenditures	584,087.22	724,094.53	555,176.27	584,304.80	647,976.59	604,100.65
Ending Balance	2,448,296.94	1,895,154.69	1,785,715.27	2,555,393.19	2,491,530.81	2,479,074.77
21-ACTIVITY FUND						
Beginning Balance	136,915.26	122,184.38	130,840.99	140,911.50	136,580.80	133,604.79
Revenue	1,536.73	14,424.03	20,871.38	83,774.79	18,901.64	15,033.96
Expenditures	16,267.61	5,767.42	10,800.87	88,105.49	21,877.65	18,080.79
Ending Balance	122,184.38	130,840.99	140,911.50	136,580.80	133,604.79	130,557.96
22-MANAGEMENT FUND						
Beginning Balance	319,600.48	199,324.82	197,952.92	197,663.14	219,601.31	218,127.32
Revenue	1,218.24	0.00	710.22	23,340.02	4,411.01	1,281.04
Expenditures	121,493.90	1,371.90	1,000.00	1,401.85	5,885.00	1,351.00
Ending Balance	199,324.82	197,952.92	197,663.14	219,601.31	218,127.32	218,057.36
33-SAVE						
Beginning Balance	3,161,229.02	3,006,217.31	3,058,474.79	3,110,693.49	3,151,960.02	3,283,547.87
Revenue	233,048.29	52,257.48	52,218.70	52,297.53	131,587.85	68,481.39
Expenditures	388,060.00	0.00	0.00	11,031.00	0.00	32,235.00
Ending Balance	3,006,217.31	3,058,474.79	3,110,693.49	3,151,960.02	3,283,547.87	3,319,794.26
36-PPEL						
Beginning Balance	617,863.38	609,637.24	564,299.81	543,531.45	661,820.94	637,434.02
Revenue	5,026.96	368.48	6,718.18	160,447.49	40,632.09	12,748.12
Expenditures	13,253.10	45,705.91	27,486.54	42,158.00	65,019.01	6,425.03
Ending Balance	609,637.24	564,299.81	543,531.45	661,820.94	637,434.02	643,757.11
40-DEBT SERVICE						
Beginning Balance	236,982.41	241,765.42	241,282.58	248,089.80	374,676.50	412,500.34
Revenue	596,117.25	17.16	6,807.22	210,180.45	38,123.84	44,610.49
Expenditures	591,334.24	500.00	0.00	83,593.75	300.00	32,235.00
Ending Balance	241,765.42	241,282.58	248,089.80	374,676.50	412,500.34	424,875.83
less: Escrow Acct	215,000.00	215,000.00	215,000.00	215,000.00	215,179.09	215,179.09
	26,765.42	26,282.58	33,089.80	159,676.50	197,321.25	209,696.74
61-NUTRITION FUND						
Beginning Balance	129,985.33	131,211.21	138,589.96	125,563.27	152,471.06	117,521.46
Revenue	3,707.94	7,876.81	13,535.83	80,021.89	16,616.42	105,652.23
Expenditures	2,482.06	498.06	26,562.52	53,114.10	51,566.02	53,236.99
Ending Balance	131,211.21	138,589.96	125,563.27	152,471.06	117,521.46	169,936.70
less: Received on Acct	6,735.72	12,604.12	11,277.82	9,492.37	8,923.08	8,594.63
	124,475.49	125,985.84	114,285.45	142,978.69	108,598.38	161,342.07
EMPLOYER'S PAYROLL EXPENSE:						
Gross Wages-hourly	45,842.88	35,196.48	39,455.83	96,593.41	98,140.31	92,218.19
Gross Wages-contract	289,623.24	290,390.02	322,384.59	323,356.53	327,647.50	318,544.68
	335,466.12	325,586.50	361,840.42	419,949.94	425,787.81	410,762.87
Employer paid deductions	47,964.48	46,670.85	59,972.02	54,647.37	52,447.91	51,207.87
Employer paid IPERS	30,809.03	29,295.13	33,303.46	38,814.49	39,401.11	37,458.69
Employer paid FICA	25,939.04	22,765.01	26,453.43	31,134.18	31,577.13	30,370.94
	104,712.55	98,730.99	119,728.91	124,596.04	123,426.15	119,037.50
TOTAL	440,178.67	424,317.49	481,569.33	544,545.98	549,213.96	529,800.37

CASH SUMMARY REPORT

EAST BUCHANAN COMMUNITY SCHOOL

December 2021

Fund Description	Beginning	Revenues	Expenditures	FY22 Ending	FY21 End Balance	Difference
GENERAL (10)	\$2,491,530.81	\$591,644.61	\$604,100.65	\$2,479,074.77	\$2,705,627.13	(\$226,552.36)
ACTIVITY (21)	\$133,604.79	\$15,033.96	\$18,080.79	\$130,557.96	\$136,934.18	(\$6,376.22)
MANAGEMENT (22)	\$218,127.32	\$1,281.04	\$1,351.00	\$218,057.36	\$287,968.93	(\$69,911.57)
CAPITAL PROJECT (31)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
SAVE (33)	\$3,283,547.87	\$68,481.39	\$32,235.00	\$3,319,794.26	\$2,983,000.93	\$336,793.33
PPEL (36)	\$637,434.02	\$12,748.12	\$6,425.03	\$643,757.11	\$471,013.73	\$172,743.38
DEBT SERVICE (40)	\$412,500.34	\$44,610.49	\$32,235.00	\$424,875.83	\$286,777.56	\$138,098.27
NUTRITION (61)	\$117,521.46	\$105,652.23	\$53,236.99	\$169,936.70	\$50,292.46	\$119,644.24
TOTAL				\$7,386,053.99	\$6,921,614.92	\$464,439.07



RECEIPTS

	MONTH	PRIOR RECEIPT	YEAR TO DATE
Student Breakfast	\$0.00	\$0.00	\$0.00
Student Lunch	\$76.55	\$1,818.36	\$1,894.91
Adult Breakfast	\$10.50	\$108.00	\$118.50
Adult Lunch	\$414.75	\$1,560.25	\$1,975.00
Cafeteria	\$3,712.95	\$16,449.85	\$20,162.80
Snacks	\$1,551.87	\$6,005.82	\$7,557.69
Federal Breakfast	\$15,947.14	\$9,702.24	\$25,649.38
Federal Lunch	\$73,090.95	\$49,603.75	\$122,694.70
State Breakfast	\$0.00	\$148.07	\$148.07
State Lunch	\$0.00	\$455.85	\$455.85
ECO Grant	\$0.00	\$1,553.98	\$1,553.98
Other Revenues	\$0.00	\$2,080.56	\$2,080.56
Other Purchased Services	-\$47.16	-\$311.48	-\$358.64
Rebate	\$792.57	\$0.00	\$792.57
Interest	\$99.41	\$417.30	\$516.71
TOTAL INCOME	\$95,649.53	\$89,592.55	\$185,242.08

EXPENDITURES

	MONTH	PRIOR EXPENSE	YEAR TO DATE
Food	\$18,417.22	\$67,936.14	\$86,353.36
Commodities	\$0.00	\$0.00	\$0.00
Supplies	\$582.25	\$3,356.55	\$3,938.80
Shared Contract	\$14,085.28	\$0.00	\$14,085.28
Purchased Services	\$0.00	\$933.75	\$933.75
Equipment	\$0.00	\$1,212.43	\$1,212.43
Travel	\$0.00	\$0.00	\$0.00
Other Expenses	\$194.00	\$532.73	\$726.73
Cooks Salaries	\$7,441.97	\$19,571.57	\$27,013.54
Benefits	\$2,513.57	\$8,513.25	\$11,026.82
TOTAL EXPENDITURES	\$43,234.29	\$102,056.42	\$145,290.71

BALANCE

	0	PRIOR BALANCE	YEAR TO DATE
Beginning Balance	\$0.00	\$129,985.33	\$129,985.33
Income	\$95,649.53	\$89,592.55	\$185,242.08
Expenditures	\$43,234.29	\$102,056.42	\$145,290.71
FUND BALANCE	\$52,415.24	\$117,521.46	\$169,936.70

MEALS SERVED

	MONTH	PRIOR BALANCE	YEAR TO DATE
Paid Student Breakfasts	0	0	0
Reduced Student Breakfasts	0	0	0
Free Student Breakfasts	0	0	0
Second Breakfasts	35	249	284
Adult Breakfasts	7	73	80
Student Guest Breakfasts	0	0	0
Complimentary Breakfasts	0	0	0
TOTAL BREAKFASTS SERVED	42	322	364

Paid Student Lunches	0	0	0
Reduced Student Lunches	0	0	0
Free Student Lunches	0	0	0
Second Lunches	0	0	0
Adult Lunches	112	407	519
Student Guest Lunches	0	0	0
Complimentary Lunches	0	0	0
TOTAL LUNCHES SERVED	112	407	519

SSO Breakfasts Served	2,571	10,416	12,987
SSO Lunches Served	7,030	28,419	35,449

2021-2022

East Buchanan

Hot Lunch

Report

DAYS MEALS SERVED

July	0
August	7
September	20
October	20
November	18
December	16
January	0
February	0
March	0
April	0
May	0
June	0
TOTALS	81

December, 2021

Certified Budget compared to Actual Revenues/Expenditures - All Funds

		FY22 Certified Budget	as of 12/31/21	over / (under) budget	
Taxes Levied on Property	1	\$ 2,907,753.00	\$ 1,617,717.55		
Utility Replacement Excise Tax	2	\$ 46,274.00	\$ 22,848.82		
Income Surtaxes	3	\$ 158,455.00	\$ 113,205.00		
Tuition\Transportation Received	4	\$ 575,000.00	\$ 20,635.00		
Earnings on Investments	5	\$ 81,500.00	\$ 25,582.36		
Nutrition Program Sales	6	\$ 165,000.00	\$ 31,708.90		
Student Activities and Sales	7	\$ 189,000.00	\$ 104,038.70		
Other Revenues from Local Sources	8	\$ 91,000.00	\$ 85,280.60		
Revenue from Intermediary Sources	9	\$ -			
State Foundation Aid	10	\$ 4,059,983.00	\$ 1,610,196.40		
Instructional Support State Aid	11	\$ 15,336.00			
Other State Sources	12	\$ 581,350.00	\$ 410,715.25		
Commercial & Industrial State Replacement	13	\$ 20,453.00	\$ 8,190.93		
Title 1 Grants	14	\$ 70,000.00	\$ 6,575.22		
IDEA and Other Federal Sources	15	\$ 320,000.00	\$ 179,441.67		
Total Revenues	16	\$ 9,281,104.00	\$ 4,236,136.40		
General Long-Term Debt Proceeds	17	\$ -	\$ -		
Transfers In	18	\$ 313,178.00	\$ 219,177.50		
Proceeds of Fixed Asset Dispositions	19	\$ -	\$ -		
Special Items/Upward Adjustments	20	\$ -	\$ (6,002.55)		
Total Revenues & Other Sources	21	\$ 9,594,282.00	\$ 4,449,311.35		
Beginning Fund Balance	22	\$ 6,697,739.27	\$ 6,697,739.27		
Total Resources	23	\$ 16,292,021.27	\$ 11,147,050.62		
*Instruction	24	\$ 5,284,000.00	\$ 1,729,944.66	\$ (3,554,055.34)	33%
Student Support Services	25	\$ 207,500.00	\$ 84,700.43		
Instructional Staff Support Services	26	\$ 483,000.00	\$ 265,581.76		
General Administration	27	\$ 266,500.00	\$ 128,821.05		
School/Building Administration	28	\$ 375,000.00	\$ 179,373.36		
Business & Central Administration	29	\$ 120,000.00	\$ 69,963.81		
Plant Operation and Maintenance	30	\$ 627,000.00	\$ 342,638.27		
Student Transportation	31	\$ 453,000.00	\$ 242,144.90		
This row is intentionally left blank	32	\$ -	\$ -		
*Total Support Services (lines 25-32)	32A	\$ 2,532,000.00	\$ 1,313,223.58	\$ (1,218,776.42)	52%
*Noninstructional Programs	33	\$ 345,000.00	\$ 144,267.77	\$ (200,732.23)	42%
Facilities Acquisition and Construction	34	\$ 468,044.00	\$ 20,594.84		
Debt Service	35	\$ 662,965.00	\$ 303,571.25		
AEA Support - Direct to AEA	36	\$ 295,483.00	\$ 104,560.40		
*Total Other Expenditures (lines 34-36)	36A	\$ 1,426,492.00	\$ 428,726.49	\$ (997,765.51)	30%
Total Expenditures	37	\$ 9,587,492.00	\$ 3,616,162.50		
Transfers Out	38	\$ 313,178.00	\$ 219,177.50		
Other Uses	39	\$ -	\$ -		
Total Expenditures & Other Uses	40	\$ 9,900,670.00	\$ 3,835,340.00		
Ending Fund Balance	41	\$ 6,391,351.27	\$ 7,311,710.62		
Total Requirements	42	\$ 16,292,021.27	\$ 11,147,050.62		

This report shows the district's progress towards staying on budget according to the certified budget published and approved. The expenditures with * must stay below the budgeted amount to avoid having to revise the budget by May 31st of each fiscal year. Revenues and expenses will continue for the fiscal year until the Certified Annual Report (CAR) is completed in September.

SBRC Application for At-Risk/Dropout MSA

From School Business Alert: The purpose of the requested MSA is to provide additional resources for the 2022-2023 school year that are necessary to implement the at-risk, dropout prevention, and returning dropout services for identified students that are included in the local school board's adopted plan. The purpose is not for increasing regular program spending authority.

#	Description	Amount
1	District cost per pupil	\$7,227
2	Certified enrollment (October 1, current school year) Certified enrollment was found and certified on 10/15/2021 12:41:08 PM.	552.5
3	Maximum modified supplemental amount possible ($0.033 \times \text{line 1} \times \text{line 2}$)	\$131,766
4	Previous FY Carry-forward from CAR Project 1116 Carry-forward: \$0 Project 1119 Carry-forward: \$0	\$0
5	Requested modified supplemental amount Enter an amount equal to, or less than ($\text{Ln3} - \text{Ln4}$): \$131,766	\$131,766
"Requested MSA and required match (and the associated spending authority) is solely for the purpose of implementing the district's board-adopted At-Risk/Dropout program."		
6	Required local match (Total Project Cost($\text{Line 5} / 0.75$) $\times 0.25$)	\$43,922
7	Enter the number of enrolled students in the budget year identified as returning dropouts and potential dropouts.	

The amount is calculated based on the finalized Fall Certified Enrollment numbers. There will be no increase in taxes and we do not receive more money from the state.

Motion to approve:

I move that the Board of Directors of the East Buchanan Community School District approve the application to the School Budget Review Committee in the amount of \$131,766.00 for At-Risk/Dropout Prevention for the 2022-2023 school year.

Motion by: _____

Second by: _____

Submit to IDOE: _____

BUS BIDS

Current fleet includes:

<u>Year</u>	<u>Make</u>	<u>Fuel</u>	<u>Capacity</u>	<u>Purchase Price</u>	<u>Purchased from</u>	<u>Date</u>
2012	Bluebird	Diesel	78	\$ 84,843	School Bus Sales	12/6/2010
2015	Bluebird	Diesel	78	\$ 93,643	School Bus Sales	11/13/2013
2015	IC CE	Diesel	65	\$ 79,259	Hoglund Bus Co	8/15/2014
2018	Bluebird	Gas	77	\$ 86,703	School Bus Sales	11/22/2016
2020	IC CE	Diesel	71	\$ 86,698	Hoglund Bus Co	8/23/2019
2020	Bluebird	Diesel	71	\$ 85,315	School Bus Sales	10/19/2018
2022	IC CE	Diesel	71	\$ 96,579	Hoglund Bus Co	12/11/2020
2017	IC CE	Diesel	65	\$ 59,999 if purchase (currently lease)	Hoglund Bus Co	Oct 2021
2017	IC CE	Diesel	65	\$ 64,065 if purchase (currently lease)	Hoglund Bus Co	Oct 2021
2023	IC CE	Diesel	71	\$102,899 - not yet delivered	Hoglund Bus Co	

Bids received from:

Vendor	Year-Model	Fuel	Seated	Quote
Hoglund Bus Co	2023 IC CE		71	\$ 107,959.00
School Bus Sales	2023 Blue Bird	Diesel	71	\$ 113,198.00

"I make a motion to approve the bid from _____ for the quoted price of

\$ _____.



East Buchanan CSD
414 5th St. N.
Winthrop, IA 50682

Dear Adam Halford,

We appreciate the opportunity to work with you to resolve your transportation needs.

The prices listed below are for model year 2023.

In addition to your specs, IC offers many additional items at no extra cost which will lower your cost of ownership.

- Rust is always an issue, so we use **60% thicker** side sheet steel (1.6 mm vs 1.00 mm) than Thomas/Bluebird
- **50% more** galvanizing prior to paint G-90 (IC) vs G60 (Thomas/Bluebird)
- **The widest entrance door at 33" and widest steps at 36"** because everyone has a book bag.
- **36" width non tapered step well** for student safety
- **Four one piece rub rails with 3 wrap around** for more strength (all sealed on the top)
- **All seat frames are seat belt ready** so 4 different backs can be used without changing frames. (built-in car seats, lap/shoulder, CRS/lap shoulder and regular)
- **3 Piece Hood for LCO** and easy replacement in case of accident
- **Bendix ACTIVE Stability Control and Bendix traction Control**
- **Only fully caged fuel tank** under a school bus
- **Riveted Ceiling panels**
- **IC body is fully riveted for safety, NOT GLUED**
- **ALL drivers controls are forward of driver** to keep eyes on the road
- **78" Headroom**

Get what you wanted, and much more.

Order Out: 2023 IC CE
77 passenger SEATED 71
ISB 250HP / 660LB
2500 Allison
Air Brake
Rear Air Ride
LED pkg
REI 4 Camera system: 3 interior cameras, stop arm camera, event marker
\$107,959.00



SCHOOL BUS SALES Co.

2023 Blue Bird 71 passenger-DIESEL-

CUSTOMER NAME: East Buchanan CSD
ADDRESS: 414 5th Street North
CITY/ZIP CODE: Winthrop, IA 50682
BODY MODEL: BBCV3310

DATE: 1/4/2022
PHONE: (319)935-3767
CAPACITY: 71
QUANTITY: 1

PRICE PER UNIT F.O.B. WATERLOO, IA

\$113,198.00

DELIVERY CHARGE PER UNIT TO WINTHROP, IOWA

INCLUDED

SUBTOTAL PER UNIT \$113,198.00

MULTIPLY BY 1 UNITS=

TOTAL \$113,198.00

LESS: TRADE IN UNITS

TRADE-IN VALUE \$0.00

Pricing good for 40 days from quote date

TOTAL BID PRICE **\$113,198.00**

OPTIONAL EQUIPMENT TO BE ADDED TO TOTAL PRICE OF UNIT:

Grey one piece floor with studded step tread

INCLUDED

Electric door with front and rear vandal locks

INCLUDED

50K midship heater with heater booster pump

INCLUDED

Air drivers seat-RH/LH armrest/ Grey passenger seats

INCLUDED

Dual Air stop arm-LED strobing/Air cross arm

INCLUDED

Overhead emergency equip. compartment

INCLUDED

250HP Cummins with Allison 2500pts

INCLUDED

Rear air suspension 23K/Rear axle 23K

INCLUDED

100 gallon fuel tank

INCLUDED

LED exterior lights

INCLUDED

8 Way LED strobing lights

INCLUDED

REI camera system 3 interior and 1 exterior camera

INCLUDED

NOTE: WE RESERVE THE RIGHT TO NOT ACCEPT TRADE IN UNITS IF NOT IN THE SAME GENERAL CONDITION AS WHEN APPRAISED.

NOTE: ALL QUOTATIONS ARE QUOTED WITH PAYMENTS DUE ON DELIVERY OF UNIT. IF DISTRICT PICKS UP AT BODY PLANT, PAYMENT MUST BE RECEIVED BEFORE UNIT WILL BE RELEASED.

SUBMITTED BY: _____

Jon Andrews
Jon Andrews, Sales Representative

EMPLOYEE VACCINATION/TESTING FOR COVID-19

In an effort to comply with federal Occupational Safety and Health Administration requirements, the district is requiring all employees to become fully vaccinated against COVID-19, or in the alternative to produce weekly evidence of negative COVID-19 testing and utilize face coverings at work sites.

Vaccination

All employees are required to become fully vaccinated against COVID-19. Full vaccination occurs when an employee has received both primary COVID-19 vaccination doses, or one single dose if the vaccine only requires one dose, and have waited two weeks following the last dose administered. This requirement will become effective no later than ~~December 6, 2021~~ January 10, 2022. Employees who have received full vaccination against COVID-19 must submit proof of vaccination no later than ~~December 6, 2021~~ January 10, 2022. Employees who have not received both (if a vaccine requires a 2 dose regimen) primary doses of a COVID-19 vaccine will be required to comply with the testing and face covering requirements of the section below. Employees who have received both primary doses of the COVID-19 vaccine on or before ~~December 6, 2021~~ January 10, 2021, but who have not yet passed the two-week waiting period for full vaccination efficacy are not required to comply with the testing and face covering requirements of the section below.

Face Coverings and Testing

Beginning ~~December 6, 2021~~ January 10, 2022, employees who do not wish to obtain vaccination against COVID-19 must wear face coverings at all times while indoors, in a vehicle, or in another enclosed space as described in detail in procedure 403.7R1. Beginning January 4, 2022, employees who are not fully vaccinated must also provide proof of negative COVID-19 test results every 7 days.

Reasonable Accommodations

The vaccine requirement does not apply to employees for whom a vaccine is medically contraindicated; for whom medical necessity requires a delay in vaccination; or who are legally entitled to a reasonable accommodation due to a disability or sincerely held religious beliefs, practices or observances. If an employee requires accommodation from any other part of the policy for medical or religious reasons, the employee may request one. Qualifying employees will be expected to submit verification of one of these exemptions in order to receive an accommodation.

Employees who fail to abide by the requirements of this policy may face disciplinary action up to and including termination. It is the obligation of the Superintendent to establish appropriate procedures necessary to enforce this policy.

NOTE: This is a mandatory policy for districts which employ 100 or more employees, regardless of full time or part time status. This should also include temporary employees such as substitute teachers. For more information on this policy and supporting guidance, see IASB Policy Primer 30-2.

Legal Reference: 29 C.F.R Part 1910.501
42 U.S.C. 12101
42 U.S.C. 2000e
34 C.F.R. pt. 100
34 C.F.R. pt. 104
Iowa Code ch. 216

Cross Reference: 403.3 Communicable Diseases

Approved _____

Reviewed _____

Revised _____

EMPLOYEE VACCINATION/TESTING FOR COVID-19 REGULATION

Acceptable Proof of Vaccination Status

To satisfy the vaccination requirement within this policy, employees must submit to the Superintendent or Superintendent's designee acceptable proof of vaccination status no later than ~~December 6, 2021~~ January 10, 2022. Acceptable proof of vaccination status includes:

1. Immunization records from a healthcare provider or pharmacy;
2. A copy of a COVID-19 Vaccination Record Card;
3. A copy of medical records documenting immunization;
4. A copy of immunization records from a public health, state or tribal immunization information system;
5. Any other official documentation that contains the type of vaccine administered, dates of administration, and the name of the administering health provider or clinic;
6. If any other records are unavailable a signed and dated personal attestation statement.

Any employee who fails to provide acceptable proof of vaccination status may face disciplinary action up to and including termination.

Record Keeping

The district is required by law to keep a roster of the vaccination status of all employees.

Any records showing proof of employee vaccination status the district maintained prior to ~~November 5, 2021~~ January 10, 2022, will be considered sufficient proof of the employee's vaccination status.

Any records related to an employee's vaccination status, including the employee vaccination status roster, will be considered confidential employee medical records not subject to public disclosure and stored as employee medical records consistent with law. These records will be maintained by the district for as long as 29 C.F.R. 1910.501 remains in effect.

Testing

Beginning ~~January 4, 2022~~, February 9, 2022, employees who are not fully vaccinated must submit proof of negative COVID-19 test results every 7 days. Documentation of negative test results must be provided to the district no later than every 7 days. Employees who are not fully vaccinated and do not report to work for longer than 7 days (ex. an employee on vacation or on leave) must provide documentation of a negative test result upon their return to work. If the employee fails to provide proof of a negative test result, the district must keep the employee removed from the workplace until the negative test result documentation is provided.

Employees who receive a positive COVID-19 test result or have been diagnosed with COVID-19 by a licensed healthcare provider; are not required to produce another test result for 90 days from the date of their positive result.

Positive Test Results

Regardless of vaccination status, employees must report any positive COVID-19 test results or a diagnosis of COVID-19 by a licensed healthcare provider to the district. Any employee so reporting will be immediately removed from the workplace and will stay removed from the workplace until any of the following occur:

- The employee receives a negative result on a COVID-19 nucleic acid amplification test (NAAT) following a positive result on a COVID-19 antigen test if the employee chooses to seek the confirmatory test

Code No. 403.7

Page 2 of 2

- The employee meets the return to work criteria in the CDC's "Isolation Guidance" listed here: <https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html>
- The employee receives a recommendation to return to work from a licensed healthcare provider.

New Employees

New employees will be subject to the provisions of this policy upon hire as soon as practicable. Within 7 days of hire, new employees will provide proof of their vaccination status to the district in accordance with the requirements of this policy. Unless fully vaccinated, new employees will abide by the testing and face covering requirements of this policy within 7 days of hire.

Leave

As required by 29 C.F.R. 1910.501, the district will provide up to 4 hours of paid leave to cover the time required to travel to and obtain each dose of the primary vaccination for COVID-19. If additional time is required, the employee may use other accrued leave available. The district will also provide reasonable paid sick leave to employees to recover from any effects of each primary dose of COVID-19 vaccine. The district may require employees to use previously accrued paid sick leave first.

Employees Excluded

Employees who work fully remote from the job site; employees working from home; and employees who work exclusively outdoors are excluded from the vaccination, testing and face covering requirements of this policy. Employees fully remote from the job site does not include employees whose work requires them to work off site from the district but in the presence of students or employees of the district. Employees who work exclusively outdoors means those individuals who do not spend any part of their work time indoors.

Face Coverings

Beginning ~~December 5, 2021~~ January 10, 2022, face coverings must be worn by all employees who have not provided proof of full vaccination status to the district. Face coverings will be worn when employees are working indoors, in vehicles or other enclosed spaces. Face coverings are not required to be worn when employees are: working alone in a room with floor to ceiling walls and a closed door; verifying identity for security purposes or eating/drinking; when an employee is wearing a respirator or facemask; or where the district can show that the use of a face covering is infeasible or creates a greater hazard. The face covering must fully cover the employee's nose and mouth; and be replaced when wet, soiled or damaged.

Reporting Requirements of the District

The district will report to OSHA:

- Each work-related COVID-19 fatality within 8 hours of the employer learning about the fatality;
- Each work-related COVID-19 inpatient hospitalization within 24 hours of the employer learning about the inpatient hospitalization.

The district will report to individual employees or anyone having written authorized consent of the employee by the end of the next business day after the request is made:

- Documentation of any COVID-19 test results for that employee;
- The aggregate number of fully vaccinated employees at a workplace along with the total number of employees at that workplace.

The district will provide to the Assistant Secretary of Labor for Occupational Safety and Health, U.S. Department of Labor, or their designee:

- A copy of this policy, and the aggregate number of fully vaccinated employees at a workplace along with the total number of employees at that workplace, to be provided within 4 business hours of the request being made; and
- All other records and supporting documents related to this policy by the end of the next business day of the request being made.

REQUIRED NOTICES TO EMPLOYEES

For additional information on COVID-19 vaccine efficacy, safety, and the benefits of being vaccinated, please consult the following document “Key Things to Know About COVID-19 Vaccines” <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/keythingstoknow.html>

29 C.F.R. 1904.34(b)(1)(iv) prohibits the employer from discharging or in any manner discriminating against an employee for reporting a work-related injury or illness.

11(c) of the Occupational Safety and Health Act prohibits the employer from discriminating against an employee for exercising rights under, or as a result of actions that are required by, this policy. 11(c) also protects employees from retaliation by the employer for filing an occupational safety or health complaint, reporting a work-related injury or illness, or otherwise exercising any rights provided by the OSH Act.

18 U.S.C. 1001 and section 17(g) of the OSH Act provide for criminal penalties associated with knowingly supplying false statements or documentation in accordance with this policy.

EMPLOYEE PERSONAL ATTESTATION OF VACCINATION STATUS

I, _____ as an employee of the District do personally attest to the following:

1. My vaccination status for COVID-19 is _____ [*fully vaccinated or partially vaccinated*].
2. To the best of my recollection, I can provide the following information about my vaccination status: _____ [*type of vaccine administered, date(s) of administration, name of health care providers and clinic site*]
3. I have lost proof of my vaccination status and am otherwise unable to provide proof of my vaccination status.
4. I declare that this statement about my vaccination status is true and accurate. I understand that knowingly providing false information regarding my vaccination status on this form may subject me to criminal penalties.

Employee

Date

MEDICAL ACCOMMODATION REQUEST FORM

Date:	
Employee Name:	
Email Address:	
Position/Job Title:	
Employee Telephone Number:	
Employment Location:	

(1) What is the basis for the medical accommodation that you are requesting?

(2) What are you requesting an accommodation from?

Item	Yes/No
Vaccination for COVID-19	
Testing for COVID-19	
Use of Face Coverings	

Employee Signature

Date

Office Use

This request has been:

Approved

Denied

Administrator

Date

RELIGIOUS ACCOMMODATION REQUEST FORM

Date:	
Employee Name:	
Email Address:	
Position/Job Title:	
Employee Telephone Number:	
Employment Location:	

(3) Please identify the policy requirement or practice that conflicts with your sincerely held religious observance, practice or belief:

(4) Please describe the nature of your sincerely held religious beliefs or religious practice or observance that conflict with the policy or practice you have identified above:

(5) What are you requesting an accommodation from?

Item	Yes/No
Vaccination for COVID-19	
Testing for COVID-19	
Use of Face Coverings	

Employee Signature

Date

Office Use

This request has been:

Approved

Denied

Administrator

Date

POLICY REVIEW

2nd Reading

Current EB policy is marked with changes based on the current IASB policy reference manual

Wording to be removed is ~~crossed-out~~

Additions are in **bold and underlined**

Decisions to be made are highlighted

Optional wording is in *[italics and brackets]*

Policy Code Signs & Symbols:

-R This symbol following a policy code number indicates the statement is an administrative regulation rather than a board policy

-E This symbol following a policy code number indicates the statement is an exhibit rather than a board policy.

Legal Reference This sign indicates the legal references. They tell the user where they may find the statutes, case law, attorney general opinions, or administrative rules that give authority to a policy.

Cross Reference Many policies in the manual relate to other policies in the manual. Cross references are provided to assist the user in finding all of the related policies.

Source: IASB Policy Updates – June 26, 2020

409.1—Employee Vacation-Holidays

This sample policy has been updated to reflect the rescission of the standalone employee leave sample policies. The policy itself continues to cover employee vacation and holidays, which is a separate category from employee leave.

New 409.2—Employee Leave of Absence

This sample policy was created to consolidate the different categories of employee leave into one policy, bringing all board-level information on employee leave into one location. The administrative procedures related to requesting and granting each type of leave can be found in the *IASB Employee Handbook Toolkit*.

409.3, 409.3E1, 409.3E2, 409.3R1, 409.3R2 – Employee Family and Medical Leave

Previously, IASB had identical Family and Medical leave policies for licensed and classified staff, located in different areas of the *Policy Reference Manual*. In order to make the Family and Medical Leave sample policy more accessible, it has been consolidated into one policy for all employees.

414 – Classified Employee Professional Purposes Leave

No changes have been made to the body of this policy. It has been renumbered for greater alignment in the *Policy Reference Manual*.

Rescinded— 409.4–409.8; 414.1–414.8—Leave Policies

Due to creating the new, consolidated IASB sample policy **409.2 – Employee Leave of Absence**, these individual sample policies have been rescinded. Detailed information on benefits has been moved to the updated *IASB Employee Handbook Toolkit*. This change is intended to clarify for your district where information on all employee leave benefits can be found quickly and efficiently.

LICENSED EMPLOYEE VACATION - HOLIDAYS - PERSONAL LEAVE

The board will refer to the employee handbook for the amount of vacation, holidays, and personal leave that will be allowed on an annual basis for licensed employees.

Code No. ~~414.1~~409.1

CLASSIFIED EMPLOYEE VACATIONS - HOLIDAYS - PERSONAL LEAVE

The board will refer to the employee handbook for the amount of vacation, holidays, and personal leave that will be allowed on an annual basis for ~~classified~~ employees.

~~Classified~~ employees will be paid only for the hours they would have been scheduled for the day.

HOLIDAYS:

- ~~Classified~~ Full-time employees who are scheduled to work twelve months a year will be allowed paid holidays plus one floating holiday according to the employee handbook. Refer to the employee handbook for the dates that are designated as receiving holiday pay if the holiday does not fall on a regular working day.
- ~~Classified~~ employees who work only during the school year, whether full-time or part-time, will have time off in concert with the school calendar and will be allowed paid holidays according to the employee handbook
- Teacher holidays are based on the board approved school calendar.

VACATIONS:

- ~~Classified~~ employees who work twelve months a year and who have served a full year (12 months) are entitled to vacation with pay. Refer to the employee handbook for the number of vacation days.
- Vacation will not be accrued from year to year without a prior arrangement with the superintendent. The arrangement must be in writing, signed by both parties, and submitted to the board secretary.
- Vacation days will not be paid out upon an employee's resignation or termination.

PERSONAL LEAVE:

- Personal days will not be paid out upon an employee's resignation or termination.

Legal Reference: Iowa Code §§ 1C; 4.1(34); 20.

Cross Reference: ~~409.1 Classified Employee Vacations - Holidays - Personal Leave~~
601.1 School Calendar

Approved: December 21, 2005

Reviewed : November 9, 2011; November 9, 2016

Revised: May 13, 2020

EMPLOYEE LEAVES OF ABSENCE

The board will offer the following leave to full-time regular licensed employees:

- Personal Illness (Sick) Leave – Leave for medically-related disability or illness
- Family Sick Leave – Leave to care for a sick member of the employee's immediate family
- Bereavement Leave – Leave to mourn the loss of a family member or close friend
- ~~[Adoption Leave – Leave for an employee who legally adopts a child]~~
- ~~[Personal Leave – Leave to accomplish personal business that cannot be conducted outside the work day]~~
- Jury Duty Leave – Leave to be excused for jury duty
- Military Leave – Leave for military service, including the national guard
- Political Leave – Leave to run for elective public office
- Unpaid Leave - To excuse an involuntary absence not provided for in other leave policies of the board.

The board will offer the following leave to full-time regular classified employees:

- ~~Personal Illness (Sick) Leave – Leave for medically-related disability or illness~~
- ~~[Family Sick Leave – Leave to care for a sick member of the employee's immediate family]~~
- ~~[Bereavement Leave – Leave to mourn the loss of a family member or close friend]~~
- ~~[Adoption Leave – Leave for an employee who legally adopts a child]~~
- ~~[Personal Leave – Leave to accomplish personal business that cannot be conducted outside the work day]~~
- Jury Duty Leave – Leave to be excused for jury duty
- Military Leave – Leave for military service, including the national guard
- Political Leave – Leave to run for elective public office
- Unpaid Leave – To excuse an involuntary absence not provided for in other leave policies of the board.
- ~~[insert additional leave]~~

The provisions of each leave offering will be detailed in the Master Contract, Employee's Contract, and/or Employee Handbook.

Leave offered by the district will not be less than what is required by law. In the event of an emergency or unforeseen circumstance, the superintendent may authorize additional paid leave.

Legal Reference: 29 U.S.C. §§ 2601 et seq.
 Pub.L. 116–127
 29 C.F.R. §§ 825; 826.
 Iowa Code §§ 20; 29A; 55; 85; 216; 279.40; 607A.
 Whitney v. Rural Ind. School District, 232 Iowa 61, 4 N.W.2d 394 (1942).
 Bewley v. Villisca Community School District, 299 N.W. 2d 904 (Iowa 1980).

Cross Reference: 403.2 Employee Injury on the Job
 409.3 Employee Family and Medical Leave

Approved _____

Reviewed _____

Revised _____

LICENSED EMPLOYEE PERSONAL ILLNESS LEAVE

Licensed employees will be granted ten days of sick leave in their first year of employment. Each year thereafter, one additional day of sick leave will be granted to the licensed employees up to a maximum of fifteen days. "Day" is defined as one work day regardless of full-time or part-time status of the employee. A new employee will report for work at least one full work day prior to receiving sick leave benefits. A returning employee will be granted the appropriate number of days at the beginning of each fiscal year.

Sick leave may be accumulated up to a maximum of 125 days for licensed employees.

Evidence may be required regarding the mental or physical health of the employee when the administration has a concern about the employee's health. Evidence may also be required to confirm the employee's illness, the need for the illness leave, the employee's ability to return to work, and the employee's capability to perform the duties of the employee's position. It is within the discretion of the board or the superintendent to determine the type and amount of evidence necessary. When an illness leave will be greater than three consecutive days, the employee will comply with the board policy regarding family and medical leave.

Wording moved to Employee Handbook
Current policy replaced with
Employee Leaves of Absence

Legal Reference: 29 U.S.C. §§ 2601 *et seq.*
29 C.F.R. § 825.
Iowa Code §§ 20; 85; 216; 279.40.
Whitney v. Rural Ind. School District, 232 Iowa 61, 4 N.W.2d 394 (1942).

Cross Reference: 403.2 Employee Injury on the Job
409.3 Licensed Employee Family and Medical Leave
409.8 Licensed Employee Unpaid Leave

Approved: June 14, 2006
Reviewed: May 18, 2011; January 9, 2019
Revised: January 9, 2019

CLASSIFIED EMPLOYEE PERSONAL ILLNESS LEAVE

Classified employees shall be granted ten (10) days of sick leave in their first year of employment. Each year thereafter, one additional day of sick leave will be granted to the employees up to a maximum of fifteen days. "Day" is defined as one work day regardless of full-time or part-time status of the employee. A new employee will report for work at least one full work day prior to receiving sick leave benefits. A returning employee will be granted the appropriate number of days at the beginning of each fiscal year.

Sick leave may be accumulated up to a maximum of 125 days for classified employees.

Should the personal illness occur after or extend beyond the sick leave accumulated allowance, the employee may apply for disability benefits under the group insurance plan. If the employee does not qualify for disability benefits, the employee may request a leave of absence without pay.

Evidence may be required regarding the mental or physical health of the employee including, but not limited to, confirmation of the following: the employee's illness, the need for the illness leave, the employee's ability to return to work, and the employee's capability to perform the duties of the employee's position. It is within the discretion of the board or the superintendent to determine the type and amount of evidence necessary. When an illness leave will be greater than three consecutive days, the employee will comply with board policy regarding family and medical leave.

If an employee is eligible to receive workers' compensation benefits, the employee will contact the board secretary to implement these benefits.

Wording moved to Employee Handbook
Current policy replaced with
Employee Leaves of Absence

Legal Reference: Whitney v. Rural Ind. School District, 232 Iowa 61, 4 N.W.2d 394 (1942).
29 U.S.C. §§ 2601 *et seq.*
29 C.F.R. Pt. 825
Iowa Code §§ 20; 85.33, .34, .38(3); 279.40.

Cross Reference: 403.2 Employee Injury on the Job
414.3 Classified Employee Family and Medical Leave
414.8 Classified Employee Unpaid Leave

Approved: December 21, 2005
Reviewed: November 9, 2016
Revised: May 13, 2020

LICENSED EMPLOYEE BEREAVEMENT LEAVE

The board will refer to the employee handbook regarding licensed employee bereavement leave.

CLASSIFIED EMPLOYEE BEREAVEMENT LEAVE

The board will refer to the employee handbook regarding licensed employee bereavement leave.

Legal Reference: Iowa Code §§ 20; 279.8.

Cross Reference: 414 Classified Employee Vacations and Leaves of Absence

Approved: December 21, 2005

Reviewed: November 9, 2016

Revised: May 13, 2020

RESCINDED - replaced with 409.2

LICENSED EMPLOYEE POLITICAL LEAVE

The board will provide a leave of absence to licensed employees to run for elective public office. The superintendent will grant a licensed employee a leave of absence to campaign as a candidate for an elective public office as unpaid leave.

The licensed employee will be entitled to one period of leave to run for the elective public office, and the leave may commence within thirty days of a contested primary, special, or general election and continue until the day following the election.

The request for leave must be in writing to the superintendent of schools at least thirty days prior to the starting date of the requested leave.

Code No. 414.5

CLASSIFIED EMPLOYEE POLITICAL LEAVE

The board will provide a leave of absence to classified employees to run for elective public office. The superintendent will grant a classified employee a leave of absence to campaign as a candidate for an elective public office as unpaid leave.

The classified employee will be entitled to one period of leave to run for the elective public office, and the leave may commence any time within thirty days of a contested primary, special, or general election and continue until the day following the election.

The request for leave must be in writing to the superintendent at least thirty days prior to the starting date of the requested leave.

Rescinded - leave type placed in 409.2

Wording placed in Employee Handbook
• 2nd paragraph to be added to current

LICENSED EMPLOYEE JURY DUTY LEAVE

The board will allow licensed employees to be excused for jury duty unless extraordinary circumstances exist. The superintendent has the discretion to determine when extraordinary circumstances exist.

Employees who are called for jury service will notify the direct supervisor within twenty-four hours after notice of call to jury duty and suitable proof of jury service pay must be presented to the school district. The employee will report to work within one hour on any day when the employee is excused from jury duty during regular working hours.

~~Licensed~~ employees will receive their regular salary. Any payment for jury duty will be paid to the school district.

Code No. 414.6

CLASSIFIED EMPLOYEE JURY DUTY

The board will allow ~~classified~~ employees to be excused for jury duty unless extraordinary circumstances exist. The superintendent has the discretion to determine when extraordinary circumstances exist.

Employees who are called for jury service will notify the direct supervisor within twenty-four hours after notice of call to jury duty and suitable proof of jury service pay must be presented to the school district. The employee will report to work within one hour on any day when the employee is excused from jury duty during regular working hours.

~~Classified~~ employees will receive their regular salary. Any payment for jury duty is turned over to the school district.

Legal Reference: Iowa Code §§ 20.9; 607A.

Cross Reference: 414 Classified Employee Vacations and Leaves of Absence

Approved: December 21, 2005

Reviewed: November 9, 2016

Revised: May 13, 2020

Rescinded- leave type added to 409.2

Wording to be placed in Employee Handbook

~~LICENSED~~ EMPLOYEE MILITARY SERVICE LEAVE

The board recognizes ~~licensed~~ employees may be called to participate in the armed forces, including the national guard. If a ~~licensed~~ employee is called to serve in the armed forces, the employee will have a leave of absence for military service until the military service is completed.

The leave is without loss of status or efficiency rating, and without loss of pay during the first thirty calendar days of the leave.

Code No. 414.7

~~CLASSIFIED~~ EMPLOYEE MILITARY SERVICE LEAVE

The board recognizes ~~classified~~ employees may be called to participate in the armed forces, including the National Guard. If a ~~classified~~ employee is called to serve in the armed forces, the employee shall have a leave of absence for military service until the military service is completed.

The leave is without loss of status or efficiency rating, and without loss of pay during the first thirty calendar days of the leave.

Rescinded - leave type to be added to Policy 409.2
Wording to be placed in Employee Handbook

~~LICENSED~~ EMPLOYEE UNPAID LEAVE

The board will refer to the employee handbook regarding ~~licensed~~ employee unpaid leave.

Legal Reference: Iowa Code §§ 20; 85; 85A; 85B; 279.12; 509; 509A; 509B.

Cross Reference: 409 Licensed Employee Vacations and Leaves of Absence

Approved: June 14, 2006

Reviewed: May 18, 2011

Revised : January 9, 2019

Code No. 414.8

~~CLASSIFIED~~ EMPLOYEE UNPAID LEAVE

Unpaid leave may be used to excuse an involuntary absence not provided for in other leave policies. Unpaid leave for ~~classified~~ employees must be authorized by the superintendent. Whenever possible, ~~classified~~ employees will make a written request for unpaid leave ten days prior to the beginning date of the requested leave. If the leave is granted, the deductions in salary are made unless they are waived specifically by the superintendent.

The superintendent will have complete discretion to grant or deny the requested unpaid leave. In making this determination, the superintendent will consider the effect of the employee's absence on the education program and school district operations, the financial condition of the school district, length of service, previous record of absence, the reason for the requested absence and other factors the superintendent believes are relevant in making this determination.

If unpaid leave is granted, the duration of the leave period is coordinated with the scheduling of the education program whenever possible, to minimize the disruption of the education program and school district operations.

Legal Reference: Iowa Code Sect. 20.9; 279.8

Cross Reference: 414 Classified Employee Vacations and Leaves of Absence

Approved December 21, 2005

Reviewed November 9, 2016

Revised: May 13, 2020

Rescind - Leave type placed in 409.2
Wording added to Employee Handbook

~~LICENSED~~-EMPLOYEE FAMILY AND MEDICAL LEAVE

Unpaid family and medical leave will be granted up to 12 weeks per year to assist employees in balancing family and work life. For purposes of this policy, year is defined as July 1 through June 30 of each year. Requests for family and medical leave will be made to the superintendent.

Employees may be allowed to substitute paid leave for unpaid family and medical leave by meeting the requirements set out in the family and medical leave administrative rules. Employees eligible for family and medical leave must comply with the family and medical leave administrative rules prior to starting family and medical leave. It is the responsibility of the superintendent to develop administrative rules to implement this policy.

Links: [WH-380-E Certification of Health Care Provider for Employee's Serious Health Condition \(PDF\)](#)
[WH-380-F Certification of Health Care Provider for Family Member's Serious Health Condition \(PDF\)](#)
[WH-381 Notice of Eligibility and Rights & Responsibilities \(PDF\)](#)
[WH-382 Designation Notice \(PDF\)](#)
[WH-384 Certification of Qualifying Exigency For Military Family Leave \(PDF\)](#)
[WH-385 Certification for Serious Injury or Illness of Covered Servicemember -- for Military Family Leave \(PDF\)](#)
<https://www.dol.gov/whd/regs/compliance/posters/fmlaen.pdf>

Legal Reference: 29 U.S.C. §§ 2601 *et seq.*
 29 C.F.R. § 825
 Iowa Code §§ 20; 85; 216; 279.40.
Whitney v. Rural Ind. School. District, 232 Iowa 61, 4 N.W.2d 394 (1942).

Cross Reference: 409.2 ~~Licensed Employee Personal Illness Leave~~ of Absence
 409.8 ~~Licensed Employee Unpaid Leave~~
 414.3 ~~Classified Employee Family and Medical Leave~~

Approved: June 14, 2006
 Reviewed: May 18, 2011; January 9, 2019
 Revised: January 12, 2022

CLASSIFIED EMPLOYEE FAMILY AND MEDICAL LEAVE

Unpaid family and medical leave will be granted up to 12 weeks per year to assist employees in balancing family and work life. For purposes of this policy, year is defined as 365 days from the date of the first absence. Requests for family and medical leave are made to the superintendent.

Employees may be allowed to substitute paid leave for unpaid family and medical leave by meeting the requirements set out in the family and medical leave administrative rules. Employees eligible for family and medical leave must comply with the family and medical leave administrative rules prior to starting family and medical leave. It is the responsibility of the superintendent to develop administrative rules to implement this policy.

Rescinded - replaced w/updated 409.3

Links: [WH-380-E Certification of Health Care Provider for Employee's Serious Health Condition \(PDF\)](#)
[WH-380-F Certification of Health Care Provider for Family Member's Serious Health Condition \(PDF\)](#)
[WH-381 Notice of Eligibility and Rights & Responsibilities \(PDF\)](#)
[WH-382 Designation Notice \(PDF\)](#)
[WH-384 Certification of Qualifying Exigency For Military Family Leave \(PDF\)](#)
[WH-385 Certification for Serious Injury or Illness of Covered Servicemember -- for Military Family Leave \(PDF\)](#)

Legal Reference: *Whitney v. Rural Ind. School. District*, 232 Iowa 61, 4 N.W.2d 394 (1942).
29 U.S.C. §§ 2601 *et seq.*
29 C.F.R. Pt. 825
Iowa Code §§ 20; 85.33, .34, .38(3); 216; 279.40.

Cross Reference: 409.2 Licensed Employee Personal Illness Leave
409.3 Licensed Employee Family and Medical Leave
409.8 Licensed Employee Unpaid Leave

Approved: December 21, 2005
Reviewed: November 9, 2016; May 13, 2020

~~LICENSED~~ EMPLOYEE FAMILY AND MEDICAL LEAVE REGULATION

- A. School district notice.
1. The school district will post the notice in Exhibit 409.3E1 regarding family and medical leave.
 2. Information on the Family and Medical Leave Act and the board policy on family and medical leave, including leave provisions and employee obligations will be provided annually. The information will be in the employee handbook.
 3. When an employee requests family and medical leave, the school district will provide the employee with information listing the employee's obligations and requirements. Such information will include:
 - a. a statement clarifying whether the leave qualifies as family and medical leave and will, therefore, be credited to the employee's annual 12-week entitlement or 26 week entitlement depending on the purpose of the leave;
 - b. a reminder that employees requesting family and medical leave for their serious health condition or for that of an immediate family member must furnish medical certification of the serious health condition and the consequences for failing to do so or proof of call to active duty in the case of military family and medical leave;
 - c. an explanation of the employee's right to substitute paid leave for family and medical leave including a description of when the school district requires substitution of paid leave and the conditions related to the substitution; and
 - d. a statement notifying employees that they must pay and must make arrangements for paying any premium or other payments to maintain health or other benefits.

B. Eligible employees.

Employees are eligible for family and medical leave if three criteria are met.

1. The school district has more than 50 employees on the payroll at the time leave is requested;
2. The employee has worked for the school district for at least twelve months or 52 weeks (the months and weeks need not be consecutive); and
3. The employee has worked at least 1,250 hours within the previous year. Full-time professional employees who are exempt from the wage and hour law may be presumed to have worked the minimum hour requirement.

If the employee requesting leave is unable to meet the above criteria, then the employee is not eligible for family and medical leave.

C. Employee requesting leave -- two types of leave.

1. Foreseeable family and medical leave.

- a. Definition - leave is foreseeable for the birth or placement of an adopted or foster child with the employee or for planned medical treatment.
- b. Employee must give at least thirty days notice for foreseeable leave. Failure to give the notice may result in the leave beginning thirty days after notice was received. For those taking leave due to military family and medical leave, notice should be given as soon as possible.
- c. Employees must consult with the school district prior to scheduling planned medical treatment leave to minimize disruption to the school district. The scheduling is subject to the approval of the health care provider.

2. Unforeseeable family and medical leave.

- a. Definition - leave is unforeseeable in such situations as emergency medical treatment or premature birth.
- b. Employee must give notice as soon as possible but no later than one to two work days after learning that leave will be necessary.
- c. A spouse or family member may give the notice if the employee is unable to personally give notice.

D. Eligible family and medical leave determination. The school district may require the employee giving notice of the need for leave to provide reasonable documentation or a statement of family relationship.

1. Six purposes.

- a. The birth of a son or daughter of the employee and in order to care for that son or daughter prior to the first anniversary of the child's birth;
- b. The placement of a son or daughter with the employee for adoption or foster care and in order to care for that son or daughter prior to the first anniversary of the child's placement;
- c. To care for the spouse, son, daughter or parent of the employee if the spouse, son, daughter or parent has a serious health condition; or
- d. Employee's serious health condition that makes the employee unable to perform the essential functions of the employee's position.
- e. Because of a qualifying exigency arising out of the fact that an employee's ____ spouse ____ son or daughter; ____ parent is on active duty or call to active duty status in support of a contingency operation as a member the National Guard or Reserves.
- f. because the employee is the spouse; ____ son or daughter; ____ parent; ____ next of kin of a covered service member with a serious injury or illness.

2. Medical certification.

- a. When required:
 - (1) Employees shall be required to present medical certification of the employee's serious health condition and inability to perform the essential functions of the job.
 - (2) Employees shall be required to present medical certification of the family member's serious health condition and that it is medically necessary for the employee to take leave to care for the family member.
 - (3) Employees shall be required to present certification of the call to active duty when taking military family and medical leave.
- b. Employee's medical certification responsibilities:
 - (1) The employee must obtain the certification from the health care provider who is treating the individual with the serious health condition.
 - (2) The school district may require the employee to obtain a second certification by a health care provider chosen by and paid for by the school district if the school district has reason to doubt the validity of the certification an employee submits. The second health care provider cannot, however, be employed by the school district on a regular basis.
 - (3) If the second health care provider disagrees with the first health care provider, then the school district may require a third health care provider to certify the serious health condition. This

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health care provider must be mutually agreed upon by the employee and the school district and paid for by the school district. This certification or lack of certification is binding upon both the employee and the school district.

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- c. Medical certification will be required fifteen days after family and medical leave begins unless it is impracticable to do so. The school district may request recertification every thirty days. Recertification must be submitted within fifteen days of the school district's request.
- d. Employees taking military caregiver family and medical leave to care for a family service member cannot be required to obtain a second opinion or to provide recertification.

Family and medical leave requested for the serious health condition of the employee or to care for a family member with a serious health condition which is not supported by medical certification will be denied until such certification is provided.

E. Entitlement.

- 1. Employees are entitled to twelve weeks unpaid family and medical leave per year. Employees taking military caregiver family and medical leave to care for a family service member are entitled to 26 weeks of unpaid family and medical leave but only in a single 12 month period.
- 2. Year is defined as fiscal year.
- 3. If insufficient leave is available, the school district may:
 - a. Deny the leave if entitlement is exhausted
 - b. Award leave available
 - c. Award leave in accordance with other provisions of board policy or the collective bargaining agreement.

F. Type of Leave Requested.

- 1. Continuous - employee will not report to work for set number of days or weeks.
- 2. Intermittent - employee requests family and medical leave for separate periods of time.
 - a. Intermittent leave is available for:
 - ___ birth of my child or adoption or foster care placement subject to agreement by the district;
 - ___ serious health condition of myself, spouse, parent, or child when medically necessary;
 - ___ because of a qualifying exigency arising out of the fact that my ___ spouse; ___ son or daughter; ___ parent is on active duty or call to active duty status in support of a contingency operation as a member of the National Guard or Reserves;
 - ___ because I am the ___ spouse; ___ son or daughter; ___ parent; ___ next of kin of a covered service member with a serious injury or illness.
 - b. In the case of foreseeable intermittent leave, the employee must schedule the leave to minimize disruption to the school district operation.
 - c. During the period of foreseeable intermittent leave, the school district may move the employee to an alternative position with equivalent pay and benefits. *(For instructional employees, see G below.)*
- 3. Reduced work schedule - employee requests a reduction in the employee's regular work schedule.
 - a. Reduced work schedule family and medical leave is available for:
 - ___ Birth of my child or adoption or foster care placement subject to agreement by the district;
 - ___ Serious health condition of the employee, spouse, parent, or child when medically necessary
 - ___ Because of a qualifying exigency arising out of the fact that my ___ spouse; ___ son or daughter; ___ parent is on active duty or call to active duty status in support of a contingency operation as a member of the National Guard or Reserves;
 - ___ Because I am the ___ spouse; ___ son or daughter; ___ parent; ___ next of kin of a covered service member with a serious injury or illness.

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- b. In the case of foreseeable reduced work schedule leave, the employee must schedule the leave to minimize disruption to the school district operation.
- c. During the period of foreseeable reduced work schedule leave, the school district may move the employee to an alternative position with equivalent pay and benefits. *(For instructional employees, see G below.)*

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G. Special Rules for Instructional Employees.

- 1. Definition - an instructional employee is one whose principal function is to teach and instruct students in a class, a small group or an individual setting. This includes, but is not limited to, teachers, coaches, driver's education instructors and special education assistants.
- 2. Instructional employees who request foreseeable medically necessary intermittent or reduced work schedule family and medical leave greater than twenty percent of the work days in the leave period may be required to:
 - a. Take leave for the entire period or periods of the planned medical treatment; or
 - b. Move to an available alternative position, with equivalent pay and benefits, but not necessarily equivalent duties, for which the employee is qualified.
- 3. Instructional employees who request continuous family and medical leave near the end of a semester may be required to extend the family and medical leave through the end of the semester. The number of weeks remaining before the end of a semester do not include scheduled school breaks, such as summer, winter or spring break.
 - a. If an instructional employee begins family and medical leave for any purpose more than five weeks before the end of a semester, the school district may require that the leave be continued until the end of the semester if the leave will last at least three weeks and the employee would return to work during the last three weeks of the semester if the leave was not continued.
 - b. If the employee begins family and medical leave for a purpose other than the employee's own serious health condition during the last five weeks of a semester, the school district may require that the leave be continued until the end of the semester if the leave will last more than two weeks and the employee would return to work during the last two weeks of the semester.
 - c. If the employee begins family and medical leave for a purpose other than the employee's own serious health condition during the last three weeks of the semester and the leave will last more than five working days, the school district may require the employee to continue taking leave until the end of the semester.
- 4. The entire period of leave taken under the special rules is credited as family and medical leave. The school district will continue to fulfill the school district's family and medical leave responsibilities and obligations, including the obligation to continue the employee's health insurance and other benefits, if an instructional employee's family and medical leave entitlement ends before the involuntary leave period expires.

H. Employee responsibilities while on family and medical leave.

- 1. Employee must continue to pay health care benefit contributions or other benefit contributions regularly paid by the employee unless employee elects not to continue the benefits.

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2. The employee contribution payments will be deducted from any money owed to the employee or the employee will reimburse the school district at a time set by the superintendent.
3. An employee who fails to make the health care contribution payments within thirty days after they are due will be notified that their coverage may be canceled if payment is not received within an additional 15 days.

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4. An employee may be asked to re-certify the medical necessity of family and medical leave for the serious medical condition of an employee or family member once every thirty days and return the certification within fifteen days of the request.
5. The employee must notify the school district of the employee's intent to return to work at least once each month during their leave and at least two weeks prior to the conclusion of the family and medical leave.
6. If an employee intends not to return to work, the employee must immediately notify the school district, in writing, of the employee's intent not to return. The school district will cease benefits upon receipt of this notification.

I. Use of paid leave for family and medical leave.

1. An employee may substitute unpaid family and medical leave for the serious health condition of the employee with paid sick, vacation and personal leave. Upon the expiration of paid leave, the family and medical leave for the serious health condition of the employee is unpaid.
2. An employee may substitute unpaid family and medical leave for the serious health condition of an employee's family member or to care for a family service member with paid sick, vacation and personal leave. Upon the expiration of paid leave, the family and medical leave for the serious health condition of an employee's family member is unpaid.
3. An employee may substitute unpaid family and medical leave for the birth of a child of the employee and in order to care for that child prior to the first anniversary of the child's birth with sick, vacation and personal leave. Upon the expiration of paid leave, the family and medical leave for the birth of a child of the employee and in order to care for that child prior to the first anniversary of the child's birth is unpaid.
4. An employee may substitute unpaid family and medical leave for the placement of a child with the employee for adoption or foster care and in order to care for that child prior to the first anniversary of the child's placement or adoption with sick, vacation and personal leave. Upon the expiration of paid leave, the family and medical leave for the placement of a child with the employee for adoption or foster care and in order to care for the child prior to the first anniversary of the child's placement or adoption is unpaid.
5. An employee may substitute unpaid family and medical leave when a family service member is called to active duty or on call to active duty with sick, vacation and personal leave. Upon expiration of the paid leave, the leave is unpaid.
6. When the school district determines that paid leave is being taken for an FMLA reason, the school district will notify the employee within two business days that the paid leave will be counted as FMLA leave.

CLASSIFIED EMPLOYEE FAMILY AND MEDICAL LEAVE REGULATION

A. School district notice.

1. The school district will post the notice in Exhibit 414.3E1 regarding family and medical leave.
2. Information on the Family and Medical Leave Act and the board policy on family and medical leave, including leave provisions and employee obligations will be provided annually. The information will be in the employee handbook.
3. When an employee requests family and medical leave, the school district will provide the employee with information listing the employee's obligations and requirements. Such information will include:
 - a. a statement clarifying whether the leave qualifies as family and medical leave and will, therefore, be credited to the employee's annual 12-week entitlement or 26 week entitlement depending on the purpose of the leave;
 - b. a reminder that employees requesting family and medical leave for their serious health condition or for that of an immediate family member must furnish medical certification of the serious health condition and the consequences for failing to do so or proof of call to active duty in the case of military family and medical leave;
 - c. an explanation of the employee's right to substitute paid leave for family and medical leave including a description of when the school district requires substitution of paid leave and the conditions related to the substitution; and
 - d. a statement notifying employees that they must pay and must make arrangements for paying any premium or other payments to maintain health or other benefits.

B. Eligible employees.

Employees are eligible for family and medical leave if three criteria are met.

1. The school district has more than 50 employees on the payroll at the time leave is requested;
2. The employee has worked for the school district for at least twelve months or 52 weeks (the months and weeks need not be consecutive); and,
3. The employee has worked at least 1,250 hours within the previous year. Full-time professional employees who are exempt from the wage and hour law may be presumed to have worked the minimum hour requirement.

If the employee requesting leave is unable to meet the above criteria, the employee is not eligible for family and medical leave.

C. Employee requesting leave -- two types of leave.

1. Foreseeable family and medical leave.
 - a. Definition - leave is foreseeable for the birth or placement of an adopted or foster child with the employee or for planned medical treatment.
 - b. Employee must give at least thirty days notice for foreseeable leave. Failure to give the notice may result in the leave beginning thirty days after notice was received. For those taking leave due to military family and medical leave, notice should be given as soon as possible.
 - c. Employees must consult with the school district prior to scheduling planned medical treatment leave to minimize disruption to the school district. The scheduling is subject to the approval of the health care provider.

LICENSED EMPLOYEE FAMILY AND MEDICAL LEAVE DEFINITIONS

Active Duty – duty under a call or order to active duty under a provision of law referring to in section 101(a)(13) of title 10, U.S. Code.

Common law marriage-according to Iowa law, common law marriages exist when there is a present intent by the two parties to be married, continuous cohabitation, and a public declaration that the parties are husband and wife. There is no time factor that needs to be met in order for there to be a common law marriage.

Contingency Operation - has the same meaning given such term in section 101(a)(13) of title 10, U.S. Code.

Continuing treatment-a serious health condition involving continuing treatment by a health care provider includes any one or more of the following:

- A period of incapacity (i.e., inability to work, attend school or perform other regular daily activities due to the serious health condition, treatment for or recovery from) of more than three consecutive calendar days and any subsequent treatment or period of incapacity relating to the same condition that also involves:
 - treatment two or more times by a health care provider, by a nurse or physician's assistant under direct supervision of a health care provider, or by a provider of health care services (e.g., physical therapist) under orders of, or in referral by, a health care provider; or
 - treatment by a health care provider on at least one occasion which results in a regimen of continuing treatment under the supervision of a the health care provider.
- Any period of incapacity due to pregnancy or for prenatal care.
- Any period of incapacity or treatment for such incapacity due to a chronic serious health condition. A chronic serious health condition is one which:
 - requires periodic visits for treatment by a health care provider or by a nurse or physician's assistant under direct supervision of a health care provider;
 - Continues over an extended period of time (including recurring episodes of a single underlying condition); and
 - May cause episodic rather than a continuing period of incapacity (e.g., asthma, diabetes, epilepsy, etc.).
- Any period of incapacity which is permanent or long-term due to a condition for which treatment may not be effective. The employee or family member must be under the continuing supervision of, but need not be receiving active treatment by, a health care provider. Examples include Alzheimer's, a severe stroke or the terminal stages of a disease.
- Any period of absence to receive multiple treatments (including any period of recovery from) by a health care provider or by a provider of health care services under orders of, or on referral by, a health care provider, either for restorative surgery after an accident or other injury, or for a condition that would likely result in a period of incapacity of more than three consecutive calendar days in the absence of medical intervention or treatment, such as cancer (chemotherapy, radiation, etc.), severe arthritis (physical therapy), kidney disease (dialysis).

Covered Servicemember – a current member of the Armed Forces, including a member of the National Guard or Reserves, who is undergoing medical treatment, recuperation, or therapy, is otherwise in outpatient status, or is otherwise on the temporary disability retired list, for a serious injury or illness.

Eligible Employee-the district has more than 50 employees on the payroll at the time leave is requested. The employee has worked for the district for at least twelve months and has worked at least 1250 hours within the previous year.

Essential Functions of the Job-those functions which are fundamental to the performance of the job. It does not include marginal functions.

LICENSED-EMPLOYEE FAMILY AND MEDICAL LEAVE DEFINITIONS

Employment benefits-all benefits provided or made available to employees by an employer, including group life insurance, health insurance, disability insurance, sick leave, annual leave, educational benefits, and pensions, regardless of whether such benefits are provided by a practice or written policy of an employer or through an "employee benefit plan."

Family Member-individuals who meet the definition of son, daughter, spouse or parent.

Group health plan-any plan of, or contributed to by, an employer (including a self-insured plan) to provide health care (directly or otherwise) to the employer's employees, former employees, or the families of such employees or former employees.

Health care provider-

- A doctor of medicine or osteopathy who is authorized to practice medicine or surgery by the state in which the doctor practices; or
- Podiatrists, dentists, clinical psychologists, optometrists, and chiropractors (limited to treatment consisting of manual manipulation of the spine to correct a subluxation as demonstrated by X ray to exist) authorized to practice in the state and performing within the scope of their practice as defined under state law; and
- Nurse practitioners and nurse-midwives, and clinical social workers who are authorized to practice under state law and who are performing within the scope of their practice as defined under state law; and
- Christian Science practitioners listed with the First Church of Christ Scientist in Boston, Massachusetts;
- Any health care provider from whom an employer or a group health plan's benefits manager will accept certification of the existence of a serious health condition to substantiate a claim for benefits;
- A health care provider as defined above who practices in a country other than the United States who is licensed to practice in accordance with the laws and regulations of that country.

In loco parentis-individuals who had or have day-to-day responsibilities for the care and financial support of a child not their biological child or who had the responsibility for an employee when the employee was a child.

Incapable of self-care-that the individual requires active assistance or supervision to provide daily self-care in several of the "activities of daily living" or "ADLs." Activities of daily living include adaptive activities such as caring appropriately for one's grooming and hygiene, bathing, dressing, eating, cooking, cleaning, shopping, taking public transportation, paying bills, maintaining a residence, using telephones and directories, using a post office, etc.

Instructional employee-an employee employed principally in an instructional capacity by an educational agency or school whose principal function is to teach and instruct students in a class, a small group, or an individual setting, and includes athletic coaches, driving instructors, and special education assistants such as signers for the hearing impaired. The term does not include teacher assistants or aides who do not have as their principal function actual teaching or instructing, nor auxiliary personnel such as counselors, psychologists, curriculum specialists, cafeteria workers, maintenance workers, bus drivers, or other primarily noninstructional employees.

Intermittent leave-leave taken in separate periods of time due to a single illness or injury, rather than for one continuous period of time, and may include leave or periods from an hour or more to several weeks.

Medically Necessary-certification for medical necessity is the same as certification for serious health condition.

"Needed to Care For"-the medical certification that an employee is "needed to care for" a family member encompasses both physical and psychological care. For example, where, because of a serious health condition, the family member is unable to care for his or her own basic medical, hygienic or nutritional needs or safety or is unable to transport himself or herself to medical treatment. It also includes situations where the employee may be needed to fill in for others who are caring for the family member or to make arrangements for changes in care.

Next of Kin – an individual's nearest blood relative

Outpatient Status – the status of a member of the Armed Forces assigned to –

- Either a military medical treatment facility as an outpatient; or,
- A unit established for the purpose of providing command and control of members of the Armed Forces receiving medical care as outpatients.

Parent-a biological parent or an individual who stands in loco parentis to a child or stood in loco parentis to an employee when the employee was a child. Parent does not include parent-in-law.

Physical or mental disability-a physical or mental impairment that substantially limits one or more of the major life activities of an individual.

Reduced leave schedule-a leave schedule that reduces the usual number of hours per workweek, or hours per workday, of an employee.

Serious health condition

- An illness, injury, impairment, or physical or mental condition that involves:
- Inpatient care (i.e. an overnight stay) in a hospital, hospice or residential medical care facility including any period of incapacity (for purposes of this section, defined to mean inability to work, attend school or perform other regular daily activities due to the serious health condition, treatment for or recovery from), or any subsequent treatment in connection with such inpatient care; or
- * Continuing treatment by a health care provider. A serious health condition involving continuing treatment by a health care provider includes:
 - A period of incapacity (i.e., inability to work, attend school or perform other regular daily activities due to the serious health condition, treatment for or recovery from) of more than three consecutive calendar days, including any subsequent treatment or period of incapacity relating to the same condition, that also involves:
 - Treatment two or more times by a health care provider, by a nurse or physician's assistant under direct supervision of a health care provider, or by a provider of health care services (e.g., physical therapist) under orders or, or on referral by, a health care provider; or
 - Treatment by a health care provider on at least one occasion which results in a regimen of continuing treatment under the supervision of the health care provider.
 - Any period of incapacity due to pregnancy or for prenatal care.
 - Any period of incapacity or treatment for such incapacity due to a chronic serious health condition. A chronic serious health condition is one which:
 - Requires periodic visits for treatment by a health care provider or by a nurse or physician's assistant under direct supervision of a health care provider;
 - Continues over an extended period of time (including recurring episodes of a single underlying condition); and
 - May cause episodic rather than a continuing period of incapacity (e.g., asthma, diabetes, epilepsy, etc.).

- A period of incapacity which is permanent or long-term due to a condition for which treatment may not be effective. The employee or family member must be under the continuing supervision of, but need not be receiving active treatment by, a health care provider. Examples include Alzheimer's a severe stroke or the terminal stages of a disease.
- Any period of absence to receive multiple treatments (including any period of recovery from) by a health care provider or by a provider of health care services under orders of, or on referral by, a health care provider, either for restorative surgery after an accident or other injury, or for a condition that would likely result in a period of incapacity of more than three consecutive calendar days in the absence of medical intervention or treatment, such as cancer (chemotherapy, radiation, etc.), severe arthritis (physical therapy), kidney disease (dialysis).
- Treatment for purposes of this definition includes, but is not limited to, examinations to determine if a serious health condition exists and evaluation of the condition. Treatment does not include routine physical examinations, eye examinations or dental examinations. Under this definition, a regimen of continuing treatment includes, for example, a course of prescription medication (e.g., an antibiotic) or therapy requiring special equipment to resolve or alleviate the health condition (e.g., oxygen). A regimen of continuing treatment that includes the taking of over-the-counter medications such as aspirin, antihistamines, or salves; or bed rest, drinking fluids, exercise and other similar activities that can be initiated without a visit to a health care provider, is not, by itself, sufficient to constitute a regimen of continuing treatment for purposes of FMLA leave.
- Conditions for which cosmetic treatments are administered (such as most treatments for acne or plastic surgery) are not "serious health conditions" unless inpatient hospital care is required or unless complications develop. Ordinarily, unless complications arise, the common cold, the flu, ear aches, upset stomach, ulcers, headaches other than migraine, routine dental or orthodontia problems, periodontal disease, etc., are examples of conditions that do not meet the definition of a serious health condition and do not qualify for FMLA leave. Restorative dental or plastic surgery after an injury or removal of cancerous growths are serious health conditions provided all the other conditions of this regulation are met. Mental illness resulting from stress or allergies may be serious health conditions, but only if all the conditions of this section are met.
- Substance abuse may be a serious health condition if the conditions of this section are met. However, FMLA leave may only be taken for treatment for substance abuse by a health care provider or by a provider of health care on referral by a health care provider. On the other hand, absence because of the employee's use of the substance, rather than for treatment, does not qualify for FMLA leave.
- Absence attributable to incapacity under this definition qualify for FMLA leave even though the employee or the immediate family member does not receive treatment from a health care provider during the absence, and even if the absence does not last more than three days. For example, an employee with asthma may be unable to report for work due to the onset of an asthma attack or because the employee's health care provider has advised the employee to stay home when the pollen count exceeds a certain level. An employee who is pregnant may be unable to report to work because of severe morning sickness.

Serious Injury or Illness – an injury or illness incurred by a member of the Armed forces, including the National Guard or Reserves in the line of duty on active duty in the Armed Forces that may render the member medically unfit to perform the duties of the member's office, grade, rank, or rating.

Son or daughter-a biological child, adopted child, foster child, stepchild, legal ward, or a child of a person standing in loco parentis. The child must be under age 18 or, if over 18, incapable of self-care because of a mental or physical disability.

Spouse-a husband or wife recognized by Iowa law including common law marriages.

CLASSIFIED EMPLOYEE FAMILY AND MEDICAL LEAVE DEFINITIONS

Active Duty - duty under a call or order to active duty under a provision of law referring to in section 101(a)(13) of title 10, U.S. Code.

Common Law Marriage - according to Iowa law, common law marriages exist when there is a present intent by the two parties to be married, continuous cohabitation, and a public declaration that the parties are husband and wife. There is no time factor that needs to be met in order for there to be a common law marriage.

Contingency Operation - has the same meaning given such term in section 101(a)(13) of title 10, U.S. Code.

Continuing Treatment - a serious health condition involving continuing treatment by a health care provider includes any one or more of the following:

- A period of incapacity (i.e., inability to work, attend school or perform other regular daily activities due to the serious health condition, treatment for or recovery from) of more than three consecutive calendar days and any subsequent treatment or period of incapacity relating to the same condition that also involves:
 - treatment two or more times by a health care provider, by a nurse or physician's assistant under direct supervision of a health care provider, or by a provider of health care services (e.g., physical therapist) under orders of, or in referral by, a health care provider; or
 - treatment by a health care provider on at least one occasion which results in a regimen of continuing treatment under the supervision of a the health care provider.
- Any period of incapacity due to pregnancy or for prenatal care.
- Any period of incapacity or treatment for such incapacity due to a chronic serious health condition. A chronic serious health condition is one which:
 - requires periodic visits for treatment by a health care provider or by a nurse or physician's assistant under direct supervision of a health care provider;
 - Continues over an extended period of time (including recurring episodes of a single underlying condition); and
 - May cause episodic rather than a continuing period of incapacity (e.g., asthma, diabetes, epilepsy, etc.).
- Any period of incapacity which is permanent or long-term due to a condition for which treatment may not be effective. The employee or family member must be under the continuing supervision of, but need not be receiving active treatment by, a health care provider. Examples include Alzheimer's, a severe stroke or the terminal stages of a disease.
- Any period of absence to receive multiple treatments (including any period of recovery from) by a health care provider or by a provider of health care services under orders of, or on referral by, a health care provider, either for restorative surgery after an accident or other injury, or for a condition that would likely result in a period of incapacity of more than three consecutive calendar days in the absence of medical intervention or treatment, such as cancer (chemotherapy, radiation, etc.), severe arthritis (physical therapy), kidney disease (dialysis).

Covered Servicemember - a current member of the Armed Forces, including a member of the National Guard or Reserves, who is undergoing medical treatment, recuperation, or therapy, is otherwise in outpatient status, or is otherwise on the temporary disability retired list, for a serious injury or illness.

Eligible Employee - the district has more than 50 employees on the payroll at the time leave is requested. The employee has worked for the district for at least twelve months and has worked at least 1250 hours within the previous year.

Essential Functions of the Job - those functions which are fundamental to the performance of the job. It does not include marginal functions.

~~CLASSIFIED~~ EMPLOYEE FAMILY AND MEDICAL LEAVE NOTICE TO EMPLOYEES

This document is available at <https://www.dol.gov/whd/regs/compliance/posters/fmlla.htm>

LICENSED EMPLOYEE FAMILY AND MEDICAL LEAVE REQUEST FORM

Date: _____

I, _____, request family and medical leave for the following reason: (check all that apply)

- ☐ for the birth of my child;
- ☐ for the placement of a child for adoption or foster care;
- ☐ to care for my child who has a serious health condition;
- ☐ to care for my parent who has a serious health condition;
- ☐ to care for my spouse who has a serious health condition; or
- ☐ because I am seriously ill and unable to perform the essential functions of my position.
- ☐ because of a qualifying exigency arising out of the fact that my ___ spouse; ___ son or daughter; ___ parent is on active duty or call to active duty status in support of a contingency operation as a member of the National Guard or Reserves.
- ☐ because I am the ___ spouse; ___ son or daughter; ___ parent; ___ next of kin of a covered service member with a serious injury or illness.

I acknowledge my obligation to provide medical certification of my serious health condition or that of a family member in order to be eligible for family and medical leave within 15 days of the request for certification.

I acknowledge receipt of information regarding my obligations under the family and medical leave policy of the school district.

I request that my family and medical leave begin on _____ and I request leave as follows: (check one)

- ☐ continuous
I anticipate that I will be able to return to work on _____.
- ☐ intermittent leave for the:
 - ☐ birth of my child or adoption or foster care placement subject to agreement by the district
 - ☐ serious health condition of myself, parent, or child when medically necessary
 - ☐ because of a qualifying exigency arising out of the fact that my ___ spouse; ___ son or daughter; ___ parent is on active duty or call to active duty status in support of a contingency operation as a member of the National Guard or Reserves.
 - ☐ because I am the ___ spouse; ___ son or daughter; ___ parent; ___ next of kin of a covered service member with a serious injury or illness.

Details of the needed intermittent leave:

I anticipate returning to work at my regular schedule on _____.

LICENSED EMPLOYEE FAMILY AND MEDICAL LEAVE REQUEST FORM

_____ reduced work schedule for the:

- _____ birth of my child or adoption or foster care placement subject to agreement by the school district
- _____ serious health condition of myself, parent, or child when medically necessary
- _____ because of a qualifying exigency arising out of the fact that my _____ spouse; _____ son or daughter; _____ parent is on active duty or call to active duty status in support of a contingency operation as a member of the National Guard or Reserves.
- _____ because I am the _____ spouse; _____ son or daughter; _____ parent; _____ next of kin of a covered service member with a serious injury or illness.

Details of needed reduction in work schedule as follows:

I anticipate returning to work at my regular schedule on _____.

I realize I may be moved to an alternative position during the period of the family and medical intermittent or reduced work schedule leave. I also realize that with foreseeable intermittent or reduced work schedule leave, subject to the requirements of my health care provider, I may be required to schedule the leave to minimize interruptions to school district operations.

While on family and medical leave, I agree to pay my regular contributions to employer sponsored benefit plans. My contributions will be deducted from moneys owed me during the leave period. If no monies are owed me, I will reimburse the school district by personal check or cash for my contributions. I understand that I may be dropped from the employer-sponsored benefit plans for failure to pay my contribution.

I agree to reimburse the school district for any payment of my contributions with deductions from future monies owed to me or the school district may seek reimbursement of payments of my contributions in court.

I acknowledge that the above information is true to the best of my knowledge.

Signed _____

Date _____

If the employee requesting leave is unable to meet the above criteria, the employee is not eligible for family and medical leave.

CLASSIFIED EMPLOYEE FAMILY AND MEDICAL LEAVE REQUEST FORM

Date: _____

I, _____, request family and medical leave for the following reason:

(check all that apply)

- ☐ for the birth of my child;
☐ for the placement of a child for adoption or foster care;
☐ to care for my child who has a serious health condition;
☐ to care for my parent who has a serious health condition;
☐ to care for my spouse who has a serious health condition; or
☐ because I am seriously ill and unable to perform the essential functions of my position.
☐ because of a qualifying exigency arising out of the fact that my _____ spouse; _____ son or daughter; _____ parent is on active duty or call to active duty status in support of a contingency operation as a member of the National Guard or Reserves.
☐ because I am the _____ spouse; _____ son or daughter; _____ parent; _____ next of kin of a covered service member with a serious injury or illness.

I acknowledge my obligation to provide medical certification of my serious health condition or that of a family member in order to be eligible for family and medical leave within 15 days of the request for certification.

I acknowledge receipt of information regarding my obligations under the family and medical leave policy of the school district.

I request that my family and medical leave begin on _____ and I request leave as follows:
(check one)

☐ continuous

I anticipate that I will be able to return to work on _____.

☐ intermittent leave for the:

- ☐ birth of my child or adoption or foster care placement subject to agreement by the district;
☐ serious health condition of myself, spouse, parent, or child when medically necessary;
☐ because of a qualifying exigency arising out of the fact that my _____ spouse; _____ son or daughter; _____ parent is on active duty or call to active duty status in support of a contingency operation as a member of the National Guard or Reserves.
☐ because I am the _____ spouse; _____ son or daughter; _____ parent; _____ next of kin of a covered service member with a serious injury or illness.

Details of the needed intermittent leave:

I anticipate returning to work at my regular schedule on _____.

Rescind - replaced with
WH-380 Certification forms

Code No. 409.3E3

Page 1 of 4

LICENSED EMPLOYEE FAMILY AND MEDICAL LEAVE CERTIFICATION FORM

1. Employee's Name _____
2. Patient's Name (if different from employee) _____
3. The attached sheet describes what is meant by a "serious health condition" under the Family and Medical Leave Act. Does the patient's condition, for which the employee is taking FMLA leave, qualify under any of the categories described? If so, please check the applicable category.

(1) ____ (2) ____ (3) ____ (4) ____ (5) ____ (6) ____
or ____ None of the above
4. Describe the medical facts which support your certification, including a brief statement as to how the medical facts meet the criteria of one of these categories:
5.
 - a. State the approximate date the condition commenced, and the probable duration of the condition (and also the probable duration of the patient's present incapacity, i.e. inability to work, attend school or perform other regular activities due to the serious health condition, treatment therefor, or recovery therefrom, if different):
 - b. Will it be necessary for the employee to take work only intermittently or to work on a less than full schedule as a result of the condition (including for treatment described in Item 6 below)?

If yes, give the probable duration:
 - c. If the condition is a chronic condition (condition #4) or pregnancy, state whether the patient is presently incapacitated and the likely duration and frequency of episodes of incapacity:
6.
 - a. If additional treatments will be required for the condition, provide an estimate of the probable number of such treatments:

If the patient will be absent from work or other daily activities because of treatment on an intermittent or part-time basis, also provide an estimate of the probable number of and interval between such treatments, actual or estimated dates of treatment if known, and period required for recovery if any:

Rescind - no longer needed
replaced with a checklist

LICENSED EMPLOYEE FAMILY AND MEDICAL LEAVE REQUEST WORK SHEET

Complete this work sheet upon receiving a request for family and medical leave that may qualify under the Family Medical Leave Act. Be sure to note the requirements relating to family and medical leave in the school district's policy/collective bargaining agreement prior to relying on this work sheet as the sole source of the school district's obligations. Also be sure to note the definitions in Regulation 409.3R2.

Section I: Eligible Employee. *(Please check all that apply.)*

____ Covered by a policy/collective bargaining agreement. *(If checked, please move to Section II.)*

____ The employee must meet all criteria below to move to Section II.

____ 50 or more employees are on the payroll of or under contract to the school district.

____ Worked 52 weeks in the school district (consecutive or nonconsecutive). **OR**
____ Worked 12 months in the school district (consecutive or nonconsecutive).

____ Worked 1250 hours for the school district in 12 months prior to the request. Full-time professional employees who are exempt from the wage and hour law may be presumed to have worked the minimum hours required.

Section II: Family and Medical Leave Purpose. *(One must be checked to move to Section III.)*

____ Birth and care of newborn prior to first anniversary of child's birth.

____ Care of adopted child or foster care child prior to first anniversary of placement.

____ Care for serious health condition of spouse, child, child for which employee is "in loco parentis" and for any of these if they are over eighteen and have a disability which prevents the child from caring for himself or herself.

____ Requested medical certification for family and medical leave due to a serious health condition of the spouse, parent or child on ____ (date) ____.

____ Received medical certification within 15 days of the request on ____ (date) ____.

____ Serious health condition of the employee.

____ Requested medical certification for family and medical leave due to a serious health condition of the employee on ____ (date) ____.

____ Received medical certification within 15 days of the request on ____ (date) ____.

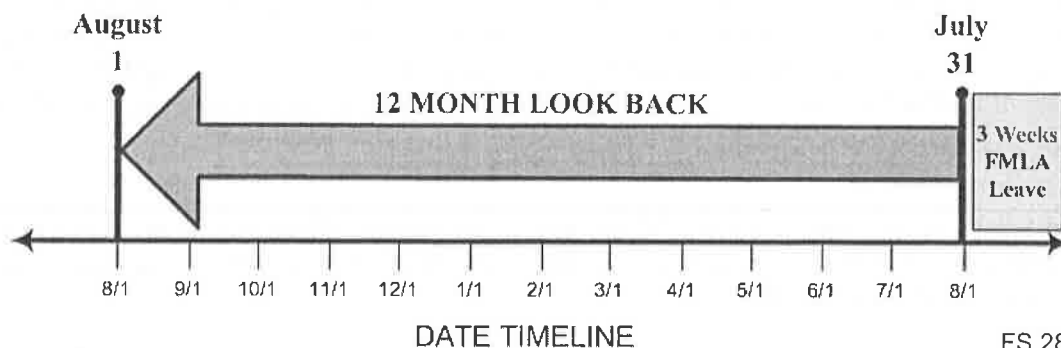
____ Other purposes contained in a policy/collective bargaining agreement.

Fact Sheet #28H: 12-month period under the Family and Medical Leave Act (FMLA)

The FMLA entitles eligible employees who work for covered employers to take unpaid, job-protected leave in a defined 12-month period for specified family and medical reasons. Generally, employers may select one of four options to establish the 12-month period to be uniformly applied to all employees taking FMLA leave. This fact sheet does not address the “single 12-month period” applied to military caregiver leave, which differs from the employer determined 12-month period used for other FMLA leave reasons. See Fact Sheets #28M(a), Military Caregiver Leave for a Current Servicemember under the FMLA or #28M(b), Military Caregiver Leave for a Veteran under the FMLA.

The employer may use any of the following methods to establish the 12-month period:

- (1) **the calendar year** – 12-month period that runs from January 1 through December 31;
- (2) **any fixed 12-months** – 12-month period such as a fiscal year (for example, October 1 through September 30), a year starting on an employee’s anniversary date (for example, September 22 through September 21), or a 12-month period required by state law;
- (3) **the 12-month period measured forward** – 12-month period measured forward from the first date an employee takes FMLA leave. The next 12-month period would begin the first time FMLA leave is taken after completion of the prior 12-month period; or
 - For example, Lucia’s FMLA leave begins on November 6, 2012 so her 12-month period is November 6, 2012 through November 5, 2013.
- (4) **a “rolling” 12-month period measured backward** – 12-month period measured backward from the date an employee uses any FMLA leave. Under the “rolling” 12-month period, each time an employee takes FMLA leave, the remaining leave entitlement would be the balance of the 12 weeks which has not been used during the immediately preceding 12 months.
 - *Example 1:* Michael requests three weeks of FMLA leave to begin on July 31st. The employer looks back 12 months (from July 31st back to the previous August 1st) to see if any FMLA leave had been used. Michael had not taken any previous FMLA leave, so he is entitled to the three weeks he requested and has nine more weeks available.



POLICY REVIEW

1st Reading

Current EB policy is marked with changes based on the current IASB policy reference manual

Wording to be removed is ~~crossed out~~

Additions are in **bold and underlined**

Decisions to be made are **highlighted**

Optional wording is in *[italics and brackets]*

Policy Code Signs & Symbols:

- R This symbol following a policy code number indicates the statement is an administrative regulation rather than a board policy
- E This symbol following a policy code number indicates the statement is an exhibit rather than a board policy.

- Legal Reference This sign indicates the legal references. They tell the user where they may find the statutes, case law, attorney general opinions, or administrative rules that give authority to a policy.

- Cross Reference Many policies in the manual relate to other policies in the manual. Cross references are provided to assist the user in finding all of the related policies.

ASSISTANCE ANIMALS

It is the policy of East Buchanan CSD to foster an equal education environment for all students, employees and community members within the district. The purpose of this policy is to provide guidance to the district on the proper use of assistance animals while on district property. The district shall allow the use of qualified service to accompany individuals with disabilities in all areas of district buildings where the public is normally allowed to go. This can include classrooms, cafeteria and school buses. Individuals with disabilities are people who have a physical or mental impairment that substantially limits one or more major life activities. Service animals are dogs and in some instances miniature horses trained to do work or perform tasks for individuals with disabilities.

Service animals must be current on all required vaccinations. Service animals also must be under control while on district grounds. The animal may be under control by either the individual with a disability, or a handler of the service. Under control means harnessed, leashed or tethered, unless these devices interfere with the animal's work, in which case under voice or other directive control.

Miniature Horses as Service Animals

Miniature horses shall be allowed as service animals within the district whenever it is reasonable to allow them. Factors to consider when determining reasonableness include: whether the miniature horse is house broken; whether the miniature horse is under the owner's control; whether the facility can accommodate the miniature horse's type, size and weight; and whether the miniature horse's presence will not compromise legitimate safety requirements necessary for safe operation of the facility.

Establishing the Need for a Service Animal

When no prior notice is given to the district of the use of a service animal, the Superintendent and/or school administrators are permitted to ask the following questions:

"Do you need/require this animal because of a disability?"

If the animal's trained tasks are not readily apparent, the administrator may ask:

"What work or task has the animal been trained to perform?"

Service Animals in training

Assuming the handler and animal are otherwise allowed, individuals who train service animals will also be allowed access with their service animal in training to public areas of district buildings and property. The service animal in training is expected to abide by the same requirements as a service or assistive animal.

Exclusion of Service Animals

In certain limited circumstances, it may be reasonable to exclude the use of a service animal from district property. The Superintendent is permitted to exclude service animals from district buildings and property in the following circumstances: The presence of the animal poses a direct threat to the health and safety of others; the owner or handler is unable to control the animal; the animal is not house broken; the presence of the animal significantly disrupts or interferes with the educational process; or the presence of the animal would require a fundamental alteration to the program. If a service animal is properly excluded from district property, the district shall provide the student served by the animal the opportunity to participate in the program, service or activity without having the service animal on district property.

Emotional Support Animals and Therapy Animals [Optional section as these animals are not commonly required to be accommodated]

Emotional support animals are medically prescribed to provide therapeutic benefit through dedicated companionship. Emotional support animals' sole function is to provide emotional support or comfort. Therapy animals are involved in an animal-assisted therapy program involving animals as a form of treatment.

Emotional support animals and therapy animals do not meet the definition of service animals. However, the district recognizes their value in our community. The superintendent shall evaluate the use of emotional support animals and therapy animals on a case-by-case basis. District employees may use therapy animals in the course of their regular duties only after receiving permission from the superintendent.

Student use of Emotional Support Animals and Therapy Animals

Factors the superintendent should consider in making the determination include but are not limited to:

- a. Whether the animal is housebroken*
- b. Whether the animal has a current vaccination certificate*
- c. Whether the animal has been recommended through an individual education plan (IEP) or a 504 plan as necessary for the student to receive free access to public education*
- d. Whether the facility can accommodate the animal's type size and weight, and*
- e. Whether the animal's presence will not compromise legitimate safety requirements necessary for safe operation of the facility*

Employee use of Therapy Animals as part of Education Environment

Before permission to use therapy animals is granted, staff members must provide:

- 1. Proof that the animal is certified to be a therapy animal;*
- 2. An explanation of how the animal will be used, including research supporting the use of therapy animals;*
- 3. A plan for how the staff member will provide for the care and control of the animal;*
- 4. A plan for how the staff member will accommodate students with allergies to the animal; and*
- 5. A current vaccination certificate for the animal.*

Legal References: 29 U.S.C. §794
42 U.S.C. §12132
28 C.F.R. 35
Iowa Code §216C

Cross References: 606.3 Animals in the Classroom

NOTE: The use of service animals is a civil right established by federal and state laws. However, the use of emotional support and therapy animals does not necessarily have the same legal protections. The portion of this policy in italics reflects optional language for your district to consider.

IASB October 2021 Quarterly Policy Updates Note: The Iowa Civil Rights Act (ICRA) was updated in order to better align with the federal Americans with Disabilities Act. The ICRA now uses the same terminology of service animals and limits service animals to dogs and in qualifying instances, miniature horses. This policy language has been updated to reflect this alignment and to clarify the species of acceptable service animals to those permitted by law.

Approved _____

Reviewed _____

Revised _____

ORGANIZATION OF THE BOARD OF DIRECTORS

The East Buchanan Community School District board is authorized by and derives its organization from Iowa law. The board will consist of 5 board members. Board members are elected two (2) at-large and three (3) by director district.

The board is organized for the purpose of setting policy and providing general direction for the school district. The board will hold its organizational meeting at **or before** the first regular meeting following the canvass of votes. The retiring board will transfer materials, including the board policy manual, and responsibility to the new board.

The organizational meeting allows the outgoing board to approve minutes of its previous meetings, complete unfinished business and review the school election results. The retiring board will adjourn and the new board will then begin. The board secretary will administer the oath of office to the newly-elected board members. The board secretary will preside while the new board elects the president and vice-president of the new board.

NOTE: Iowa law establishes the organizational meeting at or before the first regular meeting following the canvass of votes. Board members elected at a general election must qualify at or before the organizational meeting.

IASB Quarterly Policy Update: Following changes made to the law during the 2021 legislative session boards now have flexibility to hold their organizational meeting either at or before the first regular meeting following the canvass of votes. This additional flexibility has been updated in the policy language.

Legal Reference: Iowa Code §§ 274.2; 275.23A; 277.23, .28, .31; 279.1, .5, .7, .8, .33.
281 I.A.C. 12.3(2).

Cross Reference: 202 Board of Directors Members
206.1 President
206.2 Vice-President
210 Board of Directors' Meetings

Approved: April 14, 2004
Reviewed: February 10, 2010; May 11, 2015
Revised: January 8, 2020

BOARD MEETING AGENDA

The tentative agenda for each board meeting will state the topics for discussion and action at the board meeting. The agenda is part of the public notice of the board meeting and will be posted and distributed.

Persons requesting to place an item on the agenda must make a request to the superintendent prior to the drafting of the tentative agenda. The person making the request must state the person's name, address, purpose of the presentation, action desired and pertinent background information. Requests from the public may be added to the tentative agenda at the discretion of the superintendent after consultation with the board president. Requests received after the deadline may only be added to the agenda for good cause.

The tentative agenda and supporting documents will be sent to the board members days prior to the scheduled board meeting. These documents are the private property of the board member. Persons wishing to view the tentative agenda and supporting documents may do so at the central administration office.

The board will take action only on the items listed on the tentative agenda posted with the public notice. Items added to the agenda may be discussed or taken under advisement by the board. If an added item is acted upon, the minutes of the board meeting will state the reason justifying the immediate action.

It is the responsibility of the board president and superintendent to develop the agenda for each board meeting. **Any board member may place an item on the next regular agenda with the consent of a majority of the board. Board members wishing to do so should provide notice to the superintendent and board president days prior to the scheduled meeting.**

NOTE: There is no legal requirement for the method used in developing the board agenda. This policy states the common procedure for drafting the board agenda. If a board uses another procedure, it should be reflected in this policy.

IASB October 2021 Quarterly Policy Updates Note: The language update to this policy is not a legal requirement. This update is recommended as a best practice for districts to facilitate the voice of the board to be heard during meetings. This updated language provides an opportunity for the majority of the board to place an item on the meeting agenda. Boards still maintain the ability to call a special meeting if a majority of the board wishes to have one.

Legal Reference:	Iowa Code §§ 21; 279.8
Cross Reference:	210 Board of Directors' Meetings
	211 Open Meetings
	213 Public Participation in Board Meetings
	215 Board of Directors' Records
	402.5 Public Complaints About Employees
	502.4 Student Complaints and Grievances

Approved: July 14, 2004

Reviewed: July 13, 2015; March 11, 2020

Revised:

CLOSED SESSIONS

Generally, board meetings will be open meetings, unless a closed session ~~or exempt meeting~~ is provided for by law. ~~The board will hold a closed session or exempt meeting in the situations stated below.~~

Exceptions to the Open Meetings Law

Closed sessions take place as part of an open meeting. **The board may enter into a closed session for any reason permitted by law.**

The item for discussion in the closed session will be listed as part of the tentative agenda on the public notice **with the full text of the Iowa Code citation reference stated on the agenda.** The motion for a closed session, stating the purpose for the closed session, will be made and seconded during the open meeting. A minimum of two-thirds of the board, or all of the board members present, **if any are absent,** must vote in favor of the motion on a roll call vote. Closed sessions will be tape recorded and have detailed minutes kept by the board secretary. **No voting will take place in the closed session.** Final action on matters discussed in the closed session will be taken in an open meeting.

The minutes and the ~~tape~~ recording will restate the motion made in the open meeting, the roll call vote, the members present, and the time the closed session began and ended. The ~~tape~~-recordings and the written minutes will be kept for one year from the date of the meeting. Real estate related minutes and ~~tapes~~ **recordings** will be made public after the real estate transaction is completed.

The detailed minutes and tape recording will be sealed and will not be public records open to public inspection. The minutes and ~~tape~~-recording will only be available to board members or opened upon court **or administrative** order in an action to enforce the requirements of the open meetings law. The board has complete discretion as to whom may be present at a closed session, **but generally closed sessions will be limited to the board, a recording secretary and the superintendent if indicated.** **The board has discretion to nominate the board secretary or any board member to serve as recording secretary for the closed session.**

~~Reasons for the board entering into a closed session from an open meeting include, but are not limited to, the following:~~

- ~~1. To review or discuss records which are required or authorized by state or federal law to be kept confidential or to be kept confidential as a condition for the board's possession or receipt of federal funds.~~
- ~~2. To discuss strategy with legal counsel in matters presently in litigation, or where litigation is imminent, if disclosure would be likely to prejudice or disadvantage the board.~~
- ~~3. To discuss whether to conduct a hearing, or conduct a hearing for suspension or expulsion of a student, unless an open meeting is requested by the student or the parent of the student.~~
- ~~4. To evaluate the professional competency of an individual whose appointment, hiring, performance, or discharge is being considered when a closed session is necessary to prevent needless and irreparable injury to that individual's reputation and that individual requests a closed session.~~
- ~~5. To discuss the purchase or sale of particular real estate, but only when premature disclosure could be reasonably expected to increase the price the board would have to pay for the property, or in case of a sale reduce the price the board could receive for the property.~~

CLOSED SESSIONS

Exemptions to the Open Meetings Law

Board meetings at which a quorum is not present, or gatherings of the board for purely ministerial or social purposes when there is no discussion of policy or no intent to avoid the purposes of the open meetings law, are exempt from the open meetings law requirements. Since gatherings of this type are exempt from the open meetings requirements, they can be held without public notice, be separate from an open meeting, be held without taping the gathering or taking minutes, and be held without a vote or motion. The board may also hold an exempt session for the following:

1. negotiating sessions, strategy meetings of public employers or employee organizations, mediation and the deliberative process of arbitration;
2. to discuss strategy in matters relating to employment conditions of employees not covered by the collective bargaining law;
3. to conduct a private hearing relating to the recommended termination of a teacher's contract. The private hearing however, in the teacher's contract termination will be recorded verbatim by a court reporter; and
4. to conduct a private hearing relating to the termination of a probationary administrator's contract or to review the proposed decision of the administrative law judge regarding the termination of an administrator's contract.

IASB October 2021 Quarterly Policy Updates Note: This policy has been updated to clarify language on when to utilize closes sessions. Language related to exempt meetings has also been removed from this policy. Exempt meetings are separate from open meetings, and the topic should be separated into a distinct board policy.

Legal Reference: Iowa Code §§ 21; 22.7; 279.24.

Cross Reference: 208 Ad Hoc Committees
211 Open Meetings
212.1 Exempt Meetings

Approved: July 14, 2004

Reviewed: July 13, 2015; March 11, 2020

Revised: January 11, 2012

EXEMPT MEETINGS

Board meetings at which a quorum is not present, or gatherings of the board for purely ministerial or social purposes when there is no discussion of policy or no intent to avoid the purposes of the open meetings law, are exempt from the open meetings law requirements. Since gatherings of this type are exempt from the open meetings requirements, they can be held without public notice, be separate from an open meeting, be held without recording the gathering or taking minutes, and be held without a vote or motion. The board may also hold an exempt session for the following reasons, or as may be otherwise authorized by law:

1. Negotiating sessions, strategy meetings of public employers or employee organizations, mediation and the deliberative process of arbitration;
2. to discuss strategy in matters relating to employment conditions of employees not covered by the collective bargaining law;
3. to conduct a private hearing relating to the recommended termination of a teacher's contract. The private hearing however, in the teacher's contract termination will be recorded verbatim by a court reporter; and
4. to conduct a private hearing relating to the termination of a probationary administrator's contract or to review the proposed decision of the administrative law judge regarding the termination of an administrator's contract.

NOTE: Meetings exempt from the Open Meetings law are separate, standalone meetings of the board. For this reason, exempt meetings should never take place within an open meeting. Exempt meetings may be placed before or after an open meeting. But once an open meeting has convened, it should be adjourned prior to holding an exempt meeting. While there is no legal requirement to provide notice or keep minutes for exempt meetings; there may be intrinsic benefit for the community to understand that the board is communicating in a transparent fashion. For this reason, boards may choose to provide a notice that they intend to gather for an exempt meeting.

IASB October 2021 Quarterly Policy Updates Note: Exempt meeting language from policy 212 has been moved to create this distinct policy. Language has been updated to clarify the use of exempt meetings.

Legal Reference: Iowa Code §§ 20.17; 21; 22.7; 279.15, .16.

Cross Reference: 208 Ad Hoc Committees
211 Open Meetings
212 Closed Sessions

Approved _____

Reviewed _____

Revised _____

COMMUNICATION CHANNELS

Questions and problems are resolved at the lowest organizational level nearest to the complaint. School employees are responsible for conferring with their immediate supervisor on questions and concerns. Students and other members of the school district community will confer with a licensed employee and then with the principal on questions and concerns.

If resolution is not possible by any of the above, individuals may bring it to the attention of the superintendent within five (5) school days of their discussion with the principal. If there is no resolution or plan for resolution by the superintendent within five (5) school days of the individual's discussion with the superintendent, the individual may ask to have the question or problem placed on the board agenda. It is within the board's discretion whether to hear the concern.

It will first be the responsibility of the administrators to resolve questions and problems raised by the employees and the students they supervise and by other members of the school district community.

Legal Reference: Iowa Code § 279.8

Cross Reference:	213	Public Participation in Board Meetings
	213.1	Public Complaints
	401.4	Employee Complaints
	502.4	Student Complaints and Grievances
	504.3	Student Publications

Approved December 8, 2004

Reviewed April 12, 2017

Revised _____

EMPLOYEE COMPLAINTS

Complaints of employees against fellow employees should be discussed directly between employees as appropriate for the nature of the complaint. ~~If necessary, Complaints will be brought directly to the immediate supervisor, principal or superintendent and will be~~ should be made in a constructive and professional manner. Complaints ~~will never be~~ should generally not be made in the presence of other employees, students or outside persons.

~~A formal grievance procedure is contained in the master contract between the employee's licensed bargaining unit and the board. This policy will not apply to a complaint that has been or could be filed at the employee's discretion under that formal grievance procedure.~~

If the complaint cannot be resolved, the employee may discuss the matter with their immediate supervisor. If the matter cannot be resolved within days of speaking with the immediate supervisor, the employee may discuss it with the principal within days of the supervisor's decision. If the matter cannot be resolved by the principal, the employee may discuss it with the superintendent within days after speaking with the principal.

If the matter is not satisfactorily resolved by the superintendent, the employee may ask to have the matter placed on the board agenda of a regularly scheduled board meeting in compliance with board policy. The board retains discretion as to whether to consider or take action on any complaint.

This policy is designed to create an appropriate process for pursuing general employee complaints. However, employees wishing to address a complaint on a topic with a more specialized procedure such as master contract grievances, or bullying or harassment claims should follow the appropriate process set forth in the master contract, employee handbook or other board policies specific to that topic.

[Insert additional information (e.g., specific steps, contacts, etc.) regarding the district's complaint process, if one is not contained in another district document].

NOTE: *Boards should adapt IASB sample policies to meet the needs of the local district. Please ensure that the language contained in local policy is consistent with language contained in other district documents (e.g., handbooks, master contracts, etc.).*

NOTE: *There should be reasonable limits on the number of days an employee has to pursue a complaint. Cross reference with the number of days listed in policy 502.4 for consistency.*

IASB October 2021 Quarterly Policy Updates Note: This policy has been updated to utilize the same process for handling employee complaints as is used for student complaints. By utilizing the same procedures this builds clarity for the district and for employees.

Legal Reference: Iowa Code §§ 20; 279.8

Cross Reference: 210.8 Board Meeting Agenda

Approved January 11, 2006

Reviewed November 15, 2017

Revised _____

STUDENT COMPLAINTS AND GRIEVANCES

Creating an environment where students feel comfortable addressing their concerns in a meaningful manner is vital to the learning process. It is the goal of the board to resolve student complaints at the lowest organizational level. Student complaints and grievances regarding board policy or administrative regulations, or other matters should be addressed to the student's teacher or another licensed employee, other than the administration, for resolution of the complaint. ~~It is the goal of the board to resolve student complaints at the lowest organizational level.~~

If the complaint cannot be resolved by a ~~licensed employee~~ **student's teacher or other licensed employee**, the student may discuss the matter with the principal within 5 calendar days of the employee's decision. If the matter cannot be resolved by the principal, the student may discuss it with the superintendent within 5 calendar days after speaking with the principal.

If the matter is not satisfactorily resolved by the superintendent, the student may ask to have the matter placed on the board agenda of a regularly scheduled board meeting in compliance with board policy. **The board retains discretion as to whether to consider or take action on any complaint.**

NOTE: There should be reasonable limits on the number of days a student has to pursue a complaint. Cross reference with the number of days listed in policy 401.4 for consistency..

IASB October 2021 Quarterly Policy Updates Note: This policy language has been updated to build clarity of purpose and to clarify the process for handling student complaints.

Legal Reference: Iowa Code § 279.8

Cross Reference: 210.8 Board Meeting Agenda
213 Public Participation in Board Meetings
502 Student Rights and Responsibilities
504.3 Student Publications

Approved December 13, 2006

Reviewed December 13, 2017

Revised _____

INSUFFICIENT CLASSROOM SPACE

It is the goal of the district to create learning environments that encourage the growth and development of each student. Providing classrooms with an appropriate student-teacher ratio is central to achieving this goal. Insufficient classroom space exists when conditions in the district adversely affect the implementation of the district's goals and its educational program.

Insufficient classroom space is determined on a case-by-case basis.

In making its determination whether insufficient classroom space exists, the board may consider several factors, including but not limited to, the nature of the education program, the grade level, the available licensed employees, the instructional method, the physical space, student-teacher ratios, equipment and materials, facilities either being planned or under construction, facilities planned to be closed, financial condition of the school district and projected to be available, a sharing agreement in force or planned, a bargaining agreement in force, laws or rules governing special education class size, board-adopted school district goals and objectives, and other factors considered relevant by the board.

This policy is reviewed by the board annually. It is the responsibility of the superintendent to bring this policy to the attention of the board each year.

NOTE: This is a policy mandated by Iowa's open enrollment law and reflects the requirements of the law.

IASB October 2021 Quarterly Policy Updates Note: This policy has been updated to provide additional information on the purpose of this policy and the parameters for assessing when insufficient classroom space exists for districts.

Legal Reference: Iowa Code § 282.18(13).
281 I.A.C. 17.6(3).

Cross Reference: 103 Long-Range Needs Assessment
501.15 Open Enrollment Transfers - Procedures as a Receiving District
606.1 Class Size - Class Grouping

Approved February 18, 2008

Reviewed March 13, 2013

Revised _____