The information provided in this booklet is in summary form. For more detailed information, please refer to the online version of the Employee Handbook, School Board Policies and Regulations Manual, the Charlottesville City Schools website at www.charlottesvilleschools.org, or contact the Office of Human Resources at 434-245-2400.

Note: Employees are responsible for knowledge of all information contained within the Employee Handbook as well as knowledge of the Division’s policies as determined by the School Board.

Charlottesville City Schools does not discriminate on the basis of sex, gender, race, color, national origin, disability, religion, ancestry, age, marital or veteran’s status, physical or mental genetic information, sexual orientation, gender identity or expression, or any classification protected by applicable law in its programs or activities.

Regulation: GB-R
The CCS Employee Handbook is provided as a quick reference for many policies, regulations, and procedures related to employment with the Division. Each employee is expected to read the handbook carefully for information about expectations, communications, and benefits. The complete policy manual and regulation manual are available in all schools and online.

The Human Resource policies, regulations, and procedures are reviewed annually. You are encouraged to submit suggestions or questions related to these. Please use the form below to submit any items to Dr. Keith P. Hubbard, Director of Human Resources, 1562 Dairy Road, Charlottesville, VA 22903.

<table>
<thead>
<tr>
<th>Suggestions for Human Resource Policies, Regulations and Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date: ______________________</td>
</tr>
<tr>
<td>Policy, Regulation or Procedure to be reviewed: ____________________</td>
</tr>
<tr>
<td>Suggestion, Question, or Concern: _________________________________</td>
</tr>
<tr>
<td>__________________________________________________________________</td>
</tr>
<tr>
<td>__________________________________________________________________</td>
</tr>
<tr>
<td>__________________________________________________________________</td>
</tr>
<tr>
<td>__________________________________________________________________</td>
</tr>
<tr>
<td>__________________________________________________________________</td>
</tr>
<tr>
<td>__________________________________________________________________</td>
</tr>
<tr>
<td>__________________________________________________________________</td>
</tr>
<tr>
<td>__________________________________________________________________</td>
</tr>
<tr>
<td>__________________________________________________________________</td>
</tr>
</tbody>
</table>

Optional:

Name: __________________________________________________________________
Contact Information: (phone or email) __________________________________________________________________
# TABLE OF CONTENTS

## GENERAL INFORMATION

- Table of Contents
- 2020-2021 Calendar 7
- 2020-2021 Payroll Calendar 8
- Definitions of Employees 9
- Holidays (12 month employees) 10
- Inclement Weather Procedures for Custodians 11
- Office Schedule 11
- Staff Time Schedules 12-13
- Work Day for Instructional Staff 13
- Work Procedures for Personnel on School Closings 14

## INFORMATION FOR ALL EMPLOYEES

- Bloodborne Pathogens Exposure Training 15
- Drug-Free Workplace 16
- Tobacco and Vapor Products 17
- Employment of Family Members 18
- Staff Weapons in School 19
- Effects of Criminal Convictions 19-21
- Equal Employment Opportunity/Nondiscrimination 22-25
- School Employee Conflict of Interest 25
- Grievance Procedures 25
- Harassment 26-31
- Board-Staff Communications 32
- Personnel Records 33
- Retirement Procedures 34
- Vacancies 34

## BENEFITS FOR EMPLOYEES

- Colonial Life Optional Benefits 35
- COBRA 35-37
- Employee Assistance Program 37
- Federal Insurance Contributions Act (FICA) Social Security and Medicare 37
- Flexible Spending Accounts for Unreimbursed Medical and Dependent Daycare 38
- Influenza and Hepatitis-B Inoculations 38-39
- Life Insurance 39
- Optional Life Insurance Coverage 39
- Payment of Accumulated Sick Leave Non-retired Termination Employee 40
- Payroll Deductions 40
- Virginia Retirement System (VRS) 40
<table>
<thead>
<tr>
<th><strong>Retirement Incentives</strong></th>
<th>41-42</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deferred Compensation Plan - 457(b)</td>
<td>43</td>
</tr>
<tr>
<td>Retirement Savings Account – 403 (b)</td>
<td>43-44</td>
</tr>
<tr>
<td>Short Term Disability Option</td>
<td>45</td>
</tr>
<tr>
<td>Travel Allowance</td>
<td>45</td>
</tr>
<tr>
<td>Tuition Reimbursement</td>
<td>45-46</td>
</tr>
<tr>
<td>Unemployment Compensation</td>
<td>47</td>
</tr>
<tr>
<td>Wellness Program</td>
<td>47</td>
</tr>
<tr>
<td>Lactation Support</td>
<td>47</td>
</tr>
<tr>
<td>Worker’s Compensation</td>
<td>48</td>
</tr>
</tbody>
</table>

| **LEAVE** |
|--------------------------|-------|
| Family and Medical Leave (FMLA) | 49-54 |
| Unpaid Leave | 54 |
| Leave Without Pay | 55-56 |
| Military Leave | 56 |
| Jury Duty or Subpoena Leave | 57 |
| Personal Leave | 57 |
| Sick or Accident Leave | 57-58 |
| Annual Leave (12 month employees) | 58-59 |
| Professional or Educational Leave | 59 |
| Leave for Religious Holidays | 59 |

| **LICENSED STAFF** |
|--------------------------|-------|
| Courses for Renewal Credit | 60 |
| Duty-Free Lunch Periods | 60 |
| Professional Staff | 60 |
| Evaluation of Professional Staff | 60-61 |
| Home Contacts | 61 |
| Licensure | 61 |
| Licensure Fees for Recertification | 61 |
| National Board Certification | 62 |
| Non-School Employment by Professional Staff Members | 62 |
| Part-time and Substitute Professional Staff Employment | 62-63 |
| Professional Growth/Staff Development | 64 |
| Professional Staff Assignments and Transfers | 64 |
| Professional Staff Contracts | 65 |
| Professional Staff Members: Contract Status | 66-67 |
| Professional Staff Members: Discipline | 68-69 |
| Resignation of Professional Staff Members | 69 |
| Salaries and Credit for Teaching Experience | 69-70 |
| Staff Assignments | 70 |
| Tutoring for Pay | 70 |
### CLASSIFIED STAFF

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support Staff Employment Status</td>
<td>71</td>
</tr>
<tr>
<td>Probationary Period for Classified Staff</td>
<td>71</td>
</tr>
<tr>
<td>Resignation of Support Staff Members</td>
<td>72</td>
</tr>
<tr>
<td>Support Staff Assignments and Transfers</td>
<td>72</td>
</tr>
<tr>
<td>Support Staff Members: Contract Status and Discipline Process</td>
<td>72-73</td>
</tr>
<tr>
<td>Licensure Fees for School Nurses</td>
<td>73</td>
</tr>
<tr>
<td>Terms of Employment</td>
<td>73</td>
</tr>
</tbody>
</table>

### APPENDIX

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and Address Change Form</td>
<td>75</td>
</tr>
<tr>
<td>Tuition Reimbursement Form</td>
<td>76</td>
</tr>
<tr>
<td>Accommodation Certification Form</td>
<td>78</td>
</tr>
<tr>
<td>Family and Medical Leave Act Request</td>
<td>80</td>
</tr>
<tr>
<td>Certification of Health Care Provider for Employee’s Health Condition under FMLA</td>
<td>81</td>
</tr>
<tr>
<td>Family and Medical Leave Act Fitness for Duty Certificate</td>
<td>85</td>
</tr>
<tr>
<td>Initial Virginia License Application</td>
<td>87</td>
</tr>
<tr>
<td>Application for License Renewal</td>
<td>92</td>
</tr>
</tbody>
</table>
GENERAL INFORMATION

Charlottesville City Schools
2020-21 Calendar

August 12-14  New Teacher Orientation
August 18 - September 4 Pre-Service Window for Teachers
August 12-13  Professional Learning Days
September 7  Labor Day – School Division Closed
September 8  First Day of School
September 11,18,25 Early Dismissal Distance/Virtual Learning (Teacher Workday/PD in afternoon)
October 2,9,16,23,30 Early Dismissal Distance/Virtual Learning (Teacher Workday/PD in afternoon)
November 2,3,6,13,20,25 Early Dismissal Distance/Virtual Learning (Teacher Workday/PD in afternoon)
November 6  End of First Grading Period (44 teaching days)
November 26-27  Thanksgiving Break
December 21- January 1 Winter Break
January 4  Students Return from Winter Break
January 8,15,22,29 Early Dismissal Distance/Virtual Learning (Teacher Workday/PD in afternoon)
January 18  Martin Luther King, Jr. Holiday, School Division Closed
January 29  End of Second Grading Period (47 teaching days)
February 5,12,19,26 Early Dismissal Distance/Virtual Learning (Teacher Workday/PD in afternoon)
March 1,5,19,26 Early Dismissal Distance/Virtual Learning (Teacher Workday/PD in afternoon)
April 2,16,23,30 Early Dismissal Distance/Virtual Learning (Teacher Workday/PD in afternoon)
April 2  End of third grading period (45 teaching days)
April 5-9  Spring Break
May 7,14,21,28 Early Dismissal Distance/Virtual Learning (Teacher Workday/PD in afternoon)
May 31  Memorial Day – School Division Closed
June 10  CHS Graduation (tentative)
June 11  Early Dismissal/Last Day of School
          End of Fourth Grading Period (44 teaching days)
          End of School Year (180 teaching days)

Note: This calendar is subject to change as CCS plan for delivery of instruction changes due to COVID 19 pandemic.

Schedule of Inclement Weather Make-Up Days
At the discretion of the School Board, snow days will be made up or covered with banked hours.
or made up in the case of excessive loss of instructional time.

• Early Release Times
  3-year olds  11:00 AM
  Grades PreK-4  12:00 noon
  Grades 5-8  12:45 PM
  Grades 9-12  1:40 PM

These dates are available on a Google calendar at charlottesvilleschools.org/academic-calendar. Subscribe now!
PAYROLL CALENDAR FOR 2020-2021

Payroll and local travel forms should be sent to Alyson Woodward at the Division Administration Office or logged in at the receptionist desk the first Tuesday following the last day of the pay period. Payroll dates have been modified to accommodate occurrences when payroll dates fall on weekends, holidays, etc. (Remember that inclement weather can also shift these dates, e.g., snow, make-up days, etc.)

Paystubs may be picked up at the Division Administration Office after 7:00 A.M. on the date of payroll in the event that an employee is not scheduled to receive direct deposit. Any checks not picked up by 5:00 P.M. will be mailed to the address on the check.

<table>
<thead>
<tr>
<th>Pay Periods</th>
<th>Pay Dates</th>
<th>Pay Periods</th>
<th>Pay Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>June 14 - June 20</td>
<td>July 15</td>
<td>Dec 13 - Dec 19</td>
<td>Jan 15</td>
</tr>
<tr>
<td>June 21 - June 27</td>
<td></td>
<td>Dec 20 - Dec 26</td>
<td></td>
</tr>
<tr>
<td>June 28 - July 4</td>
<td></td>
<td>Dec 27 - Jan 2</td>
<td>Jan 15</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2019</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>July 5 - July 11</td>
<td>July 31</td>
<td>Jan 3 - Jan 9</td>
<td>Jan 29</td>
</tr>
<tr>
<td>July 12 - July 18</td>
<td></td>
<td>Jan 10 - Jan 16</td>
<td>Jan 29</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>July 19 - July 25</td>
<td>Aug 14</td>
<td>Jan 17 - Jan 23</td>
<td>Feb 12</td>
</tr>
<tr>
<td>July 26 - Aug 1</td>
<td></td>
<td>Jan 24 - Jan 30</td>
<td>Feb 12</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aug 2 - Aug 8</td>
<td>Aug 31</td>
<td>Jan 31 - Feb 6</td>
<td>Feb 26</td>
</tr>
<tr>
<td>Aug 9 - Aug 15</td>
<td></td>
<td>Feb 7 - Feb 13</td>
<td>Feb 26</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aug 16 - Aug 22</td>
<td>Sept 15</td>
<td>Feb 14 - Feb 20</td>
<td>March 15</td>
</tr>
<tr>
<td>Aug 23 - Aug 29</td>
<td></td>
<td>Feb 21 - Feb 27</td>
<td>March 15</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aug 30 - Sept 5</td>
<td>Sept 30</td>
<td>Feb 28 - March 6</td>
<td>March 31</td>
</tr>
<tr>
<td>Sept 6 - Sept 12</td>
<td></td>
<td>March 7 - March 13</td>
<td>March 31</td>
</tr>
<tr>
<td>Sept 13 - Sept 19</td>
<td></td>
<td>March 14 - March 20</td>
<td></td>
</tr>
<tr>
<td>Sept 20 - Sept 26</td>
<td>Oct 15</td>
<td>March 21 - March 27</td>
<td></td>
</tr>
<tr>
<td>Sept 27 - Oct 3</td>
<td></td>
<td>March 28 - April 3</td>
<td>April 15</td>
</tr>
<tr>
<td>Oct 4 - Oct 10</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oct 11 - Oct 17</td>
<td>Oct 30</td>
<td>April 4 - April 10</td>
<td>April 30</td>
</tr>
<tr>
<td></td>
<td></td>
<td>April 11 - April 17</td>
<td></td>
</tr>
<tr>
<td>Oct 18 - Oct 24</td>
<td></td>
<td>April 18 - April 24</td>
<td></td>
</tr>
<tr>
<td>Oct 25 - Oct 31</td>
<td>Nov 13</td>
<td>April 25 - May 1</td>
<td>May 14</td>
</tr>
<tr>
<td>Nov 1 - Nov 7</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nov 8 - Nov 14</td>
<td>Nov 24</td>
<td>May 2 - May 8</td>
<td>May 28</td>
</tr>
<tr>
<td>Nov 15 - Nov 21</td>
<td></td>
<td>May 9 - May 15</td>
<td>May 28</td>
</tr>
<tr>
<td>Nov 22 - Nov 28</td>
<td>Dec 15</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nov 29 - Dec 5</td>
<td></td>
<td>May 16 - May 22</td>
<td>June 15</td>
</tr>
<tr>
<td>Dec 6 - Dec 12</td>
<td>Dec 18</td>
<td>May 23 - May 29</td>
<td>June 15</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>May 30 - June 5</td>
<td>June 30</td>
</tr>
<tr>
<td></td>
<td></td>
<td>June 6 - June 12</td>
<td>June 30</td>
</tr>
</tbody>
</table>
DEFINITIONS OF EMPLOYEES
For the Department of Human Resources Regulations, the following definitions shall apply:

1. **Employees of the Board** are all "employees of the Charlottesville City School Board." Whenever reference is made to employees without distinction, such statement shall refer to all School Board employees except the Superintendent.

2. **Licensed or professional employees** shall include Charlottesville City School Board employees whose positions require licensure by the Virginia Board of Education.

3. **Classified employees** shall include Charlottesville City School Board employees whose positions do not require licensure by the Virginia Board of Education and who are employed on a non-contract basis unless otherwise required by law.

4. **Supervisory employees** shall include Charlottesville City School Board principals, assistant principals, and other persons employed full-time in a supervisory position who are required by the Virginia Board of Education to hold a license to be employed in that capacity, excluding the Superintendent.

5. **Full-time/half-time/part-time employees:**
   a. A full-time employee is an employee who works the full daily and yearly time schedule associated with the salary schedule to which he/she is assigned and who is eligible for a full program of fringe benefits as approved by the School Board.
   b. A half-time employee is an employee who does not work the full daily and yearly time schedule associated with a given position but who does work no fewer than 17.5 hours per week during the school year and who earns sick leave, personal leave and health insurance benefits at one-half the rate of said benefits earned by full-time employees. A half-time employee is not eligible for continuing contract status and VRS benefits.
   c. A part-time employee is an employee who is hired on an hourly, as needed basis and who is not eligible, therefore, for any program or fringe benefits.

6. **Temporary employees:**
   a. A temporary teacher is one who is employed: (1) to substitute for a contracted teacher for a temporary period of time during the contracted teacher’s absence, or (2) to fill a teacher vacancy for a period not longer than ninety teaching days.
   b. A classified temporary shall be a classified employee hired for a period not longer than ninety working days.
   c. Temporary employees are not eligible for fringe benefits, except for temporary teachers who may be hired for a full instructional year and as may be determined at the time of employment.

7. **Exempt and Nonexempt Employees:** Employees are classified as either exempt or nonexempt according to the federal Fair Labor Standards Act (FLSA).
   a. Exempt employees are employees who, because of their duties, responsibilities and decision-making authority, are exempt from the overtime provisions of the FLSA. Exempt employees are expected to work whatever hours are necessary to accomplish the requirements of their position. Teachers, counselors, administrators, social workers, psychologists, etc. are exempt employees.
   b. Nonexempt employees are subject to wage laws and are eligible to receive overtime pay for working more than 40 hours a week. Instructional assistants, custodians, child nutrition workers, clerical staff, nurses, etc. are nonexempt employees.

*HR Regulation*
HOLIDAYS (12-MONTH EMPLOYEES)

The following days shall be observed as holidays for all full-time twelve-month employees:

- Independence Day
- Labor Day
- Thanksgiving Day
- Friday following Thanksgiving Day
- Christmas Eve
- Christmas Day
- New Year’s Day
- Martin Luther King, Jr. Day
- Monday of Spring Break
- Memorial Day

Buildings Closed- No Employees Report

December 21, 2020 - January 1, 2021 (Winter Break)

Whenever the student calendar is adjusted and students are to attend school on a holiday, all employees will be expected to report to work.

The Department of Human Resources will send a notice to twelve-month employees regarding the make up for the holiday work.

Whenever a paid holiday falls on Saturday, the workday immediately preceding Saturday shall be observed as the holiday. Whenever the paid holiday falls on a Sunday, the next workday following such day, shall be observed as the holiday.

Regulation: GCBD-R
INCLEMENT WEATHER PROCEDURES FOR CUSTODIANS

School Closing

- If schools close due to inclement weather, custodians will be instructed when to report to work.
- The Assistant Superintendent of Administration and Coordinator for Admin Support Services will discuss weather conditions to determine when custodians should report to work.
- The Coordinator, Admin Support Services will notify Head Custodians of their work schedule.
- Head Custodians will inform their staff when to report for snow removal operations. (i.e. clearing sidewalks, steps, spreading ice melt, etc.). All custodians must report to work unless on approved medical leave. Custodians with medical restrictions from performing snow related tasks should still report to perform non-snow related duties.

Late Opening

- Day shift custodians will prepare the grounds for safe arrival of students and staff.
- Head Custodians will inspect the grounds, and if necessary, call the evening custodians to assist with snow removal. Evening shift will be paid for their time worked.
- Custodians will report to work 2 hours prior to late opening of their assigned school/program.

Early Dismissal

- Day shift custodians will prepare the grounds for a safe exit of students and staff.
- The Coordinator of Admin Support Services and Assistant Superintendent of Administration will discuss the weather forecast to determine if evening shift custodians will report or remain at work.
- The Coordinator of Admin Support Services will inform Head Custodians of the decision regarding the evening shift.

OFFICE SCHEDULES

Clerical and administrative staff in all schools, the Division Administration Office and Division Administration Annex report for an 8 hour day. There may be some variance in the schedules but phone and office coverage is as follows:

- Division Administration Office: 8:00 a.m. to 5:00 p.m.
- Elementary Schools: 7:30 a.m. to 4:00 p.m.
- Walker Upper Elementary: 8:00 a.m. to 4:30 p.m.
- Buford Middle: 8:00 a.m. to 4:30 p.m.
- Charlottesville High: 7:45 a.m. to 4:15 p.m.
STAFF TIME SCHEDULES
The Superintendent or designee shall establish daily time schedules for all classifications of employees. The established schedules shall be subject to School Board review.

1. In setting such schedules, consideration must be given but not be limited to evening and weekend responsibilities, wage and hour regulations, comparative schedules of employees in other school systems, and schedules established by other employers in the community that provide a generally accepted standard.

2. All employees shall be designated according to regulations of the Fair Labor Standards Act as exempt or nonexempt for purposes of determining schedules and expectations of the position within each designation. Each employee shall be notified of the designation and the effect on time schedules during the hiring process.

3. Information regarding the differences between exempt and nonexempt will be provided in the Employee Handbook with time schedules for employees. An explanation of the expectations of each group for the purposes of determining work schedules and any requirements for work beyond a stated minimum number of hours will be included.

4. The Director of Human Resources shall work with elementary principals to ensure that all elementary teachers are provided an average of thirty minutes per day during the students' school week as planning time.

Overtime and Compensatory Time
The Director of Human Resources shall include in the Employee Handbook information for all employees about the requirements of the Fair Labor Standards Act relating to the distinction between results of overtime and compensatory time for all classifications of employees.

1. Supervisory personnel shall receive training regarding the requirements of the Fair Labor Standards Act and notification of the status of all employees under the supervisor’s supervision.

2. Non-exempt employees whose workweek is less than 40 hours will be paid at the regular rate of pay for time worked up to 40 hours. Such employees will be provided overtime pay or compensatory time as provided above for working more than 40 hours in a workweek.

3. If a supervisor requires the services of an employee designated as nonexempt beyond the normal work schedule of the employee, the supervisor should have prior approval from the Director of Human Resources and follow all procedures to properly compensate the nonexempt employees with overtime or compensatory time.

4. The Director of Finance shall monitor the use of overtime for nonexempt employees. Ongoing information will be provided to the Superintendent.
Attendance Expectations

1. All employees are expected to be present during work hours. If an employee needs to be absent for any reason, the employee shall follow all procedures for absences and leaves as described in the Employee Handbook.

2. Any employee who does not follow the expectations will be subject to possible disciplinary action.
   Refer to policy Regulations: GAA

3. In the event that it becomes necessary for an employee to leave during their work hours, they must receive prior administrative approval before leaving. Students are not to be left unattended/unsupervised at any time.

Maintenance and custodial staff members will work an 8-hour day, not including lunch. Secretaries and bookkeepers, unless otherwise noted, will work an 8 hour day, not including lunch. Instructional assistants will work a 7 hour day, not including lunch. Work schedules and duty stations will be determined by the principal or program supervisor.

Workweek Defined
Working hours for all employees not exempted under the Fair Labor Standards Act, including secretaries, bus drivers, cafeteria, janitorial and maintenance personnel conforms to federal and state regulations. The Superintendent ensures that job positions are classified as exempt or non-exempt and that employees are made aware of such classifications. Supervisors make every effort to avoid circumstances which require non-exempt employees to work more than 40 hours each week. For purposes of compliance with the Fair Labor Standards Act, the workweek for school district employees will be 12:00 a.m. Sunday until 11:59 p.m. on Saturday.
Refer to policy Regulations: GAA

WORK DAY FOR INSTRUCTIONAL STAFF

During pre-week and on professional development days, instructional staff works from 8 a.m. to 4 p.m. with an hour for lunch.

When students are in school, the school building work hours are staggered to allow for sharing of school buses.

The normal schedules for instructional staff are as follows with the understanding that work hours may be extended due to administrative meetings, curriculum development, student supervision, assigned duties, parent conferences, group or individual planning, and extracurricular activities.

   Charlottesville High School ..................... 8:35 a.m. to 4:05 p.m.
   Walker and Buford............................... 8:15 a.m. to 3:45 p.m.
   Elementary (PreK-4) ............................. 7:30 a.m. to 3:00 p.m. (This time may vary slightly due to bus arrival times.)

Staff members who leave the building during the hours listed above should arrange such leave with the building principal. If school is closed during the school year, makeup days will be determined by the School Board.
WORK PROCEDURES FOR PERSONNEL ON SCHOOL CLOSINGS
On days of inclement weather there will be notification through the media and the Charlottesville City Schools website (http://charlottesvilleschools.org) so that appropriate employees will know to report to their work stations. The inclement weather telephone number is: 434.245.2401.
INFORMATION FOR ALL EMPLOYEES

BLOODBORNE PATHOGENS TRAINING AND EXPOSURE

A. Personnel Training - Viral Infection
   All school personnel having direct contact with students shall receive appropriate training in
   the etiology, prevention, transmission modes, and effects of blood-borne pathogens,
   specifically, Hepatitis-B and human immunodeficiency viruses or any other infections that are
   the subject of regulations promulgated by the Safety and Health Codes Board of the Virginia
   Occupational Safety and Health Program within the Department of Labor and Industry.

B. Exposure Control Plan
   a. The Superintendent or designee shall establish a written Exposure Control Plan. The
      plan shall list jobs with occupational risk of exposure, establish precautionary
      procedures to avoid exposures in these jobs, and provide for instruction of employees
      in precautionary procedures. A copy of the plan shall be located in the office of each
      CCS school and made available to any employee upon request. Information for access
      to the plan will be included in the employee handbook.
   b. The plan will be reviewed annually with the administrative team and nurses.
   c. Any employee who believes he/she has been involved in a possible exposure-prone
      incident which may have exposed the employee to the blood or body fluids of a
      student or other employee shall contact the Superintendent or designee. The
      Superintendent or designee shall contact the local Health Director who, upon
      immediate investigation of the incident, shall determine if a potentially harmful
      exposure has occurred and make recommendations regarding how the employee can
      reduce any risks from such exposure.
   d. The Superintendent or designee shall share these recommendations with the school
      employee.
   e. The Superintendent or designee and the school employee shall not divulge any
      information provided by the local Health Department regarding the student and/or
      employee involved.
   f. The Director of Human Resources shall require all employees to participate in training
      regarding blood borne pathogens on an annual basis. Documentation of participation
      in the training shall be maintained by the Coordinator for Professional Learning. A
      record of your successful completion is documented in PD Express. If you do not
      complete the course successfully email Maria Lewis, Coordinator of Human
      Resources at lewism1@charlottesvilleschools.org
      Regulations: GBE-R
DRUG-FREE WORKPLACE  
Unlawful Manufacture, Distribution, Dispensing, Possession or Use of a Controlled Substance

The Charlottesville City School Board is committed to maintaining a Drug Free Workplace.

Prohibited Conduct
Employees may not unlawfully manufacture, distribute, dispense, possess or use a controlled substance on school property, at any school activity, or on any school-sponsored trip. It is a condition of employment that each employee of the Charlottesville City School Board will not engage in such prohibited conduct and will notify the Charlottesville City School Board of any criminal drug conviction for a violation occurring on school property, at any school activity or on any school-sponsored trip no later than 5 days after such conviction.

Discipline
The Superintendent and School Board will take appropriate personnel action up to and including dismissal of any employee found to have engaged in prohibited conduct listed above on school property, at any school activity or on any school-sponsored trip. Such personnel action will include the imposition of a sanction on, or the requiring of the satisfactory participation in a drug abuse assistance or rehabilitation program by, any employee who is convicted of a violation occurring on school property, at any school activity, or on any school-sponsored trip.

Distribution of Policy
All employees shall be given a copy of this policy.

Drug-Free Awareness Program
The Charlottesville City School Board shall establish a drug-free awareness program to inform its employees about the dangers of drug abuse in the workplace, the Board’s policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for violations of laws and policies regarding drug abuse.  

Policy: GBEA
TOBACCO AND VAPOR PRODUCTS

The use of any tobacco or vapor-related products is prohibited on school property or at an on-site or off-site school sponsored activity.

“School property” shall mean all property owned, leased, rented or otherwise used by school including both indoor and outdoor area/facilities.

In addition, the use or distribution of any tobacco product or vapor product, on a school bus, on school property, or at an on-site or off-site school sponsored activity is prohibited.

The superintendent is responsible for developing a regulation which contains
- provisions for the enforcement of this policy among students, employees, and visitors, including the enumeration of possible sanctions or disciplinary actions, and
- referrals to resources to help staff and students overcome tobacco addiction.

Definitions

“Nicotine vapor product” means any noncombustible product containing nicotine that employs a heating element, a power source, electronic circuit, or other electronic, chemical, or mechanical means, regardless of shape or size, that can be used to produce vapor from nicotine in a solution or other forms. “Nicotine vapor product” includes any electronic cigarette, electronic cigar, electronic cigarillo, electronic pipe, or similar product or device and any cartridge or other container of nicotine in a solution or other form that is intended to be used with or in an electronic cigarette, electronic cigar, electronic cigarillo, electronic pipe, or similar product or device. “Nicotine vapor product” does not include any product regulated by the FDA under the FD&C ACT Chapter V (21 U.S.C. § 351 et seq.) of the Federal Food, Drug, and Cosmetic Act.


Refer to Policy: GBEC-JFCH

Electronic Nicotine Delivery System (ENDS)

Employees are prohibited from possessing electronic nicotine delivery systems on school buses, on school premises and at school-sponsored activities.

All other persons are prohibited from using electronic nicotine delivery systems on school premises and school vehicles.

Refer to Policy: GBEC-JFCH
EMPLOYMENT OF FAMILY MEMBERS
The Charlottesville City School Board may not employ or pay, and the Superintendent may not recommend for employment, any family member of the Superintendent or of a School Board member.

This prohibition shall not apply to the employment, transfer or promotion of any family member who

- has been employed pursuant to a written contract with the School Board or employed as a substitute teacher or teacher’s aide by the School Board prior to the taking of office of the Superintendent or any School Board member, or
- has been employed pursuant to a written contract with the School Board or employed as a substitute teacher or teacher’s aide by the School Board prior to the inception of the family relationship, or
- was employed by the school board at any time prior to June 10, 1994, and had been employed at any time as a teacher or other employee of any Virginia School Board prior to the taking of office of any member of the School Board or Division Superintendent of schools.

Notwithstanding the rules stated in subsection a above, the School Board may employ or pay, and the superintendent may recommend for employment, any family member of a School Board member provided that

- The member certifies that he had no involvement with the hiring decision: and
- The superintendent certifies that the remaining members of the School board in writing that the recommendation is based upon merit and fitness and the competitive rating of the qualifications of the individuals and that no member of the Board had any involvement with the hiring decision.

A family member employed as a substitute teacher may not be given any greater employment than that obtained in the last full school year prior to the taking of office of the Superintendent or a School Board member or to the inception of such relationship.

No family member of any employee may be employed by the School Board if the family member is to be employed in a direct supervisory and/or administrative relationship either supervisory or subordinate to the employee. The employment and assignment of family members in the same organizational unit is discouraged. The employee may not be highly involved in the hiring process of the family member and may not be included in the evaluation process.

Family members are defined as father, mother, brother, sister, spouse, son, daughter, son-in-law, daughter-in-law, sister-in-law, brother-in law, grandson, or granddaughter.

Policy: GCCB
STAFF WEAPONS IN SCHOOL
No one, unless otherwise allowed by law, may possess or use any firearm or any weapon, as defined in Policy JFCD Weapons in School, on school property (including school vehicles), on that portion of any property open to the public and then exclusively used for school-sponsored functions or extracurricular activities while such functions or activities are taking place or on any school bus without authorization of the superintendent or superintendent’s designee.

Violations of this policy by an employee will result in appropriate personnel action up to and including dismissal.

Illegal conduct will be reported to law enforcement officials.

EFFECTS OF CRIMINAL CONVICTIONS
The Charlottesville City School Board will not hire or continue the employment of any part-time, full-time, temporary, or permanent personnel who are determined to be unsuited for service by reason of criminal conviction or information appearing in the registry of founded complaints of child abuse and neglect maintained by the Department of Social Services.

According to VA Code § 22.1-279.3:1 Any current employee should report to the division superintendent and to the principal or his designee on all incidents involving (i) the assault or assault and battery, without bodily injury, of any person on a school bus, on school property, or at a school-sponsored activity; (ii) the assault and battery that results in bodily injury, sexual assault, death, shooting, stabbing, cutting, or wounding of any person, abduction of any person as described in § 18.2-47 or 18.2-48, or stalking of any person as described in § 18.2-60.3, on a school bus, on school property, or at a school-sponsored activity; (iii) any conduct involving alcohol, marijuana, a controlled substance, imitation controlled substance, or an anabolic steroid on a school bus, on school property, or at a school-sponsored activity, including the theft or attempted theft of student prescription medications; (iv) any threats against school personnel while on a school bus, on school property or at a school-sponsored activity; (v) the illegal carrying of a firearm, as defined in § 22.1-277.07, onto school property; (vi) any illegal conduct involving firebombs, explosive materials or devices, or hoax explosive devices, as defined in § 18.2-85, or explosive or incendiary devices, as defined in § 18.2-433.1, or chemical bombs, as described in § 18.2-87.1, on a school bus, on school property, or at a school-sponsored activity; (vii) any threats or false threats to bomb, as described in § 18.2-83, made against school personnel or involving school property or school buses; or (viii) the arrest of any student for an incident occurring on a school bus, on school property, or at a school-sponsored activity, including the charge therefore.

I. APPLICANTS FOR EMPLOYMENT

A. Criminal Convictions
   As a condition of employment for all of its public school employees, whether full-time or part-time, permanent, or temporary, the Charlottesville City School Board shall require on its application for employment certification (i) that the applicant has not been convicted of a felony or any offense involving the sexual molestation, physical or sexual abuse or rape of a child; and (ii) whether the applicant has been convicted of a crime of moral turpitude.
The Charlottesville City School Board shall also require on its application for employment, as a condition of employment requiring direct contact with students, whether full-time or part-time, permanent, or temporary, certification that the applicant has not been the subject of a founded case of child abuse and neglect. Any person making a materially false statement regarding a finding of child abuse and neglect shall be guilty of a Class 1 misdemeanor and upon conviction, the fact of said conviction shall be grounds for the Board of Education to revoke such person’s license to teach.

As a condition of employment, all Charlottesville City School Board employees, whether full-time or part-time, permanent or temporary, shall submit to fingerprinting and shall provide personal descriptive information. The information and fingerprints shall be forwarded through the Central Criminal Records Exchange to the Federal Bureau of Investigation for the purpose of obtaining criminal history record information on applicants who are offered or accept employment.

If an applicant is denied employment because of information appearing on his/her criminal history record, the School Board shall provide a copy of the information provided by the Central Criminal Records Exchange to the applicant.

B. Founded Complaints of Child Abuse or Neglect
The School Board requires, as a condition of employment, that any applicant who is offered or accepts employment requiring direct contact with students, whether full-time or part-time, permanent or temporary, provide written consent and the necessary personal information for the School Board to obtain a search of the registry of founded complaints of child abuse and neglect. The registry is maintained by the Department of Social Services. The School Board shall ensure that all such searches are requested in conformance with the regulations of the Board of Social Services. In addition, where the applicant has resided in another state within the last five years, the School Board requires as a condition of employment that such applicant provide written consent and the necessary personal information for the School Board to obtain information from each relevant state as to whether the applicant was the subject of a founded complaint of child abuse and neglect in such state. The School Board shall take responsible steps to determine whether the applicant was the subject of a founded complaint of child abuse and neglect in the relevant state. The Department of Social Services shall maintain a database of central child abuse and neglect registries in other states that provide access to out-of-state school boards for use by local school boards. The applicant may be required to pay the cost of any search conducted pursuant to this subsection at the discretion of the School Board. From such funds as may be available for this purpose, however, the School Board may pay for the search.

If the information obtained pursuant to the preceding paragraph indicates that the applicant is the subject of a founded case of child abuse and neglect, such applicant shall be denied employment, or the employment shall be rescinded.

If an applicant is denied employment because of information appearing on his record in the registry, the School Board shall provide a copy of the information obtained from the registry.
II. EMPLOYEE CHARGES AND CONVICTIONS

An employee who is charged by summons, warrant, indictment, or information with the commission of a felony or a misdemeanor specified in Va. Code § 22.1-315 may be suspended in accordance with Policy GCPF Suspension of Staff Members.

If a current employee is suspended or dismissed because of the information appearing on his/her criminal history record, the School Board shall provide a copy of the information provided by the Central Criminal Records Exchange to the employee.

The superintendent shall inform the School Board of any notification of arrest of a School Board employee received pursuant to Virginia Code section 19.2-83.1. The School Board shall require such employee, whether full-time or part-time, permanent, or temporary, to submit to fingerprinting and to provide personal descriptive information to be forwarded along with the employee’s fingerprints through the Central Criminal Records Exchange to the Federal Bureau of Investigation for the purpose of obtaining criminal history record information regarding such employee. The contents of the employee’s criminal record shall be used only to implement dismissal, suspension or probation in accordance with §§22.1-307 and 22.1-315 of the Code of Virginia.

Policy: GCDA
EQUAL EMPLOYMENT OPPORTUNITY/ NONDISCRIMINATION

1. The School Board promotes equal employment opportunity in the recruitment and selection process by ensuring that qualification requirements are job-related and that such requirements do not limit or restrict employment opportunities because of sex, gender, race, color, national origin, disability, religion, ancestry, age, marital or veteran’s status, physical or mental genetic information, sexual orientation, gender identity or expression, or any classification protected by applicable law.

2. The School Board shall provide facilities, programs and activities that are accessible, usable and available to qualified persons with disabilities. Further, the School Board shall not discriminate against qualified persons with disabilities in the provision of health, welfare and other social services.

3. The statement, “The Charlottesville City School Board is an Equal Opportunity Employer” shall be placed on all employment application forms.

4. The complete Nondiscrimination statement or access information for the statement will also be placed on the school division website and on all documents used in the recruitment and selection of employees and students.

Charlottesville City Schools does not discriminate on the basis of sex, gender, race, color, national origin, disability, religion, ancestry, age, marital or veteran’s status, physical or mental genetic information, sexual orientation, gender identity or expression, or any classification protected by applicable law in its programs or activities as required in Title VI, VII, IX, Section 504 and ADA Regulations. The Director of Human Resources shall act as the Compliance Officer for discrimination issues regarding employees and the general public under Title IX.

The Director of Student Services & Achievement shall act as the Compliance Office for discrimination issues regarding students under Title IX and Section 504 of Rehabilitation Act of 1973. Both compliance officers may be contacted at the Administrative Offices of Charlottesville City Schools, 1562 Dairy Road, Charlottesville, VA 22903. The phone number is 434.245.2400.

A. Notice of Policy/Prevention
   Policy GB shall be (1) posted in prominent areas of each CCS building, (2) included in employee handbooks and (3) provided to any employee or candidate for employment upon request. Training to prevent prohibited discrimination should be included in employee in-service training.

B. Employee Compliance
   All Charlottesville City School Board employees are expected to act in a nondiscriminatory manner towards other employees and students. Acts of discrimination by employees will not be tolerated and will be the subject of disciplinary action up to and including discharge.

C. Complaint Procedure
   a. File Report
      Any person who believes he has not received equal employment opportunities should report the alleged discrimination to one of the
compliance officers designated in this policy. Any employee who has knowledge of conduct which may constitute prohibited discrimination shall report such conduct to one of the compliance officers designated in this policy.

b. The reporting party should use the form, GB-F, to make complaints of discrimination. However, oral reports and other written reports will also be accepted. The complaint must be filed with one of the compliance officers designated in this regulation (page 4). Any complaint that involves the compliance officer shall be reported to the Superintendent.

c. The complaint and the identity of the complainant and the person or persons allegedly responsible for the discrimination will be disclosed only to the extent necessary to fully investigate the complaint and only when such disclosure is required or permitted by law. A complainant who wishes to remain anonymous will be advised that anonymity may limit the school division’s ability to fully respond to the complaint.

D. Investigation

a. Upon receipt of a report of alleged discrimination, the compliance officer shall immediately authorize or undertake an investigation. The investigation may be conducted by school personnel or a third party designated by the school division.

b. The investigation shall be completed as soon as practicable, which generally should be not later than 14 calendar days after receipt of the report by the compliance officer.

c. Upon receiving the complaint, the compliance officer will acknowledge receipt of the complaint by giving written notice that the complaint has been received to both the complainant and the Superintendent.

d. If the compliance officer determines that more than 14 days will be required to investigate the complaint, the complainant and the Superintendent will be notified of the reason for the extended investigation and the date by which the investigation will be concluded.

e. The investigation may consist of personal interviews with the complainant, the person(s) alleged to have violated the policy and any others who may have knowledge of the alleged discrimination or the circumstances giving rise to the complaint.

f. The investigation may also consist of the inspection of any other documents or information deemed relevant by the investigator.

g. The school division shall take necessary steps to protect the complainant and others pending the investigation.

h. Determining if a particular action or incident constitutes a violation of Policy GB or these regulations may require a case by case determination based on all of the facts and circumstances revealed after a complete and thorough investigation.

i. The compliance officer shall issue a written report to the Superintendent upon completion of the investigation.

j. If the complaint alleges the Superintendent has violated this policy, then the report shall be sent to the School Board.
k. The report shall include a determination of whether the allegations are substantiated, whether the policy or regulations were violated and recommendations for corrective action, if any.

l. All employees shall cooperate with any investigation of alleged discrimination conducted under the policy, these regulations or by an appropriate state or federal agency.

E. Action by Superintendent
   a. Within 5 calendar days of receiving the compliance officer’s report, the Superintendent or designee shall issue a written decision regarding (1) whether this policy was violated and (2) what action if any should be taken.
   b. If the complaint alleges that the Superintendent has violated this regulation, the School Board’s standing Equal Employment Opportunity/Nondiscrimination Committee shall make the decision and determine what action should be taken.
   c. If the School Board does not have such a standing committee, at its next scheduled meeting it shall appoint a committee consisting of three of its members to handle the matter. The committee shall issue a written decision within 14 calendar days of the time the School Board receives the compliance officer’s report or the time a committee is appointed, if there is no standing committee.
   d. The written decision shall state (1) whether the policy or regulation was violated and (2) what action, if any, should be taken. The written decision must be mailed to or personally delivered to the complainant within five calendar days of the issuance of the decision.
   e. If the Superintendent or committee concludes that prohibited discrimination occurred, the Superintendent or designee shall take prompt, appropriate action to address and remedy the violation as well as prevent any recurrence. Such action may include discipline up to and including dismissal.

F. Appeal
   a. If the Superintendent or committee determines that no prohibited discrimination occurred, the person who was allegedly subjected to discrimination may appeal this finding to the School Board within 5 calendar days of receiving the decision. Notice of appeal must be filed with the Superintendent, or with a member of the committee which issued the written decision, who shall forward the record to the School Board.
   b. The School Board shall make a decision within 30 calendar days of receiving the record.
   c. The School Board may ask for oral or written argument from the aggrieved party and the Superintendent, or the committee, whichever issued the written decision, and any other individual the School Board deems relevant.
   d. Employees may choose to pursue their complaints arising under this regulation through the relevant employee grievance procedure instead of the complaint procedure in this regulation.

G. Compliance Officer and Alternate Compliance Officer
   a. The Superintendent will designate an individual to act as the division’s Equal Opportunity Compliance Officer for employees. The Compliance Officer will be the Director of Human Resources, 1562 Dairy Road, Charlottesville, VA
22903. The Alternate Compliance Officer for employment issues will be the Assistant Superintendent for Administrative Services also located at 1562 Dairy Road, Charlottesville, VA 22903. Both officers may be contacted at 434.245.2400.

b. All employees will be notified of the name, office address and telephone number of the designee in the employee handbook.

The Compliance Officer shall:
- receive reports or complaints of discrimination;
- oversee the investigation of any alleged discrimination;
- assess the training needs of the school division in connection with this policy;
- arrange necessary training to achieve compliance with this policy;
- insure that any discrimination investigation is conducted by an impartial investigator who is knowledgeable of the requirements of equal employment opportunity, including the authority to protect the alleged victim and others during the investigation.

H. Retaliation
a. Retaliation against employees who report discrimination or participate in the related proceedings is prohibited.

b. Charlottesville City Schools shall take appropriate action against any employee who retaliates against another employee or candidate for employment who reports alleged discrimination or participates in related proceedings.

I. Right to Alternative Complaint Procedure
Nothing in this regulation shall deny the right of any individual to pursue other avenues of recourse to address concerns relating to prohibited discrimination including initiating civil action, filing a complaint with outside agencies or seeking redress under state or federal law.

J. Prevention and Notice of Policy
Training to prevent discrimination should be included in employee orientations and inservice training.

This policy shall be (1) displayed in prominent areas of each division building in a location accessible to school personnel, and (2) included in employee handbooks. All employees shall be notified annually of the names and contact information of the Compliance Officers.

K. False Charges
Employees who make false charges of discrimination shall be subject to disciplinary action.

Regulation: GB-R

It is the intent of Charlottesville City Schools to comply with both the letter and spirit of the law in making sure discrimination does not exist in its policies, regulations and operations. Grievance procedures for Title IX and Section 504 have been established for students, their parents, and employees who feel discrimination has been shown by the schools.
**SCHOOL EMPLOYEE CONFLICT OF INTEREST**
The State and Local Government Conflict of Interests Act (the Act), applies to public school employees and officials. The Act creates uniform standards of conduct for all public employees and officials. The Act also defines and prohibits inappropriate conflicts of interest and requires disclosure of economic interests in some circumstances. Additional information regarding the Act may be obtained from Policy BBFA Conflict of Interest and Ethical Advisory Council (the Ethics Council) which assists with compliance with the Act.

*Policy: GAH*

**GRIEVANCE PROCEDURE**

Copies of grievance policies and regulations are available on-line, in the principal's or program director’s office at each work location as well as the Office of Human Resources (See Policy GBM: "Procedures for Adjusting Grievances" 8 VAC 20-90-10 et seq. and Policy: GBMA-R Procedures for Adjusting Grievances for Support Staff)

Staff Grievances
The Charlottesville City School Board adopts the most recent version of Procedures for Adjusting Grievances promulgated by the Virginia Board of Education based on current statutory provisions.

*Policy: GBM*

Support Staff Grievances
The School Board adopts the Procedure for Adjusting Grievances (GBMA-R) in accordance with state law to afford a timely and fair method of resolution of disputes regarding dismissal, or other disciplinary actions arising between the School Board and employees who have completed the probationary period set forth in policy GDG, except the division superintendent and those employees covered under the provisions of Article 2 (§ 22.1-293 et seq.) and Article 3 (§ 22.1-306 et seq.) of Chapter 15 of Title 22.1 of the Code of Virginia. Such procedure is consistent with the State Board of Education’s procedure for adjusting grievances.

*Policy: GBMA*

**HARASSMENT**
The Charlottesville City School Division prohibits sexual harassment and harassment based on sex, gender, race, color, national origin, disability, religion, ancestry, age, marital status, genetic information, sexual orientation, gender identity or expression or any other characteristic protected by law or based on a belief that such characteristic exists at school or any school sponsored activity.

1. It shall be a violation of Policy GBA or these regulations for any student or school personnel to harass any school personnel sexually, or based on of sex, gender, race, color, national origin, disability, religion, ancestry, age, marital status, genetic information, sexual orientation, gender identity or expression or any other characteristic protected by law or based on a belief that such characteristic exists at school or any school sponsored activity.

2. Further, it shall be a violation of this policy for any school personnel to tolerate sexual harassment or harassment based on a student’s or employee’s of sex, gender, race, color, national origin, disability, religion, ancestry, age, marital status, genetic information, sexual
orientation, gender identity or expression or any other characteristic protected by law or based on a belief that such characteristic exists at school or any school sponsored activity.

3. For the purpose of this policy, school personnel includes school board members, school employees, agents, volunteers, contractors or other persons subject to the supervision and control of Charlottesville City Schools.

4. Charlottesville City Schools shall: (1) promptly investigate all complaints, written or verbal, of sexual harassment and harassment based on race, national origin, disability or religion; (2) promptly take appropriate action to stop any harassment and (3) take appropriate action against any student or school personnel who violates the policy or these regulations and take any other action reasonably calculated to end and prevent further harassment of school personnel.

Complaint/Grievance Procedure

A. Formal Procedure
   ○ File Report
     i. Any student or school personnel who believes he or she has been the victim of sexual harassment or harassment based on race, national origin, religion or disability by a student, school personnel or a third party should report the alleged harassment to one of the compliance officers designated in these regulations or to any school personnel.
     ii. The alleged harassment should be reported as soon as possible, and the report generally should be made within fifteen (15) school days of the occurrence using Form GBA. The complaint may be received in any written form if the person filing the complaint does not submit the form using Form GBA.
     iii. Further, any student who has knowledge of conduct which may constitute prohibited harassment should report such conduct to one of the compliance officers designated in this policy or to any school personnel.
     iv. Any school personnel who has noticed that a student or other school personnel may have been a victim of prohibited harassment shall immediately report the alleged harassment to one of the compliance officers designated in this regulation.
     v. The reporting party should use the form, Report of Harassment, GBA/JFHA-F, to make complaints of harassment. However, oral reports and other written reports shall also be accepted. The complaint should be filed with either the building principal or one of the compliance officers designated in these regulations.
     vi. The principal shall immediately forward any report of alleged prohibited harassment to the compliance officer.
     vii. Any complaint that involves the compliance officer or principal shall be reported to the Superintendent.
     viii. The complaint, and identity of the complainant and alleged harasser, will be disclosed only to the extent necessary to fully investigate the complaint and only when such disclosure is required or permitted by law. Additionally, a complainant who wishes to remain anonymous shall be advised that such confidentiality may limit the school division’s ability to fully respond to the
complaint.

- **Investigation**
  - i. Upon receipt of a report of alleged prohibited harassment, the compliance officer shall immediately authorize or undertake an investigation.
  - ii. The investigation may be conducted by school personnel or a third party designated by the CCS.
  - iii. The investigation shall be completed as soon as practicable, which generally should be not later than 14 calendar days after receipt of the report by the compliance officer.
  - iv. Upon receiving the complaint, the compliance officer shall acknowledge receipt of the complaint by giving written notice that the complaint has been received to both the person complaining of harassment and the person accused of harassment.
  - v. Also upon receiving the complaint, the compliance officer shall determine whether interim measures should be taken pending the outcome of the investigation. Such interim measures may include, but are not limited to, separating the alleged harasser and the complainant and, in cases involving potential criminal conduct, determining whether law enforcement officials should be notified.
  - vi. If the compliance officer determines that more than 14 days will be required to investigate the complaint, the complainant and the accused shall be notified of the reason for the extended investigation and of the date by which the investigation will be concluded.
  - vii. If the alleged harassment may also constitute child abuse, then it must be reported to the Department of Social Service in accordance with Policy JHG. Regulations and procedures for reporting child abuse or neglect cases shall then be followed and this regulation stopped pending the outcome of the child abuse and neglect process.
  - viii. The investigation may consist of personal interviews with the complainant, the alleged harasser, and any others who may have knowledge of the alleged harassment or the circumstances giving rise to the complaint.
  - ix. The investigation may also consist of the inspection of any other documents or information deemed relevant by the investigator.
  - x. The school division shall take necessary steps to protect the complainant and others pending the completion of the investigation.
  - xi. In determining whether alleged conduct constitutes a violation of the policy or these regulations, the CCS administrators shall consider, at a minimum: (1) the surrounding circumstances; (2) the nature of the behavior; (3) past incidents or past or continuing patterns of behavior; (4) the relationship between the parties; (5) how often the conduct occurred; (6) the identity of the alleged perpetrator in relation to the alleged victim (i.e. whether the alleged perpetrator was in a position of power over the alleged victim); (7) the location of the alleged harassment; (8) the ages of the parties and (9) the context in which the alleged incidents occurred.
  - xii. Determining if a particular action or incident constitutes a violation of the policy or these regulations may require a case by case determination based
on all of the facts and circumstances revealed after a complete and thorough investigation.

xiii. The compliance officer shall issue a written report to the Superintendent upon completion of the investigation.

xiv. If the complaint involves the Superintendent, then the report shall be sent to the School Board. The report shall include a determination of whether the allegations are substantiated, whether the policy or these regulations were violated and recommendations for corrective action, if any.

xv. All employees shall cooperate with any investigation of alleged harassment conducted under the policy, these regulations or by an appropriate state or federal agency.

○ Action by Superintendent
  i. Within 5 calendar days of receiving the compliance officer’s report, the Superintendent or designee shall issue a decision regarding whether the policy or these regulations were violated.
  ii. This decision must be provided in writing to the complainant and the alleged perpetrator.
  iii. If the Superintendent or designee determines that prohibited harassment occurred, the Superintendent or designee shall take prompt, appropriate action to address and remedy the violation as well as prevent any recurrence. Such action may include discipline up to and including expulsion or discharge.
  iv. Whether or not the Superintendent or designee determines that prohibited harassment occurred, the Superintendent or designee may determine that school-wide or division-wide training be conducted or that the complainant receives counseling.

○ Appeal
  i. If the Superintendent or designee determines that no prohibited harassment occurred, the employee or student who was allegedly subjected to harassment may appeal this finding to the School Board within 5 calendar days of receiving the decision.
  ii. Notice of appeal must be filed with the Superintendent who shall forward the record to the School Board.
  iii. The School Board shall make a decision within 30 calendar days of receiving the record. The School Board may ask for oral or written argument from the aggrieved party and the Superintendent and any other individual the School Board deems relevant.
  iv. If the Superintendent or designee determines that prohibited harassment occurred and discipline is imposed, the disciplined person may appeal the disciplinary sanction in the same manner as any other such sanction would be appealed.
  v. Employees may choose to pursue their complaints under this policy through the relevant employee grievance procedure instead of the complaint procedure in this policy.
Compliance Officer and Alternate Compliance Officer
The Superintendent will designate an individual to act as the division’s Equal Opportunity Compliance Officer for employee issues. The Compliance Officer will be the Director of Human Resources, 1562 Dairy Road, Charlottesville, VA 22903. The alternate Compliance Officer for employment issues will be the Assistant Superintendent for Administrative Services also located at 1562 Dairy Road, Charlottesville, VA 22903. Both officers may be contacted at 434.245.2400. All employees will be notified of the name, office address and telephone number of the designee in the Human Resources Handbook and on the division website.

The Compliance Officer shall:
- receive reports or complaints of harassment;
- oversee the investigation of any alleged harassment;
- assess the training needs of the school division in connection with this regulation;
- arrange necessary training to achieve compliance with this regulation;
- ensure that any harassment investigation is conducted by an impartial investigator who is trained in the requirements of equal employment/educational opportunity, including the authority to protect the alleged victim and others during the investigation.

B. Informal Procedure
- If the complainant and the person accused of harassment agree, the employee’s principal or designee may arrange for them to resolve the complaint informally with the help of a counselor, teacher, or administrator.

- If the complainant and the person accused of harassment agree to resolve the complaint informally, they shall each be informed that they have the right to abandon the informal procedure at any time in favor of the initiation of the Formal Procedures set forth herein. The principal or designee shall notify the complainant and the person accused of harassment in writing when the complaint has been resolved.

- The written notice shall state whether prohibited harassment occurred.

C. Retaliation
- Retaliation against students or school personnel who report harassment or participate in any related proceedings is prohibited.

- CCS administrators shall take appropriate action against students or school personnel who retaliate against any student or school personnel who reports alleged harassment or participates in related proceedings.

D. Right to Alternative Complaint Procedure
Nothing in this regulation shall deny the right of any individual to pursue other avenues of recourse to address concerns relating to prohibited harassment including initiating civil action, filing a complaint with outside agencies or seeking redress under state or federal law.
E. Prevention and Notice of Policy
   ○ Training to prevent sexual harassment and harassment based on race, national origin, disability and religion should be included in employee and student orientations as well as employee in-service training.
   ○ *Policy GBA* shall be (1) displayed in prominent areas of each division building in a location accessible to students, parents and school personnel, (2) included in the student and employee handbooks; (3) included on the Charlottesville City Schools website and (4) sent to parents of all students within 30 calendar days of the start of school (*File JFHA* is the policy for students and that will be sent to parents along with required contact information for the Compliance Officers).
   ○ Further, all students, and their parents/guardians, and employees shall be notified annually of the names and contact information of the compliance officers.

F. False Charges
   School personnel who knowingly make false charges of harassment shall be subject to disciplinary action as well as any civil or criminal legal proceedings.

*Regulation GBA-R*
BOARD-STAFF COMMUNICATIONS
The Charlottesville City School Board supports and encourages two-way communication between the Board and employees. The Superintendent is the official representative of the School Board as its chief administrative officer in its relations and communications with its employees. A description of the two-way communication system is included in this policy manual.

Employees are encouraged to communicate their ideas and concerns in an orderly and constructive manner to the School Board and/or administrative staff. If an employee has a concern regarding school operations, he/she should first communicate with his/her immediate supervisor. If the supervisor is part of the concern or issue, the employee should communicate with the next person in the line of authority.

The School Board desires to develop and maintain the best possible working relationship with the employees of the School Division. The School Board welcomes the viewpoints of employees, and it shall allow at its meetings for employees to be heard.

The School Board does not discriminate against any employee by reason of his or her membership in an employee organization, or participation in any lawful activities of the organization.

Policy: BG/GBD
PERSONNEL RECORDS
Each active staff member employed by Charlottesville City Schools shall have a personnel file in the Department of Human Resources located at the division administration offices. Additional information may be maintained in other locations; however, no file shall be maintained that is not accessible to the employee.

1. Each staff member shall have access to review the record but may not remove any part of the file from the office.

2. Each employee shall have the opportunity to request a review of any potentially inaccurate information.

3. Each employee shall have the right to place a statement in his/her file regarding his/her version of any disputed information.

4. Information determined to be unfounded after a reasonable administrative review shall not be maintained in any employee personnel file, but may be retained in a separate sealed file by the Superintendent or designee if such information alleges civil or criminal offenses.

5. Any release of information from personnel records to banks or other individuals must have written permission for the release from the employee prior to the information being released.

6. No release is required for a judicial order, a lawfully issued subpoena, the Virginia Freedom of Information Act (Va. Code § 2.2-2700 et seq.), or other law.

7. Notification will be made to the employee if any request for records is made.

8. All information in a personnel file is confidential including data regarding performance or quality of a teacher; however, this information may be disclosed under three circumstances:
   a. court order
   b. for purposes of a grievance procedure involving the teacher
   c. as otherwise required by state or federal law

9. Additionally non identifying aggregate teacher performance indicators may be disclosed.

Regulation: GBL-R
RETIREMENT PROCEDURES
All employees are encouraged to plan ahead when considering retirement. VRS offers the following timeline showing you the steps to take for a smooth retirement process. Four (4) to six (6) months prior to your planned retirement date, call the Human Resources office at 434.245.2956 or email Humanresources@charlottesvilleschools.org and schedule a time to review your retirement options and to:

1. Submit your application for service retirement (VRS-5) and associated documentation.
2. Submit your federal and state income tax withholding form (VRS-15).
3. Submit your authorization for direct deposit of monthly benefits (VRS-57).
4. Review your beneficiary designations and submit any changes on the beneficiary designation form (VRS-2).
5. Submit your request for health insurance credit (VRS-45) if eligible.
6. Review purchases of prior service and complete outstanding purchases before your retirement date.

For further information, please refer to section "Employee Benefits" and review Retirement Benefits.

VACANCIES
1. All job vacancies are normally posted at least one week on the CCS website.
2. Positions may also be posted on media outlets and in the local, state or national publications or websites.
3. Postings shall provide contact information for the application process.
4. Vacancies may be filled in other ways at the request of the Superintendent.
EMPLOYEES BENEFITS

COLONIAL LIFE INSURANCE OPTIONAL BENEFITS
Charlottesville City Schools offers to interested employees accident and cancer benefit options on a pre-tax basis, critical care, term life, and whole life benefits on an after tax basis and short term disability benefit options for those that are a hybrid employee on an after tax basis during their one year waiting period, all through payroll deduction. These plans are regardless of any other insurance you may have and all payments are directly to the employee. For further information and to enroll visit www.coloniallife.com or call 800-325-4368.

COBRA Continuation Coverage
On April 7, 1986, a Federal law was enacted (Public Law 99-272, Title X) called the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA), requires that most employers sponsoring group health plans offer employees and their families the opportunity for a temporary extension of health coverage (called continuation coverage) at group rate plus two percent in certain instances where coverage under the plan would otherwise end (called a qualifying event). The following information should be read by the employee and any other family members that may be covered under the employee’s plan.

If you are an employee of Charlottesville City Schools (hereafter, “Company”) and are covered by the Plan, you have a right to choose continuation coverage if you lose your group health coverage because of a reduction in your hours of employment with the Company or the termination of your employment (for reasons other than gross misconduct on your part).

If you are the spouse of an employee covered by the Plan, you have the right to choose continuation coverage for yourself if you lose group health coverage under the Plan for any of the following reasons: (1) the death of your spouse; (2) a termination of your spouse’s employment with the company or reduction in your spouse’s hours of employment with the Company; (3) divorce or legal separation from your spouse; or (4) your spouse becomes entitled to Medicare.

Dependent children of an employee covered under the Plan have the right to choose continuation coverage if group health coverage under the Plan is lost for any of the following reasons: (1) the death of a parent; (2) the termination of a parent’s employment with the Company or reduction in a parent’s hours of employment with the Company; (3) parents’ divorce or legal separation; (4) a parent becomes entitled to Medicare; or (5) the dependent ceases to be a dependent child under the terms of the Plan.

In addition, there is a right to continuation coverage for any employee who retired on or before the date of a substantial elimination of coverage (hereafter, “Retiree”) and any spouse or surviving spouse of such Retiree who was covered under the Plan on the day before a Title 11 bankruptcy proceeding is commenced with regard to the Company, provided there is a loss of group health coverage as a result of the proceeding or there is a substantial elimination of coverage within one year before or after commencement of such proceeding.

Under the law, the employee or family member has the responsibility to inform the Plan
Administrator of a divorce, legal separation, or a child losing dependent status under the Plan, within 60 days of the date of the event or the date on which coverage would end under the Plan because of the event, whichever is later. The Company has a responsibility to notify the Plan Administrator of the employee’s death, termination of employment, reduction in hours of employment, or Medicare entitlement. When the Plan Administrator is notified that one of these events has happened, you will, in turn, be notified that you have the right to choose continuation coverage. Under the law, you have 60 days from the later of (1) the date you ordinarily would have lost coverage because of one of the events described above or (2) the date of the notice of your right to elect continuation coverage to inform the Plan Administrator that you want continuation coverage.

If you do not choose continuation coverage, your group health insurance coverage under the Plan will end. If you choose continuation coverage, you are entitled to be provided with coverage that is identical to the coverage being provided under the Plan to similarly situated employees (or their family members). The law requires that you be afforded the opportunity to maintain continuation coverage for 18 months. Coverage may be available for 29 months if you have been determined to be disabled (within the 18-month continuation coverage period). In the case of a Retiree or an individual who was a covered surviving spouse of a Retiree on the day before the Title 11 filing, coverage may continue until death, and in the case of the spouse or dependent child of a Retiree, 36 months after the date of death of the Retiree.

Additional qualifying events can occur while the continuation coverage is in effect. Such events may extend an 18-month continuation coverage period to 36 months, but in no event will coverage extend beyond 36 months after the initial qualifying event. You should notify the Plan Administrator if a second qualifying event occurs during your continuation coverage period. Second qualifying events pertain to only the dependent (spouse and/or child(ren)). Employees cannot have more than 29 months of coverage under federal COBRA.

However, the law also provides that your continuation coverage may be cut short prior to the expiration of the 18-, 29-, or 36-month period for any of the following reasons: (1) the Company no longer provides group health coverage to any of its employees; (2) the premium for your continuation coverage is not timely paid (within the applicable grace period); (3) the individual becomes covered under another group health plan (as an employee or otherwise) that does not contain an exclusion or limitation with respect to any preexisting condition of such individual; (4) the individual becomes entitled to Medicare; or (5) coverage has been extended for up to 29 months due to disability and there has been a final determination that the individual is no longer disabled.

You do not have to show that you are insurable to choose continuation coverage. However, continuation coverage under the law is provided subject to your eligibility for coverage under the Plan. The Company reserves the right to terminate your continuation coverage retroactively if you are determined to be ineligible.

Under the law, you may have to pay all or part of the premium for your continuation coverage. The law also says that, at the end of the 18-, 29-, or 36-month continuation coverage period, you must be allowed to enroll in an individual conversion health plan that is approved under the Plan. Under the present arrangement, individual conversion coverage is provided by Aetna Health. Once your continuation coverage terminates for any reason, it cannot be reinstated.
This is a summary of the law and, therefore, is general in nature. The law itself and the actual Plan provisions must be consulted with regard to the application of these provisions in any particular circumstance. If you have any questions about the law, please contact the Plan Administrator. Also, if you have changed marital status, or if either you or your spouse has changed addresses, please notify the Plan Administrator immediately.

Military Call-Up 24 Months COBRA
If an employee, that is also a military reservist, is called to active duty and loses group health insurance as a result of the reduction in hours, the reservist is a qualified beneficiary and is eligible to continue coverage through the COBRA system. In addition, any covered family members who lose insurance as a result of the reduction of hours are also qualified beneficiaries and are eligible to continue group health insurance through COBRA, as well.

EMPLOYEE ASSISTANCE PROGRAM
The School Board offers a confidential Employee Assistance Program for employees and family members who choose to accept help with substance abuse, emotional or family-related problems.

General Guidelines:
1. Program participation is voluntary and confidential. Exceptions to confidentiality are cases of suspected child abuse, which must be reported to appropriate authorities in accordance with Virginia law, and other unprofessional or inappropriate conduct involving students.
2. Employees and family members of employees who have problems are encouraged to seek counseling and information on a voluntary basis by contacting the designated EAP counselor.
3. Upon the written request of the employee to the Office of Human Resources, documentation regarding the employee’s participation in the EAP program will become part of the employee’s personnel file.
4. At employee request, sick leave may be granted for documented EAP treatment or rehabilitation on the same basis as is granted for other health problems.
5. If there are costs incurred as a result of a program referral that exceed those covered by the employee’s insurance benefits, these additional costs will be the responsibility of the employee.

All employees and their families are eligible to participate in an Employee Assistance Program. The FEAP is a confidential assessment and referral service available through UVA Health Systems – Faculty and Employee Assistance Program. The telephone number, Mondays through Fridays, 8:00 a.m.-4:30 p.m. is: 434.243.2643 (confidential voicemail) or email at dds4e@virginia.edu. After 4:30 call 434-924-4000 for the EAP On-Call Representative.

FEDERAL INSURANCE CONTRIBUTIONS ACT (FICA) SOCIAL SECURITY & MEDICARE
Participation and rates through FICA are mandated by law. The Charlottesville City Schools contribute 7.65 percent of employees’ gross pay and the employees contribute 7.65 percent
through FICA deduction from their wages. The tax rate for the social security portion of FICA is 6.20 percent; the tax rate for the Medicare portion of FICA is 1.45 percent.

FLEXIBLE SPENDING ACCOUNTS FOR UNREIMBURSED MEDICAL & DEPENDENT DAYCARE
The school division allows employees to set aside up to $2,750 for medical expenses and up to $5,000 for childcare expenses incurred during the Benefit Plan Year of July 1, 2020 to June 30, 2021. Employees have an additional 75 days beyond the June 30th cutoff to use their FSA benefits for medical expenses incurred during the 75 day grace period. You may elect to participate in this plan during the annual open enrollment period or when newly hired.

Participation in one or both of these accounts can save you money by reducing your taxable income. This is because the funds will be deducted from your salary and then you are taxed on the lower adjusted income. There are certain rules that apply to these plans due to the rules that are set by the IRS. These rules can be found on the Pierce Group Benefits site under “Enrollment and Plan Information.” Link to Pierce Group Benefits website and FlexFacts Health & Dependent Care FSA brochure.

For the medical account you are issued a credit card that gives you an annual election. You may use the credit card the same as you would use cash at a pharmacy, dentist office, doctor’s office, emergency room or to purchase eligible medical expenses.

INFLUENZA AND HEPATITIS-B INOCULATIONS

Influenza Inoculations
The Influenza and Hepatitis-B inoculations are offered through the Charlottesville City Schools and administered by a division-approved provider for employees eligible for benefits.

The flu inoculations are offered at no cost to all employees who receive benefits and any members of their immediate families (living in the same household) 5 years old or older. All recipients will be asked to read and sign an information sheet and HIPAA right to privacy statement as well as asked to complete a waiver. Expectant mothers wanting the inoculation are required to have written permission from their physicians. All children under 5 are ineligible for the flu vaccine through the Charlottesville City Schools. Children under 5 should be taken to their personal physician or the health department.
Hepatitis-B Vaccination Series
The Hepatitis-B vaccination series is provided free to all employees of the Charlottesville City Schools who are eligible for benefits. If employees are interested in taking the series of vaccinations through their primary care physician, the Charlottesville City Schools will pay their copay. One advantage to employees choosing to take the series through their physicians is that they can schedule their doctor visits at their discretion.

Hepatitis-B shots are available only for new employees or employees who have not taken the shot in the past. If interested in taking the inoculation, employees will need to sign a waiver form at the time/date of inoculation. If additional information is needed, please contact the Human Resources Office at 434.245.2400.

LIFE INSURANCE
VRS group life insurance provides division employees who are eligible for membership in VRS with two kinds of insurance during active employment - life insurance and accidental death and dismemberment insurance. The specific benefits are:

A. group life insurance without a medical examination
B. natural death benefit
C. accidental death benefit
D. double indemnity for accidental loss of one or more limbs or eyesight

The amount of coverage provided is equal to the employee’s annual salary rounded to the next highest thousand, and doubled. An accidental death benefit would be double the natural death benefit. For loss of one limb or sight of one eye, the employee would receive a payment equal to his/her salary rounded to the next highest thousand. For the loss of two or more limbs and/or eyesight, payment received would equal his/her salary rounded to the next thousand and doubled.

OPTIONAL LIFE INSURANCE COVERAGE
Optional employee group term life insurance coverage is offered through Securian (Minnesota Life). For further information or to apply for this optional insurance benefit, contact the Office of Human Resources.
PAYMENT OF ACCUMULATED SICK LEAVE UPON TERMINATION OF EMPLOYMENT FOR NON-RETIREMENT

The Charlottesville City School Board will pay eligible School Board employees for unused sick leave under the following conditions:

1. Employees who have been employed by Charlottesville City Schools for a period of three consecutive years shall be eligible for payment of unused sick leave with voluntary termination of employment.
2. Payment of unused sick leave will be made at the rate of $10 per day.
3. The maximum number of days for which payment is made will not exceed 25 days.
4. Payment will be made only for days of sick leave earned while an employee of the Charlottesville City Schools. Payment will not be made for days transferred from another employer.
5. Requests for payment must be made within 30 days of termination and shall be requested from the Director of Human Resources on forms provided by the Department of Human Resources. Payment must be made during the same calendar year in which the termination occurs.
6. If an employee has applied for accumulated sick leave and dies prior to receipt of the money, the payment will be made to the employee’s beneficiaries.

Regulations: GCBC-R

PAYROLL DEDUCTIONS

The Charlottesville School Division offers to all employees the benefit of having the following items payroll deducted for their convenience: cancer insurance premiums, TSA, Credit Union, health insurance premiums, membership dues (CEA, ACAC, YMCA, Smith Aquatic & Fitness Center, optional life insurance premiums, Colonial Life).

Benefits eligible for payroll deduction shall be made at the written request of the individual employee desiring such deduction(s).

Regulation: GCBC-R

VIRGINIA RETIREMENT SYSTEM (VRS)

Membership in the Virginia Retirement System is mandatory for all full-time employees. In fiscal year 2012-2013 each enrolled employee and the school division contributed into the plan. The rate of contribution for employees is 5% of their annual creditable compensation. Each employee’s contribution will be deducted from their net pay on a pre-tax basis. For 11-month and 10-month employees this deduction will begin in August and September, respectively. The deduction will then continue based on each employee’s number of pays.

Employees who were enrolled in VRS prior to July 1, 2010 are in VRS Plan 1. New employees hired from July 1, 2010 to December 31, 2013, or if your enrollment date is before July 1, 2010, and you were not vested as of January 1, 2013, are in VRS Plan 2. Employees hired on or after January 1, 2014, are on the Hybrid Retirement Plan. Detailed information on the VRS system, Plan 1, Plan 2, and Hybrid, and benefits are available through the Office of Human Resources or on the internet at www.varetire.org.
RETIREMENT INCENTIVES

Eligibility
Charlottesville City Schools offers the benefits described below to eligible employees who retire with VRS. In order to be eligible for the retirement incentives offered by CCS, an employee must meet all of the following criteria:

1. Currently employed by CCS in a full-time VRS covered position
2. Are retiring through VRS

AND

3. Eligible for unreduced retirement under VRS
   a. **VRS Plan 1**: Age 65 with at least five years of service credit with VRS or age 50 with at least 30 years of service credit with VRS.
   b. **VRS Plan 2**: Normal Social Security retirement age with at least five years of service credit with VRS or when age and service equal 90. Example: Age 60 with 30 years of service credit with VRS.
   c. **VRS Hybrid Plan**: Normal Social Security retirement age with at least five years of service credit with VRS or when age and service equal 90. Example: Age 60 with 30 years of service credit with VRS.

All retirement related payments (i.e. service credit, sick leave payout, early notification incentive, vacation leave payout) provided by Charlottesville City Schools must be deposited into a tax sheltered account (TSA) that has been established by the employee with any of the providers approved by CCS. The account must be established no later than 15 days prior to the employee’s retirement date in order for payment to be processed. Failure to establish either a 403(b) or 457 tax sheltered account with a CCS approved provider within this timeframe will result in forfeiture of all retirement incentives. Retirement incentives will not be paid out directly to the employee.

Part-Time Employees Incentive
Employees who retire under VRS with less than full-time benefits are eligible for sick leave payout and service credit.

Early Notification Incentive
According to policy, eligible full-time employees who submit their retirement resignation at least five months prior to their retirement date will receive a bonus of $1,000.
Sick Leave Payout
Eligible employees who retire effective June 30, 2010 or after and have three or more consecutive years of service with CCS can request to receive payment for unused sick leave as described below:

<table>
<thead>
<tr>
<th>Consecutive Years of CCS Service</th>
<th>Payout Rates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 10 Years</td>
<td>$10 per day</td>
</tr>
<tr>
<td>10 through 19 Years</td>
<td>$20 per day</td>
</tr>
<tr>
<td>20 through 29 Years</td>
<td>$30 per day</td>
</tr>
<tr>
<td>30 or more Years</td>
<td>$40 per day</td>
</tr>
</tbody>
</table>

Service Credit
Eligible employees who retire effective June 30, 2010 or after and have 5 or more consecutive years of service with CCS will receive $200 per year for years of service with CCS up to a maximum of $6,000.

Health Insurance Coverage
Eligible employees who retire effective June 30, 2010 or after, have 10 or more consecutive years of service with CCS, and are currently on the CCS group health insurance plan will be provided the option to remain on the plan as a retiree. If retiree health insurance coverage is elected, the individual will receive an annual allotment to assist in paying for the coverage with Charlottesville City Schools. The maximum annual allotment is as follows:

- Category A: $4,000
- Category B: $2,000

The allotment for health insurance coverage will end on June 30th of the 7th year following the employee’s retirement date or on the last day of the month in which the employee turns 65, whichever occurs first. The retiree will then become ineligible to remain on the plan.

Employees who are eligible for the CCS retirement incentives but are not eligible for or do not choose retiree health insurance coverage will receive a one-time payment of:

- Category A: $5,000
- Category B: $2,500
**DEFERRED COMPENSATION PLAN – 457 (b)**

The Commonwealth of Virginia 457 Deferred Compensation Plan (457 Plan) is a tax-deferred retirement savings plan established under Internal Revenue Code Section 457(b) and Chapter Six of Title 51.1 of the Code of Virginia. The Plan enables employees of the Commonwealth and other public employers in Virginia who adopt the Plan to contribute up to the annual limit, or 100% of includible compensation, whichever is less. Includible compensation is all compensation except that used to purchase VRS defined benefit plan service on a tax deferred basis.

This plan is available through the Virginia Retirement System (VRS) for all employees of Charlottesville City Schools (CCS). For those enrolled, there are a number of investment options ranging from low to high risk. For further information on the plan, go to the VRS website [http://www.varetirement.org/dcp/plan-info/contributions.html](http://www.varetirement.org/dcp/plan-info/contributions.html).

**403 (b) RETIREMENT SAVINGS ACCOUNTS**

Qualified retirement savings accounts are available only to employees of public school systems and certain other non-profit organizations. The legislation creating these tax-deferred plans originated in 1958 and specifically added public school employees as eligible participants in 1961. As a result, these plans became regulated by Section 403 (b) of the Internal Revenue Service Code.

Employee accounts are commonly referred to as Tax Sheltered Annuities or TSA. This is due to the fact that only standard interest annuities and variable annuities were allowable account types until the passage of the Employee Retirement Income Security Act (ERISA) in 1974. This development added mutual funds under custodial arrangements as an additional investment option. All contracted employees may elect to contribute a limited portion of their salary before taxes to one of the authorized plans available through the Charlottesville City Schools.

_Policy: GCBC_

**A. Types of 403 (b) Accounts**

You may choose from several types of 403 (b) TSA accounts for your retirement savings. It is important to select the type of plan best suited to your needs and goals. The different plans listed below represent the majority of all account types currently available. Note that each plan type has specific provisions and advantages associated with its use.

a. **403 (b) - Standard Interest Annuity**

These plans are offered by the majority of all insurance companies and are the simplest forms of retirement savings. They offer a guarantee of principal as well as a guaranteed minimum rate of return. The company also credits a current rate of interest on your deposits based on the earnings of their general account. This current rate will change periodically as determined by earnings in the general account and declared by the company. There are usually no sales charges or fees associated with establishing these accounts. Surrender charges for early withdrawals are common. Loan provisions are usually included.

These account types are the most recent addition to the 403 (b) product list. Developed by insurance companies, this annuity combines the characteristics of an interest annuity with the opportunity to participate in any positive returns realized in a
stock market index. One of the most commonly used indexes is the Standard and Poor’s 500 or S&P 500. The annuity will guarantee some minimum rate of return over a specified time period. Issuing companies may have different methods of crediting interest, so the investor should be comfortable with the method being used before making contributions. Two other terms which may be used with these accounts are: 1.) the participation rate and 2.) the interest cap. The participation rate reflects the percentage of the increase in the index used (such as the S&P 500) which is credited to the account in the form of interest earnings. The interest cap is the maximum interest which may be credited in any one year period. These provisions are usually determined at the beginning of each contract year.

b. 403 (b) - Variable Annuity
Several investment alternatives are combined within these plans. The participant may select one or more investment accounts managed by the carrier or other various investment management companies. Interest bearing accounts with principal guarantees are available in addition to investment sub-accounts in which the participant assumes the investment risk. This flexible combination allows participants to allocate their contributions and account balances over a broad range of investments, if desired. Transfers among the separate accounts are commonly permitted. Annual fees and other charges are typical in these plans as well as surrender charges for early withdrawals. Loan provisions are also normally included.

c. 403 (b) – Custodial Accounts
These plan types are offered by investment management companies and brokerage firms. Participants may direct their contributions to various investment portfolios which are managed by the custodian or management company. Annual fees, sales charges and other expenses may be associated with these plans. Loan provisions may also be available. Custodial accounts usually offer no guarantees. Long-range returns are subject to the performance of the investment accounts chosen by the participant. Investment options typically include money market accounts or mutual funds based on equity or bond investments.

The selection of a plan type for your retirement savings is an important part of your overall retirement savings program. The assistance of a professional representative can prove helpful in understanding how a particular plan may be beneficial in achieving your accumulation goals and should suggest a plan which is suitable to your risk tolerance. You should realize that the success of your program depends primarily on the amount you choose to deposit in your account. Returns are important, but secondary to the contribution itself. Employees should contact Central Office at 434.245.2400 and request a list of authorized vendors.

SHORT TERM DISABILITY OPTION
Charlottesville City Schools provides short-term and long-term disability benefits for VRS covered employees who have a qualifying event outside of work.

Both short-term and long-term disability benefits are mandated by VRS for Hybrid employees. Hybrid employees under VRS are eligible for short-term disability benefits after one year of service with the
employer. Voluntary short-term disability coverage is made available for Hybrid employees to purchase coverage for the first year of service with Charlottesville City Schools.

For VRS Plan 1 & Plan 2 employees, VRS provides a disability retirement benefit. Charlottesville City Schools administers short-term disability benefits, and also provides a long-term disability plan to help bridge coverage to the VRS disability retirement benefit.

There is a seven day wait or elimination period for short-term disability benefits. If you have questions about disability benefits and how they relate to your specific VRS plan, please contact Human Resources.

**TRAVEL ALLOWANCE**
Charlottesville City School employees must follow the following process for approved vehicle travel on school business:

1. Contact the Division Administration Office at 434.245.2400 for availability of division vehicles.
2. When a division vehicle is not available, a determination will be made regarding the least cost alternative between two options; use of personal vehicle or use of a rental car.

If a division vehicle is not available, and a rental car is indicated as the least cost, employees may still choose to use their personal vehicle. Reimbursement will then be based on the lower amount.

**TUITION REIMBURSEMENT**
The School Board approves funds to provide partial tuition reimbursement for the cost of a course taken by an employee in order to strengthen the employee’s knowledge of and skills in his/her primary area of responsibility within the school division.

In order to support the effectiveness of the division's instructional programs and initiatives, to insure compliance with accreditation, licensure and legal mandates, and to enhance the performance of individual staff members, the following procedures will be implemented when reimbursing staff members for college and graduate level coursework.

A. **Tuition Reimbursement for Employees Taking College Level Courses**
   a. Reimbursement is available for up to $500 of the tuition cost for full-time staff and a partial tuition reimbursement up to $250 for part-time staff for the following:
i. **T1** - A course taken for recertification and/or to increase a staff member’s knowledge within his/her primary field of responsibility.

ii. **T2** - A course formally approved for a staff member to obtain additional endorsement in order to meet the human resource needs of the division.

b. Staff will be reimbursed for **no more than three credit hours**, the equivalent of **one (1)** college level course, for each fiscal year (July 1 through June 30).

c. Employees will be reimbursed upon satisfactory completion of eligible courses.

d. **To apply for tuition reimbursement, staff members should**

   i. Complete a tuition reimbursement application form and submit it to the **Office of Human Resources prior to formal enrollment in the course.**

   ii. The tuition reimbursement forms can be found on the Human Resources webpage or can be obtained in school offices or Central Office. ([Tuition Reimbursement Form](#))

### B. Reimbursement for Fees Associated with GED Session Completion

a. Employees seeking to earn their GED are also eligible for tuition reimbursement. Eligible employees can apply for tuition reimbursement for up to 3 sessions per year and a maximum of $500.

b. Upon successful completion of a GED session, a copy of a receipt of payment and a progress report issued by the Adult Education program should be submitted to the Office of Human Resources in order for reimbursement to be approved.

All reimbursements will be dependent on available funding for courses taken in the year in which the money is budgeted. Staff members will be reimbursed in the order in which they are approved until all available money has been spent. Once available money is allocated, applications for tuition reimbursement cannot be approved.

### UNEMPLOYMENT COMPENSATION

Under certain conditions unemployment compensation is available to all staff. Rates are determined by the state. The school system is considered a reimbursable employer. For further information contact the Virginia Employment Commission at 434.984.7630.

### WELLNESS PROGRAM

All full-time and half-time employees who work 17.5 hours or more a week may join the CCS wellness program. ACAC, YMCA, and Smith Aquatic Center are the approved fitness centers that are available to Charlottesville City Schools employees. Additional information regarding rates for employees and
their families are available through the Human Resources office.

**LACTATION SUPPORT**

The Superintendent shall designate a non-restroom location in each school as an area in which any mother who is employed by the Charlottesville City School Board may take breaks of reasonable length during the school day to express milk to feed her child. The area must be shielded from public view.

*Policy: GBEF-JHCL*
WORKERS' COMPENSATION

All claims for Workers’ Compensation benefits should be made through Ms. Donna Seay, Secretary, Division Administration Office, 1562 Dairy Road, 22903; telephone number 434.245.2948. All accident information must be collected and proper forms completed and forwarded to Ms. Seay at Central Office. All employees of the Charlottesville City Schools are covered by Workers’ Compensation insurance. This insurance covers job-related injuries. In case of injuries, employees shall go to approved physicians or health care centers for treatment after proper notification has been given to the immediate supervisor. These locations are posted in each building. Treatment by any other physician/hospital, without prior referral from physicians listed below, will not be recognized by the Charlottesville City Schools for payment of claims. In the event of lost time on the job due to a work-related injury, the employee will receive only a partial salary.

Employees who are on approved leave for a job-related injury will receive leave time in accordance with Workers’ Compensation procedures. Employees absent from work, in such instances, are to be coded by the immediate supervisor as Workers’ Compensation, with the note attached to the Employee Absentee Report that such absences are related to a job-injury.

Use one of these physicians for a work-related injury:

- Martha Jefferson Emergency
  500 Martha Jefferson Drive
  Charlottesville, VA 22911
  Tel: 434.654.7009

- MEDExpress Urgent Care
  1149 Seminole Trail
  Charlottesville, VA 22901
  Tel: 434.978.3998

- MEDExpress Urgent Care
  260 Pantops Center
  Charlottesville, VA 22911
  Tel: 434.244-3027

- Charlottesville Family Medicine
  3025 Berkmar Drive, STE 1
  Charlottesville, VA 22901
  Tel: 434.973.1831

- Neighborhood Family Health
  901 Preston Avenue Ste 301
  Charlottesville, VA 22903
  Tel: 434.227.5623

Referrals for specialists requires United Heartland approval.

The emergency facility is only to be used in a true emergency. Once initial treatment is complete, a physician from the approved panel should be used for follow up care if needed.
FAMILY MEDICAL LEAVE ACT (FMLA)

Charlottesville City Schools’ policy GCBE and forms for FMLA are available in the Charlottesville City Schools Policy Manual and on the CCS HR web page with forms and documents.

Please contact Laura Floyd, Human Resources Coordinator, for further information at (434) 245-2400.

Employee Rights and Responsibilities Under the Family and Medical Leave Act

A. Eligible Employees

An employee who has worked for the School Board (i) for at least 12 months and (ii) for at least 1,250 hours during the previous 12-months is eligible to apply for the leave provided herein.

B. Definitions

The following definitions shall apply for purposes of this policy:

a. The term “active duty” means duty under a call or order to active duty under a provision of law referred to in 10 U.S.C. § 101(a)(13)(B).

b. The term “covered military member” means a member of the Reserves or a retired member of the Regular Armed Forces or Reserves. A member of the Regular Armed Forces is not a covered military member for purposes of qualifying exigency leave.

c. The term “covered servicemember” means a 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.

d. The term “next of kin” used with respect to an individual, means the nearest blood relative of that individual.

e. The term “outpatient status,” with respect to a covered servicemember, means the status of a member of the Armed Forces assigned to (i) a military medical treatment facility as an outpatient; or (ii) a unit established for the purpose of providing command and control of members of the Armed Forces receiving medical care as outpatients.

f. The term “parent” means the biological parent of an employee or an individual who stood in loco parentis to an employee when the employee was a son or daughter.

h. The term “serious health condition” means an illness, injury, impairment, or physical or mental condition that involves
i. inpatient care in a hospital, hospice, or residential medical care facility and any period of incapacity or treatment in connection with inpatient care; or
ii. continuing treatment by a healthcare provider.

i. The term “continuing treatment by a healthcare provider” means one or more of the following:

i. A period of incapacity lasting more than three full calendar days, and subsequent period of treatment relating to the same condition that also involves
   1. Two or more treatments by a healthcare provider, one of which occurs within 7 days of the first day of incapacity and both of which occur within 30 days of the first day of incapacity, unless extenuating circumstances exist; or
   2. treatment by a healthcare provider on at least one occasion, which must occur within 7 days of the first day of incapacity, which results in a regimen of continuing treatment under the supervision of the healthcare provider.

ii. Any period of incapacity due to pregnancy or for prenatal care;

iii. Any period of incapacity due to a chronic serious health condition which
   1. requires periodic visits of at least twice per year for treatment by a healthcare provider;
   2. continues over an extended period of time; and
   3. may cause episodic rather than a continuing period of incapacity.

iv. A period of incapacity which is permanent or long-term due to a condition for which treatment may not be effective and which requires the continuing supervision of a healthcare provider;

v. Any period of absence to receive multiple treatments (including recovery time) by a healthcare provider for:
   1. restorative surgery after an accident or injury;
   2. a condition that would likely result in a period of incapacity of more than three consecutive, full calendar days in the absence of medical treatment, such as cancer, severe arthritis, or kidney disease.

vi. The term “treatment by a health care provider” does not include routine physical examinations, eye examinations, or dental examinations. Voluntary or cosmetic treatments which are not medically necessary are not serious health conditions unless inpatient hospital care is required.

j. The term “serious injury or illness,” in the case of a member of the Armed Forces, including a member of the National Guard or Reserves, means an injury or illness incurred by the member 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.

k. The term “single 12-month period,” in the case of Military Caregiver Leave, means the 12-month period measured forward from the date that the employee’s first leave to care for the covered service member begins.

l. The term “reduced leave schedule” means a leave schedule that reduces the usual number of hours per workweek, or hours per workday, of an employee.
C. Types of FMLA Leave
   a. In General
      Except as hereinafter provided, an eligible employee shall be entitled to a total of 12 workweeks of unpaid leave during the rolling 12-month period measured backward from the date the employee takes leave for one or more of the following:
      i. because of the birth of a son or daughter of the employee and in order to care for such son or daughter;
      ii. because of the placement of a son or daughter with the employee for adoption or foster care.
      iii. because the employee is needed to care for his spouse, son, daughter or parent, if such spouse, son, daughter, or parent has a serious health condition.
      iv. because of a serious health condition that makes the employee unable to perform the functions of his or her position.
      v. because of any qualifying exigency as defined in Department of Labor regulations, (hereinafter Qualifying Exigency Leave), arising out of the fact that the spouse, or a son, daughter, or parent of the employee is a covered military member on active duty (or has been notified of an impending call or order to active duty) in the Armed Forces in support of a contingency operation.

   b. Military Caregiver Leave
      An eligible employee who is the spouse, son, daughter, parent, or next of kin of a covered service member with a serious injury or illness shall be entitled to a total of 26 workweeks of leave during a single 12-month period to care for the service member. During the single 12-month period, an eligible employee shall be entitled to a combined total of 26 workweeks of leave for any FMLA qualifying reason, no more than 12 weeks of which may be for reasons other than to care for a covered service member with a serious injury or illness.

D. Additional Provisions
   a. Husband and Wife Both Employed by School Board. A husband and wife who are employed by the School Board may only take a combined total of 12 weeks of leave during the school year for the birth or placement of a child or to care for a parent (but not a parent-in-law) with a serious health condition.
      i. The entitlement to leave for the birth or placement of a son or daughter shall expire 12-months after such birth or placement.
      ii. Leave taken intermittently or on a reduced schedule
         1. Leave for the birth or placement of a child shall not be taken by an employee intermittently or on a reduced leave schedule without the written authorization of the Division Superintendent.
         2. Leave for the serious health condition of an employee, an employee’s spouse, parent or child, or a service member may be taken intermittently or on a reduced leave schedule when medically necessary. If such leave is foreseeable based on planned medical treatment, the Division Superintendent may require the employee to transfer temporarily to an available alternative position for which the employee is qualified and that has equivalent pay and benefits and, in
the Division Superintendent’s opinion, better accommodates recurring periods of leave than the regular employment position of the employee.

iii. **Substitution of Paid Leave**
   1. An employee must substitute any accrued paid vacation leave, personal leave or family leave for unpaid leave under paragraphs C 1(a), (b), (c), (e), and C2 above.
   2. An employee must substitute any accrued paid vacation leave, personal leave, or sick leave for unpaid leave for under paragraph C1(d) above.

E. Foreseeable Leave
   a. **Notice**
      In any case in which the necessity for leave is foreseeable based on an expected birth or placement, or planned medical treatment, the employee shall request such leave not less than 30 days before the date the leave is to begin, except that if the date of the birth or placement, or medical treatment, requires leave to begin in less than 30 days, the employee shall provide as much notice as is practicable.

      If the necessity for leave because of a qualifying exigency arising from the fact that a family member is on active duty or has been notified of an impending call to active duty is foreseeable, the employee shall give such notice to the school division as is reasonable and practicable.

   b. **Duties of Employee**
      In any case in which the necessity for leave for the serious health condition of an employee, of an employee’s spouse, parent or child, or of a service member is foreseeable, based on planned medical treatment, the employee shall make a reasonable effort to schedule the treatment so as not to disrupt unduly the operations of the School Division.

   c. **Requests for Leave**
      Requests for leave shall be made on forms provided by the Division Superintendent.

F. **Certification and Other Opinions**
   a. **Certification of Serious Health Condition**
      i. An employee requesting leave for the employee’s own serious health condition or to care for a spouse, son, daughter, or parent with a serious health condition must submit a medical certification on a form provided by the Division Superintendent.
      ii. In any case in which the Division Superintendent has reason to doubt the validity of the certification for leave, he may require, at the School Board’s expense, that the employee obtain a second opinion of a provider designated or approved by the Division Superintendent concerning any information in the certification.
      iii. If the second opinion differs from the original certification, the Division Superintendent may require, at the School Board’s expense, that the employee
obtain a third opinion of a provider jointly approved by the employee and the Division Superintendent. The third opinion shall be final and binding.

iv. The Division Superintendent may require an employee to obtain subsequent certifications on a reasonable basis.

b. Certification for Military Caregiver Leave
   An employee requesting leave to care for a covered service member with a serious injury or illness must submit to the Division Superintendent either
   i. a medical certification on a form provided by the Division Superintendent; or
   ii. initial Travel Orders or Initial Travel Authorizations issued to a family member by the military to join an injured or ill service member at his or her bedside, pursuant to the regulations adopted by the Secretary of Labor.

   c. Certification for Qualifying Exigency Leave
   An employee requesting Qualifying Exigency Leave may be required to furnish to the Division Superintendent the following:
   i. a copy of the covered military member’s active duty orders or other documentation issued by the military which indicates that the covered military member is on active duty or call to active duty status in support of a contingency operation, and the dates of the active duty service; and
   ii. a Qualifying Exigency Certification on the form provided by the Division Superintendent.

d. Submission of Certifications
   i. Certifications required under paragraphs F1-F3 shall be submitted to the Division Superintendent within 15 days of the employee’s request for leave.
   ii. The failure of an employee to provide the certification required under paragraphs F1, F2, or F3 will result in denial of the employee’s request for FMLA leave.

G. Employment and Benefits Protection
   a. An employee who takes leave under this regulation shall, upon return from said leave, be restored to the position he or she left or to an equivalent position.
   b. An employee taking leave under this regulation shall not lose any benefits accrued prior to taking leave, but no such employee shall accrue seniority or benefits while on unpaid leave.
   c. An employee who takes leave for his own serious health condition shall provide the Division Superintendent with a certification from the health care provider, on the prescribed form, that the employee is able to resume work.
   d. The Division Superintendent may require employees on leave under this regulation to report periodically on the status and intention of the employee to return to work.
   e. The School Board may recover any premiums that it paid for maintaining benefit coverage for an employee during the period of unpaid leave hereunder if the employee does not return to work after the expiration of the leave, except for health benefit premiums when the employee does not return to work because of the continuation, recurrence, or onset of a serious health condition that entitles the employee to leave under paragraphs C1(c), (d), or C2 above, or other circumstances beyond the employee’s control. The Division Superintendent may require the
employee to provide a certification from a health care provider if the employee does not return to work because of reasons specified in paragraph C1(c), (d) or C2. If the employee fails to provide the requested certification within thirty (30) days of the request, the employee will be obligated to repay all health benefit premiums paid by the School Board.

H. Additional Rules for Instructional Employees
   a. In addition to the requirements set forth above, an eligible employee employed principally in an instructional capacity shall comply with the requirements specified in this paragraph.
   b. An employee who requests leave under paragraphs C1(c) or (d) that is foreseeable based on planned medical treatment and that would last more than 20 percent of the working days in the following 12-month period must elect either:
      i. to take leave for periods of a particular duration, not to exceed the duration of the planned medical treatment; or
      ii. to transfer temporarily to an alternative position, if available and offered by the Division Superintendent, for which the employee is qualified and that has equivalent pay and benefits and better accommodates recurring periods of leave than the regular position.
   c. If the employee begins leave for any qualifying reason more than 5 weeks prior to the end of the semester, the Division Superintendent may require the employee to continue taking leave until the end of the semester if:
      i. the leave is of at least 3 weeks duration; and
      ii. the return to work would occur during the 3-week period before the end of the semester.
   d. If the employee begins leave under paragraphs C1(a), (b), (c) or C2 during the period that commences 5 weeks prior to the end of the semester, the Division Superintendent may require the employee to continue taking leave until the end of the semester if:
      i. the leave is of greater than 2 weeks duration; and
      ii. the return to work would occur during the 2-week period before the end of the semester.
   e. If an employee begins leave under paragraphs C1(a), (b), (c) or C2 during the period that commences 3 weeks prior to the end of the semester and the duration of the leave is greater than 5 working days, the Division Superintendent may require the employee to continue to take leave until the end of the semester.

Policy: GCBE

UNPAID LEAVE
Any employee may request leave from work for a reason not covered under Leave Without Pay by providing a written request and rationale for the request to the Director of Human Resources. The employee shall provide a copy of the request to the supervisor when submitting a request to the Director of Human Resources.
LEAVE WITHOUT PAY

A leave of absence without pay may be granted to employees of the school division who have a debilitating or life-threatening illness or injury and who are not eligible for Family Medical Leave as described in Policy GCBE Family and Medical Leave because they have not worked for the division for 12 months or have not worked at least 1250 hours according to the Fair Labor Standards Act, 29 U.S. Code 201 et seq.

Medical

1. Employees with a debilitating or life-threatening illness who are entitled to leave under Policy GCBEA may take up to thirty (30) days unpaid leave during their first year of employment with the school division. This leave may be taken only in full-day increments and be taken only when the employee has no other leave (such as sick leave) available.

2. Employees requesting leave without pay for medical issues shall submit medical documentation of their need for leave. Whenever possible, documentation must be provided prior to leave being taken.

3. Prior approval must be obtained prior to leave being taken. If the employee is too ill to complete the request, the request must be completed as soon as possible and may be completed by a family member on behalf of the employee and documented by the employee’s physician.

4. The employee shall verify the request as soon as medically possible if the request is by a family member.

5. All rights under Policy GCBEA and this regulation expire at the end of the employee’s first year of service.

6. Employees who are on unpaid leave pursuant to Policy GCBEA or any other policy, except those on leave pursuant to the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA) (see Policy GCBEB), shall not engage in work for which they receive pay or any other type of remuneration without the prior written approval of the Superintendent.

Extended Medical Leave Without Pay

1. An extended leave of absence for hardship (family emergencies, extended personal illness, or other extraordinary circumstances beyond the employee’s control) may be requested by employees who have exhausted all available Family Medical Leave. The request should be submitted to the Superintendent. Unless approved prior to the leave, the leave shall not extend from one contractual year to the next.

2. Requests for extended medical leave without pay must be submitted, in writing, to the Superintendent. The request shall include detailed information which supports the necessity for such leave.
3. Written notice of intent to return to active employment must be given by the employee to the Department of Human Resources 60 calendar days before the leave expires. Failure to do so will result in termination of continued employment.

4. When an employee’s returns to active employment, the employee will be assigned to the first available vacant position for which the employee is qualified. If no suitable vacancy exists, the employee will continue in a leave without pay status and will be given preference over new applicants for the next suitable opening.

5. The guarantee of assignment to the first available position for which the employee is qualified will expire 12 months after the employee notifies the Superintendent or designee of his/her intent to return, or if the employee refuses a position for which he/she is qualified, whichever first occurs.

6. An employee on extended medical leave without pay may continue participation in medical and life insurance at his/her own expense.

7. Information for Leave Without Pay or Extended Medical Leave Without Pay is located on the CCS website in the Human Resources section and in the Employee Handbook.

**MILITARY LEAVE**

The Charlottesville City Schools division shall comply with all federal and state laws regarding the employment rights of members of the military, both full-time and in any reserve capacity.

Policy GCBEB describes the requirements of the federal and state laws regarding military leave.

Information contained in the policy regarding paid military leave during active duty service applies only to full-time employees of Charlottesville City Schools.

All employees of CCS are entitled to paid leave during annual training or when called forth by the Governor. Paid leave for all employees is not to exceed fifteen (15) days per federal fiscal year (October-September).

The CCS employee may request to use any vacation, annual, or similar leave that is accrued at the beginning of the military leave.

Any employee with questions regarding the leave should contact the Human Resources Office at the Central Administration Office Building.

*Regulations: GCBEB-R*

Complete information can be found under policy GCBEB and GCBEB-R.
JURY DUTY OR SUBPOENA
A paid administrative leave of absence may be granted employees to serve on a jury or to attend court as a witness under subpoena.

If an employee is involved in a personal case, either as a plaintiff or as a defendant, he/she may not be granted court appearance leave. The time may be charged to personal leave, vacation leave, or leave without pay. The employee is expected to provide notification of the absence and follow procedures for personal leave.
Regulations: GCBD-R

PERSONAL LEAVE

Personal leave is available to School Board employees for personal business. Full-time employees (working a minimum of .80) are permitted three days of paid personal leave annually. Half-time, but less than full-time employees working no fewer than 17.5 hours per week is permitted one and one-half days of paid personal leave annually.

Personal leave will not be granted on any student contact day immediately preceding or following a holiday or during the last eight days of student contact and any post-school work days. Any exception to this must be granted by the Superintendent.

At the end of each school year, unused personal leave will be credited to the employee’s sick leave record.
Regulation: GCBD-R

SICK OR ACCIDENT LEAVE

Full-time employees (working a minimum of .80) will be granted one and one fourth (1.25) days of sick leave per contract month with an unlimited accumulation. Half-time employees working no fewer than 17.5 hours per week are entitled to sick leave which will be earned at one-half the rate the benefit is earned by full-time employees.

Sick leave benefits will not accrue for summer school, evening, part-time, substitute or temporary employees.

A new employee may not claim any portion of earned leave unless he/she has reported for duty in accordance with the terms of the employee’s contract. If, however, a continuing contract employee is unable, because of illness, to begin working at the time designated in the contract, such employee may be allowed to use his/her accumulated leave, not to exceed the balance of sick leave accumulated as of June 30 of the preceding school year.

Licensed employees may transfer unused sick leave accumulated from other Virginia school divisions. It will be the responsibility of the employee to initiate the transfer of accumulated sick leave credit. The School Board will not accept out-of-state accumulated sick leave credit.

Sick leave may be used for illness or death in the immediate family requiring the attendance of the
employee for no more than five days; more than five days of absences requires written approval of the Superintendent or designee. The "immediate family" as defined in these regulations includes natural parents, foster parents, stepmother, stepfather, wife, husband, children, grandchildren, brother, sister, father-in-law, mother-in-law, brother-in-law, sister-in-law, son-in-law, daughter-in-law, grandparents, and any individual living in the household of the employee.

After five days of sick leave, a doctor’s certificate shall be required for personal illness, family illness or death in the family.

Any day observed as a holiday that falls within a period of sick leave, will be paid for as a holiday and will not be charged as sick leave.

Employees who leave the school division due to disability or to enter the military or for other reasons approved by the School Board shall retain accumulated leave if they are re-employed immediately upon return from such leave of absence.

Sick leave may be denied to any employee who is found guilty of making false statements of sickness, and such false statements shall be cause for dismissal.

Any available and applicable paid sick leave must be taken by an employee as a part of any leave authorized by the School Board under the Family and Medical Leave Act (FMLA).

Regulation: GCBD-R

All employees are required to notify their immediate supervisor as soon as they become aware that they will be unable to report to work.

**ANNUAL LEAVE**

Twelve-month full-time employees shall earn annual leave in the following manner:

1. 15 working days per year for less than five years of service in a 12 month capacity in the Charlottesville City Schools (1.25 days per month)
2. 18 working days per year for more than 5 years service in a 12-month capacity in the Charlottesville City Schools (1.50 days per month)

Annual leave should be planned and approved in advance to avoid employee shortages and scheduling conflicts.

If an employee is transferred, promoted or demoted to a position in which annual leave is not an earned benefit, the employee may retain the leave or may receive payment for accrued annual leave up to the maximum allowed at the employee’s daily rate of pay prior to the transfer, promotion or demotion. If the employee does not request the payment, the employee may retain the leave and will be paid upon separation from the division at the rate following the change in position.

On separation from Charlottesville City Schools, unused annual leave, up to the equivalent of two full years earned annual leave, will be paid at the employee’s daily rate as of the date of separation. Any employee may be paid for accumulated annual leave on the following basis:
24 days for less than five years of service
30 days for at least five years of service but less than 10 years of service
36 days for 10 full years or more of service

Employees may retain an unlimited amount of annual leave from year to year.

No more than 15 days of annual leave may be taken at any one time without permission from the Superintendent.

Annual leave may not be transferred from another school division

**Regulations: GCBD-R**

**PROFESSIONAL OR EDUCATIONAL LEAVE**

Employees may be allowed to represent CCS at professional meetings, to attend workshops, to serve on committees, and to observe other personnel without loss of pay with prior written approval of the supervisor.

Employees may request unpaid leave to pursue educational purposes. Such leave requests are to be submitted to the Superintendent and leave may be granted with approval of the Superintendent.

The impact on the educational environment will be considered prior to approval.

**Regulation: GCBD-R**

- Family and medical leave status will run concurrently with the sick leave bank.

**LEAVE FOR RELIGIOUS HOLIDAYS**

Employees whose religious affiliations require the observance of holidays other than those scheduled in the school calendar may request leave not to exceed three days per school year. The first day of such leave will be granted with pay.

Additional days will be charged against the employee’s personal leave. Such leave should be requested at least 10 working days prior to the holiday. If the leave is not requested within 10 working days prior to the holiday, the leave will be granted only if it does not impose an undue burden on the school or department where assigned.

Religious holiday leave requests exceeding three days per school year will be granted without pay, and only if the granting of leave does not impose an undue burden on the school or department where assigned.

**Regulation: GCBD-R**
LICENSED STAFF

COURSES FOR RENEWAL CREDIT

All teachers prior to enrolling in a course or professional activity for renewal of a teaching license will prepare, with the assistance of the immediate supervisor, a list of courses related to the teacher’s assignment in the Charlottesville City Schools for which renewal credit will be accepted by the Superintendent of the Charlottesville City Schools.

DUTY-FREE LUNCH PERIODS

Charlottesville City Schools’ principals will make every reasonable effort to develop cooperatively with the teachers a plan to provide lunch periods without supervisory duties.

PROFESSIONAL STAFF

No teacher is regularly employed by the School board or paid from public funds unless such teacher
- holds or eligible for a license or provisional license issued by the Board of Education,
- holds a three-year license to teach high school career and technical education courses in specific subject areas or
- is hired to teach in a trade or industrial education program and for whom the teacher licensure requirements have been waived by the Virginia Department of Education.

If a teacher employed under a provisional license is activated or deployed for military service within a school year (July 1 - June 30), an additional year will be added to the teacher’s provisional license for each school year or portion thereof the teacher is activated or deployed. The additional year or years shall be granted the following year or years after the return of the teacher for deployment and activation.

The Virginia Board of Education prescribes, by regulation, the requirements for licensure for teachers and other school personnel required to hold a license.

Policy: GC

EVALUATION OF PROFESSIONAL STAFF

1. All professional staff shall be evaluated according to the Evaluation Procedures Handbook including the timelines and forms to be completed.

2. The process will be completed as a cooperative and continuing process between the employee and his/her supervisor.

3. Any professional employee who demonstrates deficiencies in performance may be placed on an improvement plan. The purpose of the plan is to identify areas of improvement with strategies for improvement. A timeline shall be developed for the review of the plan.
4. The evaluation shall be used as a part of the decision-making process for continued employment.

5. All licensed employees have access to the Teacher Evaluation Handbook through the Human Resources Website under the tab of current employee information, handbooks, teacher evaluation handbook.

HOME CONTACTS

Each teacher will be expected to engage in activities that acquaint him/her with the home environment of assigned students. These activities may vary from teacher to teacher and from school to school. These contacts should be informal and positive, not necessarily precipitated by disciplinary or other challenges with the student.

LICENSURE

The Charlottesville City School Board shall not regularly employ any teacher or administrator who does not hold or be eligible for a license issued by the Virginia Board of Education. Requirements for classroom teachers, special education, career and technical education, school counselors, reading/math specialists, school psychologists, visiting teacher/social worker and administrators in licensed positions are stated in the Licensure Regulations for School Personnel adopted by the State Board of Education.

A Virginia state teacher’s license or a Virginia License application for such license must be on file in the central administration office before a teacher may be paid from public funds. Forms necessary for securing a Virginia license are sent to new teachers along with contracts and should be returned to Human Resources or to the Virginia Department of Education prior to the opening of school or within 90 days of the start date. Teachers who have taught in other school divisions are responsible for having copies of their licenses sent to Human Resources.

Important Links:
Virginia General Assembly Administrative Code: Licensure Regulations for School Personnel
Virginia Department of Education Licensure General Information: Virginia License
Virginia Department of Education License Application: Application for Virginia License

LICENSURE FEES FOR RECERTIFICATION/RENEWAL

The Charlottesville City School Board pays the license renewal fee for all certified staff. The cost to the school system for license renewal is $50.00 per employee. Fees associated with added endorsements or degrees are the responsibility of the employee. Contact the Human Resources Office at 434.245.2950 for information regarding other certification fees.

Licensure Renewal Manual
NATIONAL BOARD CERTIFICATION

The following employees are eligible for an annual supplement of $1,058 with documentation of national certification in their assigned area: teachers, psychologist.

NON-SCHOOL EMPLOYMENT BY PROFESSIONAL STAFF MEMBERS

Employees of the School Board may accept outside employment provided that such employment does not interfere with or affect the quality of performance for which the School Board employed the employee, nor shall the outside employment reflect adversely upon the school division. The superintendent may require employees to report all outside employment.

An employee who is on medical leave from Charlottesville City School Board, in a paid or unpaid status, may not be employed by the School Board or any other employer in any capacity during the period of leave except with the prior written authorization of the superintendent or designee.

The School Board does not endorse, support or assume liability for any activity conducted by School Board employees in which division students or employees participate which is not sponsored by the School Board.

Policy: GCQA

PART-TIME AND SUBSTITUTE PROFESSIONAL STAFF EMPLOYMENT

Substitute Teachers
1. Any person who wants to be included on the substitute teaching list must complete all application materials and provide proof of either a minimum of 30 hours of completed college level coursework or a ParaPro exam report that meets the minimum passing score for Virginia. Persons on the substitute list must also complete background history and child protective services background checks, produce a negative result on a tuberculosis screening as well as attend a mandatory orientation session. All persons on the substitute list must be recommended by the Superintendent to the School Board for approval.

2. A teaching license is preferred for long-term substitutes.

3. A written contract must be executed for any substitute teacher who will be in the same assignment for more than ninety days.

Homebound/Homebased Teachers

Homebound/homebased teachers shall be hired on an hourly, as needed basis. Any homebound teacher must complete all application materials and provide educational credentials. Persons on the approved list for homebound assignments must also complete background history and child protective services background checks, as well as attend a mandatory orientation session. All
persons on the homebound list must be recommended by the Superintendent to the School Board for approval.

The rate of pay for homebound teachers will be set annually. Homebound/homebased teachers must hold an active Virginia teaching license.

Part-Time Teachers
Any teacher whose assignment is less than 180 days or less than seven (7) hours per day is considered a part-time teacher. All part-time teachers must complete all application materials and provide educational credentials. Part-time teachers must also complete background history and child protective services background checks. All persons hired as part-time teachers must be recommended by the Superintendent to the School Board for approval.

Interns
If any school division employee seeks to create a position to be filled by an intern, the employee must get approval from the Superintendent for the internship program. If the internship is approved, the employee shall provide all information about the internship and criteria for the intern to the Director of Human Resources for the hiring process. Interns must meet all health, background and child protective services checks as any employee.

Summer School Teachers
Any teacher wanting to teach summer school must follow all announced procedures for summer school hiring to include meeting all certification requirements. Each summer school employee must be approved by the School Board prior to the start of employment.

Student-Teachers/Clinical Interns
Student-teachers/Clinical Interns shall only be accepted from accredited institutions and must meet all health, background and child protective services checks as any employee. The Superintendent or designee shall be responsible for the assignment of student-teachers/clinical intern within the school division. Applications and hiring procedures for all part-time and substitute staff employment are located on the Charlottesville City Schools Human Resources website.

Regulation: GCE-R
PROFESSIONAL GROWTH/STAFF DEVELOPMENT

Professional development courses and workshops are held to promote improvement of instruction. Registration fees and travel expenses to many conferences may be paid by the school division. A request to attend a conference must be submitted and approved prior to registration.

PROFESSIONAL STAFF ASSIGNMENTS AND TRANSFERS

1. Principals or other supervisory personnel shall submit written recommendations to the Superintendent for the appointment, assignment, transfer or dismissal of any employee under his/her supervision.

2. The Superintendent shall have the authority to assign all personnel to positions for which they are qualified and have been approved by the School Board for hire.

3. The Superintendent may reassign any employee to another location or facility during the school year as long as the reassignment does not result in a reduction of salary for that school year.

4. An adjustment in salary may be made for the following year after notice of the salary adjustment is provided with the notification of employment. The notification must be made by April 15 for the salary adjustment to be made.

5. No reassignment may be made that would result in one employee being placed in a direct line of supervision with a family member.

6. Any staff member who wants to transfer from one position or location to another must provide a written request to the Director of Human Resources with a copy to the current supervisor by April 1.

7. If the vacancy occurs after April 1, the request for transfer must be made in writing within one week of the vacancy announcement.

8. If a transfer request occurs for a position within the same work group or facility, the supervisor is responsible for making the transfer once approved by the Superintendent or designee.

9. The procedure for requesting a transfer is located on the CCS Human Resources website.

Regulation: GCI-R
PROFESSIONAL STAFF CONTRACTS

The School Board enters into written contracts with teachers, assistant principals, principals, and supervisors as defined in 8 VAC 20-441-10 before such employees assume their duties as noted below. Contracts are in the form permitted by the Board of Education, with special covenants added by the School Board as appropriate. Contracts are signed in duplicate with a copy furnished to each party.

Written contracts with those who are temporarily employed are not required. A temporarily employed teacher is (i) one who is employed to substitute for a contracted teacher for a temporary period of time during the contracted teacher’s absence, or (ii) one who is employed to fill a teacher vacancy for a period of time, but for no longer than 90 teaching days in such vacancy, unless otherwise approved by the Superintendent of Public Instruction on a case-by-case basis, during one school year.

Coaching contracts and contracts for extracurricular activity sponsorship assignments where a monetary supplement is paid shall be separate from the employee’s primary contract. Such contracts are in a form permitted by the Board of Education. Termination of the separate contract shall not constitute cause for termination of the primary contract.

For purposes of this policy, "extracurricular activity sponsorship" means an assignment for which a monetary supplement is received requiring responsibility for any student organizations, clubs, or groups such as service clubs, academic clubs and teams, athletic teams, student publication and literary groups and visual and performing arts organizations except those activities that are conducted in conjunction with regular classroom, curriculum, or instructional programs.

Policy: GCB
PROFESSIONAL STAFF MEMBERS: CONTRACT STATUS
Employment Status: Re-employment, Nonrenewal and Dismissal

All teachers must serve a five-year probationary period prior to achieving continuing contract status. A local license will not be used to satisfy the probationary period requirement. However, the Superintendent may recommend to the School Board that the probationary period of a specific teacher be reduced to no less than three years.

Probationary Period
1. The general probationary period for a teacher without previous continuing contract status shall be five years unless the Superintendent makes a recommendation as described in the first paragraph.
2. If a teacher has not achieved continuing contract status and is hired by Charlottesville City Schools, he/she must complete a five-year probationary period.
3. If a teacher has achieved continuing contract status in another division in Virginia, he or she will be required to serve a two-year probationary period.
4. If a teacher separates from service and returns to a Virginia school division by the beginning of the third year after the separation, the teacher shall be required to serve a one-year probationary period. If the separation is longer than the beginning of the third year, a three-year probationary period will be required.
5. Evaluation procedures in GCM and GCN must be followed. Information from the evaluations will be used by the Superintendent prior to any recommendation for continued employment.
6. Staff development shall be provided for all teachers in instructional strategies and techniques for intervention for or remediation of students at risk for failing SOL assessments. The staff development is required for all teachers hired after July 1, 2001 as a condition for the achievement of continuing contract status.

Notice of Reemployment
1. Probationary teachers must accept or reject a notice of reemployment in writing within 15 days of the notice. Failure to provide the written acceptance creates a vacancy in that position.
2. For any probationary teacher not being reemployed for the following school year, notice of non-renewal shall be provided to the employee by June 15.

Probationary teachers must accept or reject a notice of reemployment in writing within 15 calendar days of the notice. Failure to provide the written acceptance creates a vacancy in that position.

Any employee who does not sign and return his or her contract within 15 calendar days after it was mailed to him or her will be deemed to have declined employment or rejected the offer of employment with the School Board and his or her position will be posted.
Continuing Contract Status

1. Following the completion of a successful probationary period and the start of the sixth year, a teacher shall be granted continuing contract status.

2. Continuing contract status shall be continued during good behavior and competent services until the teacher reaches retirement or leaves the school division for other reasons.

3. Written notice of noncontinuation of the contract by either party (teacher or Charlottesville City Schools) must be given by June 15 of each year; otherwise, the contract continues in effect for the ensuing year.

4. The Charlottesville City School Board may reduce the number of teachers, whether continuing contract status or probationary, with reduced enrollment, discontinuation of particular subjects, or insufficient funds available.

5. As soon as possible after June 15 or the approval of the budget by Charlottesville City Council, Charlottesville City Schools employees shall receive notice of continued employment with salary and assignment.

6. Any employee who may be affected by a reduction in force due to insufficient funding shall be notified by the Director of Human Resources within two weeks of the approval of the budget by the Charlottesville City Council. This notification must be received by July 1.

Principals, Assistant Principals and Supervisors

1. Any principal, assistant principal or supervisor who has served a probationary period must also serve a required probationary period in this position for three years.

2. Continuing contract status does not preclude the School Board, with the Superintendent’s recommendation, to reassign the principal, assistant principal or supervisor to a teaching position if notified by June 15.

3. Such reassignment may include a salary reduction to the level of teacher from the administrative pay tables.

4. If the reassignment does include the reduction in salary, the procedures in Policy GCG must be followed.

Information explaining probationary status and continuing contract status is located in the Employee Handbook.

Regulation: GCG-R
PROFESSIONAL STAFF DISCIPLINE

Probation and Dismissal

1. A teacher may be placed on probation or dismissed for incompetence, immorality, noncompliance with school laws and regulations, disability in accordance with state and federal law, conviction or a felony or a crime of moral turpitude or other good and just cause.

2. A teacher shall be dismissed if he/she is the subject of a founded child abuse and neglect case pursuant to Code of Virginia, 1950, as amended Section 63.2-1505 and after all rights to appeal provided by Virginia Code 63.2-1526.

3. Once a teacher is the subject of a founded child abuse and neglect case and has exhausted all rights to appeal, the Superintendent shall recommend revocation of the teaching license from the State Board of Education. The request of revocation shall be made within 10 business days following the final decision from the appeal or acceptance of the resignation.

4. A copy of the procedures used for the investigation of child abuse and neglect cases shall be located in the office of the principal at each location, in the office of the Director of Human Resources and available upon request.

5. Revocation of license shall also be requested for any conviction of a felony or any crime involving sexual molestation, physical or sexual abuse or rape of a child or any offense involving drugs.

Suspension

1. Any Charlottesville City Schools employee may be suspended for good and just cause when the safety and welfare of the division or the students therein are threatened or when the employee has been charged by summons, warrant, indictment, or information with the commission of a felony, a misdemeanor involving sexual assault, obscenity, drugs, moral turpitude, physical, sexual abuse or neglect of a child, or an equivalent offense in another state (Exact information about the causes may be found in the policy and appropriate legal references.)

2. An employee may not be suspended longer than 60 days except when suspended for summons, warrant, indictment, or information with the commission of a felony or any of the above-listed offenses.

3. No employee shall be suspended for longer than five days without written notice of the reasons for the suspension and an opportunity for a hearing before the School Board.

4. Any employee suspended shall continue to receive his/her salary unless a hearing is held with the School Board and the decision is made for the suspension to be without pay.

5. If the School Board requests that an employee be a subject of a polygraph test as a part of an investigation and the employee refuses, the refusal shall not be grounds for a suspension.

6. If the School Board holds a hearing and determines that the suspension shall be without pay, an amount equal to the pay of the employee shall be placed in an interest-bearing escrow account until the resolution of the investigation.

7. If the employee is cleared of the charge, the employee shall receive the salary plus any accrued interest and shall be reinstated to the school division. The assignment will be determined by the Superintendent and shall be at the same pay rate as before the suspension. Any changes in assignment must follow the regulations GCI.

8. If the employee is found guilty and has exhausted all appeals, the salary and accrued interest shall remain the property of the school division and may be returned to the general operating fund.
9. If an employee is suspended or dismissed based on information received on a criminal history background check, the employee shall be provided a copy of the report used to make that decision.

10. If a court places a CCS employee on probation pursuant to Va. Code 18.2-251, that finding will be treated as a conviction or a finding of guilt.

**Failure to Perform Non-Emergency Health-Related Services**

1. Licensed instructional employees shall not be disciplined, placed on probation or dismissed solely for refusing to provide non-emergency health-related services to students.

2. This provision does not apply to administrative personnel and individuals employed to perform health-related services for students.

3. Instructional aides and clerical personnel may not refuse to administer oral medication to students.

   *Regulation: GCPD-R*

**RESIGNATION OF PROFESSIONAL STAFF MEMBERS**

1. A teacher may resign after June 15 with approval of the Superintendent.

2. Any resignation request shall be in writing with the reason for resignation and provide at least two weeks notice prior to the expected end of employment.

3. Any teacher may withdraw the request to resign within one week of the written request.

4. After the one-week period, the Superintendent shall inform the School Board of the decision to accept or reject the resignation request.

5. The School Board may reverse the decision of the Superintendent regarding a resignation request.

6. If the Superintendent and School Board reject the request for resignation due to insufficient cause and the teacher breaches the contract, consequences may be sought by the school division which may include revocation of the teaching license by the Board of Education.

7. Other employees shall notify their direct supervisor for any intent to separate from Charlottesville City Schools and provide at least a notice of at least 10 school days.

8. The supervisor will notify the Superintendent of the resignation notice.

9. The School Board shall be informed at a business meeting of any requested resignation and the recommended action by the Superintendent.

10. The Director of Human Resources will conduct exit interviews for all personnel leaving the school division. The format for the interviews may include online surveys, face-to-face interviews or other methods agreeable to the employee and Director.

11. Data from surveys will be compiled to identify trends or patterns. Only the Superintendent and Director of Human Resources will have access to employee identification on the surveys.

   *Regulation: GCPB-R*

**SALARIES AND CREDIT FOR TEACHING EXPERIENCE**

Salary schedules for all school division positions are approved annually by the School Board.

Credit for teaching experience may be allowed:

A. For teaching in public schools in the state and out of state.

B. For teaching in accredited institutions of higher learning in and out of the state.

C. For teaching in schools operated in military installations, supported by federal tax funds.
and for which academic credit is accepted for admission to the public schools of Virginia.

D. For teaching in public residential schools, such as the Virginia School for the Deaf and Blind.

E. For teaching in accredited private schools and in private schools for which teachers receive credit under the provision of the Virginia Retirement System.

For the purpose of determining placement on a salary schedule, one step may be granted for each full year, or major portion thereof, (employment on or before the last working day of the first semester of the school year) of teaching experience.

A supplement is added to the base salary for (a) 15 college credit hours earned beyond the Bachelor’s degree, (b) a Masters degree, (c) 30 graduate credit hours earned beyond the Master’s degree in an approved program of advanced graduate study (Ed. Specialist, Ph.D. and Ed.D), or an earned doctorate.

STAFF ASSIGNMENTS
The basic considerations in the assignment of professional personnel are the needs of the students and the instructional program. Personnel, therefore, are assigned on the basis of their qualifications and the needs of the school division with full regard to the areas of licensure.

TUTORING FOR PAY

1. No teacher shall tutor, for pay, any student in a class under his/her direction.
2. Teachers may tutor students in their classes as a part of the instructional program but with no pay for the services.
3. This restriction includes any tutoring regardless of the location or time of day for the services.
4. These regulations do not apply to tutoring offered as a part of the remedial or intervention programs offered by CCS and paid by the school division.

*Regulation: GCQAB-R*
Support staff personnel are those employees who need not hold a license issued by the Virginia Board of Education in order to obtain their positions. This category includes, but is not limited to non-licensed administrative, clerical, maintenance, transportation, food services, and paraprofessional positions.

SUPPORT STAFF EMPLOYMENT STATUS
Support staff are not issued written contracts unless such contracts are required by law.

The School division employees three types of support staff:
- Temporary employees who are hired for short-term needs on a daily basis: These employees do not receive benefits and are paid only for hours worked.
- Probationary employees who are fully qualified new employees assigned to authorized positions: These employees are eligible for salary increases and receive benefits.
- Regular employees who have successfully completed the prescribed probationary period: Regular employees receive all employment benefits available under School Board policy. The employment of support personnel may be terminated with fifteen calendar days’ notice. Support personnel may also be subject to immediate dismissal for just cause.

Support personnel who are removed from employment for just cause shall be ineligible thereafter for employment by Charlottesville City School Board.

Employees of Charlottesville City Schools Board may be suspended as provided in Policy GCPF-Suspension of Staff Members.
Policy: GDB

PROBATIONARY PERIOD FOR CLASSIFIED STAFF
1. All support staff employees shall serve a probationary period of 18 months.
2. At the end of the probationary period, the employee status will change to regular employees.
3. Once a support staff employee reaches the status of regular, the employee shall maintain that status following a transfer, change in job assignment, or promotion while serving a probationary period in a new position.

Policy: GDB-R
RESIGNATION OF SUPPORT STAFF MEMBERS

Any support staff member shall submit a written resignation to his/her immediate supervisor to terminate employment with Charlottesville City Schools.

The written resignation shall be submitted at least 14 calendar days before the employee plans to terminate employment.

The supervisor shall notify the Director of Human Resources about the resignation.

The Supervisor and Director shall develop a timeline for the replacement of the employee.

The Director shall notify the Superintendent of the vacancy.

The Superintendent shall notify the School Board at the next scheduled meeting of any support staff resignations.

Regulation: GDPB-R

SUPPORT STAFF ASSIGNMENTS AND TRANSFERS

1. Support staff shall be assigned by the Superintendent or designee to positions for which they are qualified and meet the needs of the school division.
2. Support staff may submit a written request for transfer to any other position for which they are qualified at https://charlottesvilleva.tedk12.com/hire/index.aspx.
3. Support staff may be reassigned to other positions in the school division by the Superintendent or designee based on qualifications and the needs of the school division.

Regulation: GDI-R

SUPPORT STAFF MEMBERS: CONTRACT STATUS AND DISCIPLINE PROCESS

1. A support staff member shall be provided a two-week (14 calendar days) notice by the immediate supervisor of impending dismissal.
2. A support staff member may be immediately dismissed for just cause.
3. Any support staff member removed from employment by the Superintendent for just cause shall not be eligible for further employment in any position of the school division.
4. Any Charlottesville City Schools employee may be suspended for good and just cause when the safety and welfare of the division or the students therein are threatened or when the employee has been charged by summons, warrant, indictment, or information with the commission of a felony, a misdemeanor involving sexual assault, obscenity, drugs, moral turpitude, physical, sexual abuse or neglect of a child, or an equivalent offense in another state (Exact information about the causes may be found in the policy and appropriate legal references.)
5. An employee may not be suspended longer than 60 days except when suspended for summons, warrant, indictment, or information with the commission of a felony or any of the above-listed offenses.
6. No employee shall be suspended for longer than five days without written notice of the reasons for the suspension and an opportunity for a hearing before the School Board.
7. Any employee suspended shall continue to receive his/her salary unless a hearing is held with the School Board and the decision is made for the suspension to be without pay.
8. If the School Board requests that an employee be a subject of a polygraph test as a part of an investigation and the employee refuses, the refusal shall not be grounds for a suspension.
9. If the School Board holds a hearing and determines that the suspension shall be without pay, an amount equal to the pay of the employee shall be placed in an interest-bearing escrow account until the resolution of the investigation.
10. If the employee is cleared of the charge, the employee shall receive the salary plus any accrued interest and shall be reinstated to the school division. The assignment will be determined by the Superintendent and shall be at the same pay rate as before the suspension. Any changes in assignment must follow the regulations GDI.
11. If the employee is found guilty and has exhausted all appeals, the salary and accrued interest shall remain the property of the school division and may be returned to the general operating fund.
12. If an employee is suspended or dismissed based on information received on a criminal history background check, the employee shall be provided a copy of the report used to make that decision.
13. If a court places a CCS employee on probation pursuant to Va. Code 18.2-251, that finding will be treated as a conviction or a finding of guilt.
14. Instructional assistants and clerical employees may not be disciplined, placed on probation or dismissed solely for refusing to perform non-emergency health-related services for students.
15. However, instructional aides and clerical employees may be disciplined for refusing to dispense oral medications to students.
16. Information regarding employment status and discipline procedures for support staff is included in the Employee Handbook.

**LICENSURE FEES FOR SCHOOL NURSES**
The Charlottesville City School Board will reimburse school nurses for license renewal fees. Once a school nurse applies and receives their renewed nursing license they should submit a reimbursement request along with a copy of their renewed license and a receipt of payment to the Human Resources office.

**TERMS OF EMPLOYMENT**
Non-teaching personnel and less than full time teaching personnel receive a letter of appointment annually. If the Board or the employee wishes to terminate employment, two weeks’ notice should be given by either party.
APPENDIX

For your convenience, a small collection of forms have been provided for your review. Additional forms may be found on the division website under “Current Employee Benefits & HR Information.”

- Name or Address Change Form
- Accommodation Certification Form
- Family and Medical Leave Act Request Form
- Certification of Health Care Provider for Employee’s Serious Health Condition under FMLA
- Family and Medical Leave Act Fitness For Duty Certification
- Application for an Initial Virginia License
- Application for License Renewal
Name or Address Change Form

Change From:

Name _____________________________________
Address ____________________________________

_____________________________ _____
_____________________________ _____
Cell Phone ________________________________
Home Phone ________________________________

Change To:

Name _____________________________________
Address ____________________________________

_____________________________ _____
_____________________________ _____
Cell Phone ________________________________
Home Phone ________________________________

Note: If you are changing your name, you must provide something to the Office of Human Resources showing that your name has been legally changed (i.e. marriage certificate, updated driver’s license, or divorce decree).

Employee Name ____________________________________
Employee Signature _________________________________
Date ______________________________________________
Work Location ______________________________________
Position ___________________________________________
Last 4 Digits of Social Security # ______________________

For Human Resources Use Only:
A5400 _____ VBAS _____
HR Initials _________ Date Updated ________________
CHARLOTTESVILLE CITY SCHOOLS
TUITION REIMBURSEMENT PROCEDURES

The School Board approves funds to provide partial tuition reimbursement for the cost of a course taken by any full-time or part-time employee in order to strengthen the employee’s knowledge of and skills in his/her primary area of responsibility within the school division.

In order to support the effectiveness of the division’s instructional programs and initiatives, to insure compliance with accreditation, licensure and legal mandates and to enhance the performance of individual staff members, the following procedures will be implemented when reimbursing staff members for college and graduate level course work.

Tuition Reimbursement for Employees Taking College Level Courses

1. Reimbursement is available for up to $500 of the tuition cost for full-time staff and a partial tuition reimbursement up to $250 for part-time staff for the following:

   T1 A course taken for recertification and/or to increase a staff member’s knowledge within his/her primary field of responsibility.

   T2 A course formally approved for a staff member to obtain additional endorsements in order to meet the human resource needs of the division.

2. Staff will be reimbursed for no more than three credit hours, the equivalent of one (1) college level course, for each fiscal year (July 1 through June 30).

3. Employees will be reimbursed upon satisfactory completion of eligible courses.

Reimbursement of Fees Associated with GED Session Completion

1. Employees seeking to earn their GED are also eligible for tuition reimbursement. Eligible employees can apply for tuition reimbursement for up to 3 sessions per year and a maximum of $500.

2. Upon successful completion of a GED session, a copy of a receipt of payment and a progress report issued by the Adult Education program should be submitted to the Office of Human Resources in order for reimbursement to be approved.

All reimbursements will be dependent on available funding for courses taken in the year in which the money is budgeted. Staff members will be reimbursed in the order in which they are approved until all available money has been spent. Once available money is allocated, applications for tuition reimbursement can not be approved.

To apply for tuition reimbursement, staff members should complete a tuition reimbursement application form and submit it to the Office of Human Resources prior to formal enrollment in the course. The tuition reimbursement forms can be found on the Human Resources webpage or can be obtained in school offices or Central Office.
CHARLOTTESVILLE CITY SCHOOLS
APPLICATION FOR TUITION REIMBURSEMENT

Name ____________________________ School/Program ____________________________

Date ____________________________

Institution to be Attended _______________________________________________________

Date of Attendance ____________________________

Course to be taken _____________________________________________________________

Credit Hours ________________________________________________________________

GED Session (3 per year) ______________________________________________________

Tuition/GED Session Cost ______________________________________________________

Applicable Reimbursement Category (Circle)   T1     T2

Upon completion of the course, a copy of grade report or college transcript along with a copy of
paid receipt for tuition must be submitted to the Office of Human Resources in order for
reimbursement to be approved.

(To be completed by the Office of Human Resources)

Date application received: ____________________________

If not approved, reason for non-approval: ____________________________

Maximum tuition reimbursement of: ____________________________

________________________

Authorized Signature of Approval

________________________

Date

Copy of grade report, progress report or transcript received: ____________________________

Copy of paid receipt for tuition received: ____________________________

________________________

Authorized Signature to Pay

________________________

Date
ACCOMMODATION CERTIFICATION FORM

To be completed by employer:

Employer Contact: Dr. Keith P. Hubbard, Director of Human Resources

Employee’s Name: _________________________________________
Employee’s job title: _________________________________________
Employee’s essential job functions: See attached job description.

To be completed by Health Care Provider:

Health Care Provider’s name and business address: __________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Type of practice/medical specialty: ________________________________________________________

Telephone number: ____________________________ Fax number: ___________________________

I have reviewed the essential job functions for the position and certify that
__________________________________ (Employee’s name)

Is medically able to perform all essential functions of the position
Is medically unable to perform all essential functions of the position
If the employee is medically unable to perform one or more of the essential functions of the position, identify the job functions the employee is unable to perform.
Identify the medical condition that renders the employee unable to perform such functions:

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

State the expected duration of the medical condition: _______________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Are there any accommodations that would enable the employee to perform the essential functions of the position? Is so, please describe the accommodations and explain why the recommended accommodations are needed: __________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

___________________________________________________________
Signature of Health Care Provider                                      Date
FAMILY AND MEDICAL LEAVE ACT REQUEST

Name: __________________________  Last Four Digits of Social Security #______

Position: ________________________________________________________________

Location: ________________________________________________________________

I hereby request leave under the Family and Medical Leave Act for one of the following reasons:

☐ To care for child after birth, or placement for adoption or foster care; (This time to be deducted from sick, personal, or leave without pay). Intermittent leave must be approved by the Superintendent.

☐ To care for spouse, son or daughter, or parent, who has a serious health condition; (This time to be deducted from illness in family, personal, or leave without pay)

☐ Personal serious health condition. (This time to be deducted from sick, personal, or leave without pay)

_____ I have attached the “Certificate of Health Care Provider” completed by the doctor.  
or  
_____ I need the “Certificate of Health Care Provider” forwarded to me.

I have reviewed this request with my Principal/Supervisor and it will be effective from  
_____ / _____ / _____ to _____ / _____ / ____. I plan to return to work _____ / _____ / _____.

___________________________________       ________________________  
Employee Signature          Date
The Family and Medical Leave Act (FMLA) provides that an employer may require an employee seeking FMLA protections because of a need for leave due to a serious health condition to submit a medical certification issued by the employee’s health care provider. 29 U.S.C. §§ 2613, 2614(c)(3); 29 C.F.R. § 825.305. The employer must give the employee at least 15 calendar days to provide the certification. If the employee fails to provide complete and sufficient medical certification, his or her FMLA leave request may be denied. 29 C.F.R. § 825.313. Information about the FMLA may be found on the WHD website at www.dol.gov/agencies/whd/fmla.

SECTION I – EMPLOYER

Either the employee or the employer may complete Section I. While use of this form is optional, this form asks the health care provider for the information necessary for a complete and sufficient medical certification, which is set out at 29 C.F.R. § 825.306. You may not ask the employee to provide more information than allowed under the FMLA regulations, 29 C.F.R. §§ 825.306-825.308. Additionally, you may not request a certification for FMLA leave to bond with a healthy newborn child or a child placed for adoption or foster care.

Employers must generally maintain records and documents relating to medical information, medical certifications, recertifications, or medical histories of employees created for FMLA purposes as confidential medical records in separate files/records from the usual personnel files and in accordance with 29 C.F.R. § 1630.14(c)(1), if the Americans with Disabilities Act applies, and in accordance with 29 C.F.R. § 1635.9, if the Genetic Information Nondiscrimination Act applies.

(1) Employee name: _______________________________________________________________________________
   (First Middle Last)

(2) Employer name: __________________________________________ Date: ____________________________ (mm/dd/yyyy)
   (List date certification requested)

(3) The medical certification must be returned by __________________________ (mm/dd/yyyy)
   (Must allow at least 15 calendar days from the date requested, unless it is not feasible despite the employee’s diligent, good faith efforts.)

(4) Employee’s job title: ___________________________ Job description (☐ is / ☐ is not) attached.
   Employee’s regular work schedule:
   Statement of the employee’s essential job functions: _____________________________
   (The essential functions of the employee's position are determined with reference to the position the employee held at the time the employee notified the employer of the need for leave or the leave started, whichever is earlier.)

SECTION II - HEALTH CARE PROVIDER

Please provide your contact information, complete all relevant parts of this Section, and sign the form. Your patient has requested leave under the FMLA. The FMLA allows an employer to require that the employee submit a timely, complete, and sufficient medical certification to support a request for FMLA leave due to the serious health condition of the employee. For FMLA purposes, a “serious health condition” means an illness, injury, impairment, or physical or mental condition that involves inpatient care or continuing treatment by a health care provider. For more information about the definitions of a serious health condition under the FMLA, see the chart on page 4.

You may, but are not required to, provide other appropriate medical facts including symptoms, diagnosis, or any regimen of continuing treatment such as the use of specialized equipment. Please note that some state or local laws may not allow disclosure of private medical information about the patient’s serious health condition, such as providing the diagnosis and/or course of treatment.
Employee Name: _________________________________________________________________

Health Care Provider’s name: (Print) _____________________________________________

Health Care Provider’s business address: _________________________________________

Type of practice / Medical specialty: ____________________________________________

Telephone: (___) ______________ Fax: (___) ______________ E-mail: __________________

**PART A: Medical Information**

Limit your response to the medical condition(s) for which the employee is seeking FMLA leave. Your answers should be your **best estimate** based upon your medical knowledge, experience, and examination of the patient. After completing Part A, complete Part B to provide information about the amount of leave needed. Note: For FMLA purposes, “incapacity” means the inability to work, attend school, or perform regular daily activities due to the condition, treatment of the condition, or recovery from the condition. Do not provide information about genetic tests, as defined in 29 C.F.R. § 1635.3(f), genetic services, as defined in 29 C.F.R. § 1635.3(e), or the manifestation of disease or disorder in the employee’s family members, 29 C.F.R. § 1635.3(b).

(1) State the approximate date the condition started or will start: ____________________(mm/dd/yyyy)

(2) Provide your **best estimate** of how long the condition lasted or will last: ____________________

(3) Check the box(es) for the questions below, as applicable. For all box(es) checked, the amount of leave needed must be provided in Part B.

- **Inpatient Care**: The patient (☐ has been / ☐ is expected to be) admitted for an overnight stay in a hospital, hospice, or residential medical care facility on the following date(s): ____________________

- **Incapacity plus Treatment**: (e.g. outpatient surgery, strep throat)
  
  Due to the condition, the patient (☐ has been / ☐ is expected to be) incapacitated for more than three consecutive, full calendar days from _____________ (mm/dd/yyyy) to _____________ (mm/dd/yyyy).
  
  The patient (☐ was / ☐ will be) seen on the following date(s): ____________________

  The condition (☐ has / ☐ has not) also resulted in a course of continuing treatment under the supervision of a health care provider (e.g. prescription medication (other than over-the-counter) or therapy requiring special equipment)

- **Pregnancy**: The condition is pregnancy. List the expected delivery date: _______________ (mm/dd/yyyy).

- **Chronic Conditions**: (e.g. asthma, migraine headaches) Due to the condition, it is medically necessary for the patient to have treatment visits at least twice per year.

- **Permanent or Long Term Conditions**: (e.g. Alzheimer’s, terminal stages of cancer) Due to the condition, incapacity is permanent or long term and requires the continuing supervision of a health care provider (even if active treatment is not being provided).

- **Conditions requiring Multiple Treatments**: (e.g. chemotherapy treatments, restorative surgery) Due to the condition, it is medically necessary for the patient to receive multiple treatments.

- **None of the above**: If none of the above condition(s) were checked, (i.e., inpatient care, pregnancy) no additional information is needed. Go to page 4 to sign and date the form.
Employee Name: ____________________________

(4) If needed, briefly describe other appropriate medical facts related to the condition(s) for which the employee seeks FMLA leave. (e.g., use of nebulizer, dialysis) ____________________________________________________________

PART B: Amount of Leave Needed

For the medical condition(s) checked in Part A, complete all that apply. Several questions seek a response as to the frequency or duration of a condition, treatment, etc. Your answer should be your best estimate based upon your medical knowledge, experience, and examination of the patient. Be as specific as you can; terms such as “lifetime,” “unknown,” or “indeterminate” may not be sufficient to determine FMLA coverage.

(5) Due to the condition, the patient (☐ had / ☐ will have) planned medical treatment(s) (scheduled medical visits) (e.g. psychotherapy, prenatal appointments) on the following date(s): __________________________________________

(6) Due to the condition, the patient (☐ was / ☐ will be) referred to other health care provider(s) for evaluation or treatment(s).

State the nature of such treatments: (e.g. cardiologist, physical therapy) __________________________________________________________________________

Provide your best estimate of the beginning date ________________ (mm/dd/yyyy) and end date ________________ (mm/dd/yyyy) for the treatment(s).

Provide your best estimate of the duration of the treatment(s), including any period(s) of recovery (e.g. 3 days/week) __________________________________________________________________________

(7) Due to the condition, it is medically necessary for the employee to work a reduced schedule.

Provide your best estimate of the reduced schedule the employee is able to work. From ________________ (mm/dd/yyyy) to ________________ (mm/dd/yyyy) the employee is able to work: (e.g., 5 hours/day, up to 25 hours a week) __________________________________________________________________________

(8) Due to the condition, the patient (☐ was / ☐ will be) incapacitated for a continuous period of time, including any time for treatment(s) and/or recovery.

Provide your best estimate of the beginning date ________________ (mm/dd/yyyy) and end date ________________ (mm/dd/yyyy) for the period of incapacity. __________________________________________________________________________

(9) Due to the condition, it (☐ was / ☐ is / ☐ will be) medically necessary for the employee to be absent from work on an intermittent basis (periodically), including for any episodes of incapacity i.e., episodic flare-ups. Provide your best estimate of how often (frequency) and how long (duration) the episodes of incapacity will likely last.

Over the next 6 months, episodes of incapacity are estimated to occur __________________________ times per (☐ day / ☐ week / ☐ month) and are likely to last approximately ________________ (☐ hours / ☐ days) per episode.
PART C: Essential Job Functions

If provided, the information in Section I question #4 may be used to answer this question. If the employer fails to provide a statement of the employee’s essential functions or a job description, answer these questions based upon the employee’s own description of the essential job functions. An employee who must be absent from work to receive medical treatment(s), such as scheduled medical visits, for a serious health condition is considered to be not able to perform the essential job functions of the position during the absence for treatment(s).

(10) Due to the condition, the employee (☐ was not able / ☐ is not able / ☐ will not be able) to perform one or more of the essential job function(s). Identify at least one essential job function the employee is not able to perform:

_____________________________________________________________________________________________

_____________________________________________________________________________________________

Signature of
Health Care Provider __________________________ Date ______________________ (mm/dd/yyyy)

Definitions of a Serious Health Condition (See 29 C.F.R. §§ 825.113-.115)

<table>
<thead>
<tr>
<th>Inpatient Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>• An overnight stay in a hospital, hospice, or residential medical care facility.</td>
</tr>
<tr>
<td>• Inpatient care includes any period of incapacity or any subsequent treatment in connection with the overnight stay.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Continuing Treatment by a Health Care Provider (any one or more of the following)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Incapacity Plus Treatment:</strong> A period of incapacity of more than three consecutive, full calendar days, and any subsequent treatment or period of incapacity relating to the same condition, that also involves either:</td>
</tr>
<tr>
<td>o Two or more in-person visits to a health care provider for treatment within 30 days of the first day of incapacity unless extenuating circumstances exist. The first visit must be within seven days of the first day of incapacity; or,</td>
</tr>
<tr>
<td>o At least one in-person visit to a health care provider for treatment within seven days of the first day of incapacity, which results in a regimen of continuing treatment under the supervision of the health care provider. For example, the health provider might prescribe a course of prescription medication or therapy requiring special equipment.</td>
</tr>
<tr>
<td><strong>Pregnancy:</strong> Any period of incapacity due to pregnancy or for prenatal care.</td>
</tr>
<tr>
<td><strong>Chronic Conditions:</strong> Any period of incapacity due to or treatment for a chronic serious health condition, such as diabetes, asthma, migraine headaches. A chronic serious health condition is one which requires visits to a health care provider (or nurse supervised by the provider) at least twice a year and recurs over an extended period of time. A chronic condition may cause episodic rather than a continuing period of incapacity.</td>
</tr>
<tr>
<td><strong>Permanent or Long-term Conditions:</strong> A period of incapacity which is permanent or long-term due to a condition for which treatment may not be effective, but which requires the continuing supervision of a health care provider, such as Alzheimer’s disease or the terminal stages of cancer.</td>
</tr>
<tr>
<td><strong>Conditions Requiring Multiple Treatments:</strong> Restorative surgery after an accident or other injury; or, a condition that would likely result in a period of incapacity of more than three consecutive, full calendar days if the patient did not receive the treatment.</td>
</tr>
</tbody>
</table>

**PAPERWORK REDUCTION ACT NOTICE AND PUBLIC BURDEN STATEMENT**

If submitted, it is mandatory for employers to retain a copy of this disclosure in their records for three years. 29 U.S.C. § 2616; 29 C.F.R. § 825.500. Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. The Department of Labor estimates that it will take an average of 15 minutes for respondents to complete this collection of information, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding this burden estimate or any other aspect of this collection information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S-3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

DO NOT SEND COMPLETED FORM TO THE DEPARTMENT OF LABOR. RETURN TO THE PATIENT.
FAMILY AND MEDICAL LEAVE ACT
FITNESS FOR DUTY CERTIFICATION

To be completed by employer:

Employer Contact: Dr. Keith P. Hubbard, Director of Human Resources

Employee’s Name: _________________________________________

Employee’s job title: _________________________________________

Check one:
Employee’s essential job functions are:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

A list of essential job functions is attached.
Job description is attached.

To be completed by Health Care Provider:

*Please limit responses to the condition for which the employee took FMLA leave.*

Provider’s name and business address: ____________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Type of practice/speciality: ______________________________________________________________
Telephone number: ____________________________ Fax number: ___________________________
I have reviewed the essential job functions for the position and certify that

__________________________________ (Employee’s name)

Is medically able to perform all essential functions of the position
Is medically unable to perform all essential functions of the position

If the employee is medically unable to perform one or more of the essential functions of the position, identify the job functions the employee is unable to perform.

_____________________________________________________________________________________
_____________________________________________________________________________________

I certify that __________________________________ (Employee’s name)

Is fit to return to full duty effective _________________ (date).
Is not fit to return to full duty until __________________ (date).

___________________________________________________________________________________

Signature of Health Care Provider   Date
APPLICATION FOR AN INITIAL VIRGINIA LICENSE
Temporary Form for use between May 2020 and December 31, 2020

(Application for a teaching license, Collegiate Professional License, Postgraduate Professional License, or Pupil Personnel Services License)

Thank you for your interest in obtaining a Virginia license. Please follow the application instructions and return all completed information in a single packet. If you are employed in a Virginia educational agency, please submit your completed application packet directly to the appropriate individual in your Virginia school division or Virginia accredited nonpublic school.

If an incomplete application packet is submitted or a license cannot be issued, your application will be retained for only one year. After that time, a new application must be submitted. An updated application must be on file at the time a license is issued.

CRITERIA FOR SUBMITTING AN APPLICATION FOR AN INITIAL LICENSE

Please refer to the Licensure Regulations for School Personnel on the Virginia Department of Education’s website for all requirements for a license.

You may submit an application for an initial Virginia license if you meet the criteria in at least one of the following:

- Have completed a state-approved preparation program, including student teaching or at the graduate level, a clinical practicum or internship. (If you have completed a Virginia approved program and are not employed by a Virginia school division or Virginia accredited nonpublic school, request that your application be submitted by the college or university or the Career Switcher program provider.)
- Hold an active, valid license from another state with no deficiencies with comparable endorsement(s) to those offered in Virginia.
- Are employed full-time as an educator under contract by a Virginia school division or a Virginia accredited nonpublic school. (Please submit your application directly to the Virginia employing school division or the Virginia accredited nonpublic school.)
- Are military personnel or veteran applying for a Virginia license.

IMPORTANT NOTICE

The submission of an application for a Virginia license or request for license renewal may result in the denial of a license for any reason listed in the Licensure Regulations for School Personnel, 8 VAC20-23-750. The denial of a license is an adverse licensure action that is reported to division superintendents in Virginia and to chief state school officers of the other states and territories of the United States and could affect the status of any license or certificate that the applicant holds in another state and/or the status of any application for a license or certificate that the applicant has submitted or may submit in another state. An individual will not be denied a license without being given the opportunity for a hearing as specified in the licensure regulations 8 VAC20-23-780c.
INSTRUCTIONS FOR APPLYING FOR AN INITIAL VIRGINIA LICENSE FOR TEACHERS, ADMINISTRATORS AND SUPERVISORS, AND PUPIL PERSONNEL SERVICES PERSONNEL

Please follow the instructions to assemble your application packet. Submit the application, including the forms and documents requested, in a single packet to the Office of Licensure, Virginia Department of Education, P.O. Box 2120, Richmond, Virginia 23218-2120.

Step 1: Application Form
Please respond to all questions on the application form. SIGN AND DATE BOTH PAGES OF THE APPLICATION. Original signatures with a current date are required. The applicant is responsible for notifying, in writing, the Office of Licensure of mailing address changes.

NOTICE: In accordance with § 63.2-1937 of the Code of Virginia, the Virginia Department of Education requires applicants for teacher licensure in Virginia to provide their Social Security numbers. Additionally, Virginia uses applicants’ Social Security numbers to check the clearinghouse maintained by the National Association of State Directors of Teacher Education and Certification (NASDTEC) for license revocation, cancellation, suspension, denial, and reinstatement in other states. Virginia also reports information to the clearinghouse as needed. The Virginia Department of Education will not release your Social Security number except to the NASDTEC clearinghouse to report cases of license revocation, cancellation, suspension, denial, and reinstatement as noted above. Please note that if you do not provide your Social Security Number, your application will not be processed and no Virginia teaching license will be issued.

NOTICE: The name and address of a person applying for or possessing a license may be disseminated pursuant to a request under Section 2.2-3802(5) of the Code of Virginia.

If you responded affirmatively to any of the questions in Part II of the application, a letter of explanation and requested documentation must be submitted.

PLEASE NOTE THAT THE FORMS MUST BE IN THE SAME FORMAT AS PROVIDED IN THIS PACKET. FOR EXAMPLE, THE FIRST PAGE OF THE APPLICATION CANNOT BE SPLIT INTO TWO PAGES.

Step 2: Nonrefundable Application Fee
The in-state fee is $100, and the out-of-state fee is $150. The fee is determined by the address on your application. Attach a certified check, cashier’s check, money order, or personal check made payable to the Treasurer of Virginia. A $50 processing fee is assessed for a check returned for any reason. Returned checks are subject to collection action.

Step 3: College Verification Form
If you have completed undergraduate and/or graduate state-approved preparation programs, the College Verification Form must be completed by the certification/licensure officer of the college or university where you completed each program. The student teaching/practicum/internship verification (Part III) must be completed for each student teaching/practicum/internship experience. If you hold an active out-of-state license (full credential without deficiencies) from another state and are seeking only endorsement(s) on that license comparable to endorsement(s) in Virginia, this form is not required.
Step 4: Report on Experience
This form must be completed by the appropriate official(s) at a public school division or accredited nonpublic school if you have completed at least one year of full-time contractual teaching or other contracted instructional school professional experience at a public or accredited nonpublic school.

Step 5: Professional Teacher’s Assessment Scores
Include a copy of the score reports for the Virginia licensure assessments taken and passed. Electronic scores sent to the Department from the testing companies are not always transferred; therefore, include copies of score reports. Please refer to the testing information on the Licensure website.

Section § 22.1-298.1 of the Code of Virginia states in part:

   K. The Board's licensure regulations shall also provide for licensure by reciprocity:

3. For individuals who have obtained a valid out-of-state license, with full credentials and without deficiencies, that is in force at the time the application for a Virginia license is received by the Department of Education. Each such individual shall establish a file in the Department of Education by submitting a complete application packet, which shall include official student transcripts. No service requirements or licensing assessments shall be required for any such individual.

Individuals who hold an active out-of-state license (full credential without deficiencies) in a state other than Virginia may be exempted from the professional teacher’s assessment requirements.

Step 6: Official Student Transcripts
Include official transcripts from all colleges and universities attended. Contact the registrar’s office of each college or university where you have earned a degree or completed coursework. Request official student transcripts to be sent to you, and submit the transcripts with your application packet. Official student transcripts that have been issued to students are acceptable. Do not have transcripts sent directly from the institution to this office.

Individuals who are seeking an educator license and who attended a college/university or earned a degree outside of the United States need to obtain an evaluation of their credentials conducted by one of the following agencies listed on the graduates of foreign institutes document. (If an individual took only coursework – not completed a degree – outside of the United States and it was transferred on an official transcript from a regionally accredited college or university listing the course titles and semester- or quarter-hour credits earned, the official transcript from the U.S. regionally accredited college or university is acceptable to document the courses.) To document degrees, the evaluation must include a statement regarding the equivalency of the program of study to a degree (such as baccalaureate degree or master’s degree) granted from a regionally accredited college or university in the United States. The evaluation also must include a listing of the courses completed and the semester-hour equivalent for each course. The evaluation may be accepted in lieu of an official transcript from the institution of higher education outside of the United States.

Some institutions contract with other companies to issue official transcripts. The transcripts may be accepted if received in sealed envelopes. Placement records sent from colleges, electronic transcripts, grade reports, PDFs, photocopies, and student printouts of transcripts will not be accepted or returned. Please do not have transcripts sent directly from the institution to the Office of Licensure.
Step 7: Out-of-state License(s)
Include a photocopy of each of your active out-of-state license(s), and any additional documentation received with the license(s), if applicable.

Step 8: Certification of Child Abuse and Neglect Recognition and Intervention Training
Include a copy of the certificate verifying completion of this statutory requirement. Individuals seeking initial licensure must complete study in child abuse and neglect recognition and intervention in accordance with curriculum guidelines approved by the Virginia Board of Education. A training module is available at no cost.
- Individuals must select the “Required Training/Courses” tab under the heading “Child Protective Services.”
- Then select the “Child Abuse and Neglect: Recognizing, Reporting, & Responding (for educators).”

To print the certificate after completing the training, the computer must be connected to a printer.

Step 9: Emergency First Aid, CPR (including Hands-on Practice), * and AED Training or Certification

*IMPORTANT NOTICE
(Flexibility provision for hands-on CPR due to the impact of COVID-19): Until January 1, 2021, any individual seeking an initial license or licensure renewal and who has completed all other components of training in emergency first aid, cardiopulmonary resuscitation, and the use of automated external defibrillators shall be relieved of the requirement to have hands-on practice of the skills necessary to perform cardiopulmonary resuscitation for the purpose of their licensure application (§ 22.1-298.1.D)
No special request needs to be submitted for the hands-on CPR waiver.

Include documentation verifying this statutory requirement has been met. Every person seeking initial licensure or renewal of a license shall provide evidence of completion of certification or training in emergency first aid, cardiopulmonary resuscitation, and the use of automated external defibrillators. The certification or training program shall be based on the current national evidence-based emergency cardiovascular care guidelines for cardiopulmonary resuscitation and the use of an automated external defibrillator, such as a program developed by the American Heart Association or the American Red Cross.

The following must be included on official documentation submitted to the licensure office by an individual:
- Individual’s full name.
- Title or description of training or certification completed that clearly indicates that all three components were included: 1) emergency first aid, 2) CPR, and 3) use of AEDs.
- Date the training or certification was completed.
- Signature and title of the individual providing the training or certification or a printed certificate from the organization or group that provided the training or certification. Legible copies of wallet-sized certification cards or other sized certifications, containing the above information, from organizations providing current national evidence-based emergency cardiovascular care for cardiopulmonary resuscitation and the use of an automated external defibrillator, such as a program developed by the American Heart Association or the American Red Cross will be accepted.

The Board has provided a waiver for this requirement for any person with a disability whose disability prohibits such person from completing the certification or training. An individual requesting a waiver must submit a “Request for a Waiver Form.”
Step 10: Dyslexia Awareness Training
Include a copy of the certificate verifying completion of this statutory requirement. Individuals seeking initial licensure shall complete awareness training on the indicators of dyslexia, as that term is defined by the Board pursuant to regulations, and the evidence-based interventions and accommodations for dyslexia. A dyslexia module is available at no cost. To print the certificate after completing the training, the computer must be connected to a printer.

Step 11: Applicable to Individuals Seeking an Initial License with Endorsement(s) in an Area of Career and Technical Education: Industry Certification Credential (Career and Technical Educators Only)
Individuals applying for an initial license with a career and technical education endorsement must include documentation verifying the industry credential statutory requirement has been met for the endorsement requested.

"Industry certification credential" means a career and technical education credential that is earned by successfully completing a Virginia Board of Education-approved industry certification examination, being issued a state professional license, or successfully completing an occupational competency examination. Please note that this requirement is in addition to all other licensure requirements for the endorsement you are seeking. For detailed information regarding 1) the teacher-eligible list of Board of Education-approved industry certification examinations, (2) the issuing organization, and (3) the specific career and technical (CTE) area(s), including the corresponding endorsement codes, refer to the Industry Credentials for Teachers Seeking an Initial Virginia License with Endorsement(s) in an Area of Career and Technical Education Guidance Document Word (Revised May 2019), Guidance Document (Word).

The Code of Virginia requires that a teacher seeking an initial license in the Commonwealth with an endorsement in the area of career and technical education shall have an industry certification credential in the area in which the teacher seeks endorsement. If a teacher seeking an initial license in the Commonwealth has not attained an industry certification credential in the area in which the teacher seeks endorsement, the Board may, upon request of the Virginia employing school division or Virginia accredited nonpublic school, issue the teacher a provisional license to allow time for the teacher to attain such credential.

A Provisional license only may be issued at the request of the Virginia employing school division or the Virginia accredited nonpublic school.

Step 12: Applicable to Individuals Seeking an Initial License with an Endorsement as a School Counselor: Training in the Recognition of Mental Health Disorder and Behavioral Distress (School Counselors Only)
Individuals seeking initial licensure with an endorsement as a school counselor must include verification of this statutory required training in the recognition of mental health disorder and behavioral distress, including depression, trauma, violence, youth suicide, and substance abuse. Refer to Superintendent’s Memo #313-17 for additional information on training options to meet this requirement.
APPLICATION FOR A VIRGINIA LICENSE (Page 1 of 2)

NONREFUNDABLE APPLICATION FEE (determined by the address provided below): $100 in-state fee; $150 out-of-state fee
Make checks payable to Treasurer of Virginia. The application fee is nonrefundable. A $50 fee is assessed for a returned check.

PART I: INFORMATION

<table>
<thead>
<tr>
<th>Social Security Number</th>
<th>Date of Birth (Month/Day/Year)</th>
<th>U.S. Military Veteran: ☐ Yes ☐ No</th>
<th>Reserves: ☐ Yes ☐ No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Branch:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
<th>Suffix</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address (Street, City, State, Zip Code) [Please note that the address provided is public information.]*</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Daytime Telephone Number (include area code)</th>
<th>Home Telephone Number (include area code)</th>
<th>Email Address</th>
<th>Gender (for statistical purposes only)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(  ) -</td>
<td>(  ) -</td>
<td></td>
<td>☐ Male ☐ Female</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Race (optional - for statistical purposes only - check one)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ 1. American Indian/Alaskan Native</td>
</tr>
<tr>
<td>☐ 2. Asian</td>
</tr>
<tr>
<td>☐ 3. Black (not of Hispanic origin)</td>
</tr>
<tr>
<td>☐ 4. Hispanic</td>
</tr>
<tr>
<td>☐ 5. White (not of Hispanic origin)</td>
</tr>
<tr>
<td>☐ 6. Native Hawaiian/ Pacific Islander</td>
</tr>
<tr>
<td>☐ 7. Non-Hispanic, two or more races</td>
</tr>
</tbody>
</table>

*ADDRESS CHANGE – The applicant must notify, in writing, the Office of Licensure, Department of Education, of an address change. Name and address of persons applying for a license) may be disseminated pursuant to a request under § 2.2-3802(5) of the Code of Virginia.

PART II: BACKGROUND QUESTIONS:

<table>
<thead>
<tr>
<th>Background Questions</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you ever been convicted of, or entered a plea of guilty or no contest to, a felony?</td>
<td>☐ Yes ☐ No</td>
<td></td>
</tr>
<tr>
<td>(If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever been convicted of, or entered a plea of guilty or no contest to, a criminal offense in another country?</td>
<td>☐ Yes ☐ No</td>
<td></td>
</tr>
<tr>
<td>(If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever been convicted of, or entered a plea of guilty or no contest to, a misdemeanor involving a child (minor) or a student?</td>
<td>☐ Yes ☐ No</td>
<td></td>
</tr>
<tr>
<td>(If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever been convicted of, or entered a plea of guilty or no contest to, a misdemeanor involving drugs (not alcohol)?</td>
<td>☐ Yes ☐ No</td>
<td></td>
</tr>
<tr>
<td>(If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever been the subject of a founded complaint of child abuse or neglect by a child protection agency?</td>
<td>☐ Yes ☐ No</td>
<td></td>
</tr>
<tr>
<td>(If yes, please attach a letter giving full details and official documentation of the founded complaint.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever had a teaching, administrator, pupil personnel services, or other education-related certificate or license revoked, suspended, invalidated, cancelled, or denied by another state, territory, or country; surrendered such a license or the right to apply for such a license; or had any other adverse action taken against such a license?</td>
<td>☐ Yes ☐ No</td>
<td></td>
</tr>
<tr>
<td>Please note: This includes a reprimand, warning, or reproof and any order denying the right to apply or reapply for a license. (If yes, please attach a letter giving full details and official documentation of the action taken.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are you currently the subject of any review, inquiry, investigation, or appeal of alleged misconduct that could warrant discipline or termination by a school division or other education-related employer or an adverse action against a teaching, administrator, pupil personnel services, or other education-related license or certificate?</td>
<td>☐ Yes ☐ No</td>
<td></td>
</tr>
<tr>
<td>Please note: This includes any open investigation by or pending proceeding with a child protection agency and any pending criminal charges. (If yes, please attach a letter giving full details and any official documentation available regarding the matter.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever left any education- or school-related employment, voluntarily or involuntarily, under any of the following circumstances: (1) while the subject of a review, inquiry, investigation, or appeal of alleged misconduct; (2) when you had reason to believe a review, inquiry, investigation or appeal of alleged misconduct was under way or imminent; or (3) while any administrative or judicial proceeding involving an allegation of misconduct was pending, eligible for appeal, or under appeal?</td>
<td>☐ Yes ☐ No</td>
<td></td>
</tr>
<tr>
<td>Please note: This includes any open investigation by or pending proceeding with a child protection agency and any pending criminal charges. (If yes, please attach a letter giving full details and any official documentation available regarding the matter.)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

BY MY SIGNATURE, I CERTIFY THAT THE INFORMATION ON THIS FORM IS ACCURATE AND COMPLETE. I UNDERSTAND THAT MISREPRESENTATION MAY RESULT IN THE DENIAL, REVOCATION, CANCELLATION, OR SUSPENSION OF THE VIRGINIA LICENSE.

Applicant’s Signature: Date:

The application is continued on the following page. Pages 1 and 2 each must include the applicant’s signature and date. A complete application must be submitted.
APPLICATION FOR A VIRGINIA LICENSE (page 2)

PART III: EDUCATION (Include colleges and universities where coursework was completed and degrees earned.)

<table>
<thead>
<tr>
<th>Name of Institution</th>
<th>Location</th>
<th>Dates Attended (Month/Year to Month/Year)</th>
<th>Degree (if earned)</th>
<th>Major/Major Subjects</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

PART IV: EXPERIENCE (Grades PreK-12 only—full-time, contractual experience only. Do not include substitute, summer school, or aide experience.)

<table>
<thead>
<tr>
<th>Name of School Division or Accredited Nonpublic School</th>
<th>Location</th>
<th>Dates of Employment (Month/Year to Month/Year)</th>
<th>Grade(s)/Subject(s) Taught</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

PART V: OUT-OF-STATE EDUCATIONAL LICENSE, IF APPLICABLE – (Enclose a photocopy of each license.)

<table>
<thead>
<tr>
<th>State:</th>
<th>First issue date: (Month/Day/Year)</th>
<th>Last expiration date: (Month/Day/Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

PART VI: COMPLETE IF YOU HAVE ACCEPTED A POSITION IN VIRGINIA REQUIRING A LICENSE

<table>
<thead>
<tr>
<th>Name of Employer</th>
<th>Beginning Date of Employment (Month/Day/Year)</th>
<th>Assignment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

BY MY SIGNATURE, I CERTIFY THAT THE INFORMATION ON THIS FORM IS ACCURATE AND COMPLETE. I UNDERSTAND THAT MISREPRESENTATION MAY RESULT IN THE DENIAL, REVOCATION, CANCELLATION, OR SUSPENSION OF THE VIRGINIA LICENSE.

Applicant's Signature: ___________________________ Date: __________

ORIGINAL SIGNATURE REQUIRED MONTH/DAY/YEAR

Pages 1 and 2 must each include the applicant’s signature. A complete application must be submitted.

(Application Page 2 of 2)
The purpose of this form is to determine whether an applicant for licensure has completed a state-approved preparation program at the undergraduate or graduate level. In these cases, the form must be completed by the appropriate certification/licensure official of the college/university where the program has been completed. The completed form must be submitted to this office by the applicant along with other items required for licensure or to the Virginia school administrator with whom the applicant has accepted employment.

**PART I:**

<table>
<thead>
<tr>
<th>Social Security Number</th>
<th>Date of Birth (Month/Day/Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
<th>Suffix</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address (Street, City, State, Zip Code)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Institution</th>
<th>Degree Earned</th>
<th>Date of Degree Conferral (Month/Day/Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**PART II: Please check the appropriate response:**

☐ YES ☐ NO  

By my signature I certify that the applicant satisfactorily completed a state-approved preparation program and completed endorsements (teaching, administration and supervision or pupil personnel services) in the following areas:

Endorsements: ____

**PART III: Student Teaching, Internship, and/or Practicum Experience (Use line D for Special Education Experience):**

Course Title: __________

Course Number: __________  

Clock Hours: __________

A. High School grade(s): __________

B. Elementary grade(s): __________

C. Special subject area(s) & Grade level:  Subject (e.g., Visual Art, Health and P.E.): __________  

Grade level(s): __________

D. Special education specific area(s)* and grade level(s) __________

*Please specify the exact nature of the exceptional child (children) included in the student teaching/practicum experience.

**PART IV: To be completed by Virginia colleges and universities only:**

If I am signing as a Virginia college or university representative, my signature below certifies that the individual has met the following requirements checked below:

☐ Child abuse and neglect recognition and intervention training;

☐ Certification or training in emergency first aid, CPR, and the use of AED; [Note: Hands-on CPR only has been waived until January 1, 2021.]

☐ Dyslexia training; and

☐ School counselors training (if applicable).

Requisite to compliance with the licensure regulations established by the Virginia Board of Education are the following conditions: the applicant must be at least 18 years of age and must possess good moral character. By my signature, I certify on the basis of my information and belief that the applicant possesses good moral character.

SIGNATURE: __________  

DATE: __________

NAME: __________  

PHONE NUMBER: ( ) - __________

TITLE: __________  

INSTITUTION: __________

STREET ADDRESS (STREET, CITY, STATE, ZIP): __________

EMAIL ADDRESS: __________
# REPORT ON EXPERIENCE

**DIRECTIONS:** A report verifying experience must be completed by the appropriate public school division or accredited nonpublic school official if the applicant for initial licensure has had a total of at least one year of full-time, contractual teaching experience or held other professional positions in a public school or accredited nonpublic school. The completed form must be submitted to this office by the applicant along with all other items required for licensure or to the Virginia school administrator with whom the applicant has accepted employment.

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
<th>Suffix (Jr., Sr., III)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Social Security Number - - or Virginia License # - -</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address of Applicant (Street or P. O. Address)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State, Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF PUBLIC SCHOOL OR ACCREDITED NONPUBLIC SCHOOL</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Please report only full-time, contractual teaching experience in a public or accredited nonpublic school. Experience as a substitute teacher or aide should not be listed.)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>POSITION HELD</th>
<th>GRADE LEVEL AND SPECIFIC SUBJECT TAUGHT</th>
<th>LENGTH OF SERVICE (MONTH/YEAR TO MONTH/YEAR)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total number of years of full-time teaching experience:** [ ]

**Total number of years of full-time experience in administration and/or supervision:** [ ]

**Total number of years of full-time experience in a pupil personnel services area (school counselor, psychologist, social worker, vocational evaluator):** [ ]

**By my signature, I verify that the above-named person was successfully employed full-time, under contract in the public schools or accredited nonpublic school(s) and for the period(s) listed above.**

<table>
<thead>
<tr>
<th>SIGNATURE:</th>
<th>DATE (Month/Day/Year):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME:</th>
<th>PHONE NUMBER: -</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TITLE:</th>
<th>EMAIL ADDRESS:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DIVISION/ACCREDITED NONPUBLIC SCHOOL:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ADDRESS (STREET, CITY, STATE, ZIP):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>EMAIL ADDRESS:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>
APPLICATION FOR LICENSE RENEWAL
Virginia Department of Education
Department of Teacher Education and Licensure
P. O. Box 2120 • Richmond, VA 23218-2120

Please submit a complete application with supporting credentials. The renewal fee is $50. There is a $50 fee for a returned check. 

Make checks payable to Treasurer of Virginia. The fee is nonrefundable. All three pages must be submitted.

PART I: INFORMATION

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
<th>Suffix</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date of Birth (Month/Day/Year)</th>
<th>Virginia License # or Social Security #</th>
<th>Renewal Year</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Address (Street, City, State, Zip Code) [Please note that the address provided is public information.]</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Daytime Telephone Number (include area code)</th>
<th>Home Telephone Number (include area code)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Virginia Employing School Division or Accredited Nonpublic School (if applicable)</th>
</tr>
</thead>
</table>

*ADDRESS CHANGE - THE APPLICANT MUST NOTIFY THE OFFICE OF LICENSURE, DEPARTMENT OF EDUCATION, IN WRITING OF AN ADDRESS CHANGE. Name and address (of persons applying for a license) may be disseminated pursuant to a request under § 2.2-3802(5) of the Code of Virginia.*

PART II: BACKGROUND QUESTIONS:

<table>
<thead>
<tr>
<th>Background Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you ever been convicted of, or entered a plea of guilty or no contest to, a felony? (If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court.)</td>
<td>□ Yes □ No</td>
<td></td>
</tr>
<tr>
<td>Have you ever been convicted of, or entered a plea of guilty or no contest to, a criminal offense in another country? (If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court.)</td>
<td>□ Yes □ No</td>
<td></td>
</tr>
<tr>
<td>Have you ever been convicted of, or entered a plea of guilty or no contest to, a misdemeanor involving a child (minor) or a student? (If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court.)</td>
<td>□ Yes □ No</td>
<td></td>
</tr>
<tr>
<td>Have you ever been convicted of, or entered a plea of guilty or no contest to, a misdemeanor involving drugs (not alcohol)? (If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court.)</td>
<td>□ Yes □ No</td>
<td></td>
</tr>
<tr>
<td>Have you ever been the subject of a founded complaint of child abuse or neglect by a child protection agency? (If yes, please attach a letter giving full details and official documentation of the founded complaint.)</td>
<td>□ Yes □ No</td>
<td></td>
</tr>
<tr>
<td>Have you ever had a teaching, administrator, pupil personnel services, or other education-related certificate or license revoked, suspended, invalidated, cancelled, or denied by another state, territory, or country; surrendered such a license or the right to apply for such a license; or had any other adverse action taken against such a license? Please note: This includes a reprimand, warning, or reproval and any order denying the right to apply or reapply for a license. (If yes, please attach a letter giving full details and official documentation of the action taken.)</td>
<td>□ Yes □ No</td>
<td></td>
</tr>
<tr>
<td>Are you currently the subject of any review, inquiry, investigation, or appeal of alleged misconduct that could warrant discipline or termination by a school division or other education-related employer or an adverse action against a teaching, administrator, pupil personnel services, or other education-related license or certificate? Please note: This includes any open investigation by or pending proceeding with a child protection agency and any pending criminal charges. (If yes, please attach a letter giving full details and any official documentation available regarding the matter.)</td>
<td>□ Yes □ No</td>
<td></td>
</tr>
<tr>
<td>Have you ever left any education- or school-related employment, voluntarily or involuntarily, under any of the following circumstances: (1) while the subject of a review, inquiry, investigation, or appeal of alleged misconduct; (2) when you had reason to believe a review, inquiry, investigation or appeal of alleged misconduct was under way or imminent; or (3) while any administrative or judicial proceeding involving an allegation of misconduct was pending, eligible for appeal, or under appeal? Please note: This includes any open investigation by or pending proceeding with a child protection agency and any pending criminal charges. (If yes, please attach a letter giving full details and any official documentation available regarding the matter.)</td>
<td>□ Yes □ No</td>
<td></td>
</tr>
</tbody>
</table>

PART III: SIGNATURE AND VERIFICATION OF RENEWAL ACTIVITIES:

BY MY SIGNATURE, I CERTIFY THAT THE INFORMATION ON THIS FORM IS ACCURATE AND COMPLETE. I UNDERSTAND THAT MISREPRESENTATION MAY RESULT IN THE DENIAL, REVOCATION, CANCELLATION, OR SUSPENSION OF THE VIRGINIA LICENSE.

<table>
<thead>
<tr>
<th>Applicant’s Signature:</th>
<th>Date:</th>
</tr>
</thead>
</table>

ORIGINAL SIGNATURE REQUIRED MONTH/DAY/YEAR

The application is continued on the following page. Pages 1, 2 and 3 each must include the applicant’s signature and date.

A complete application must be submitted.

(Page 1 of 3)
## Part IV-Individualized Renewal Record

### Summary of Points Earned During the Past Five Years to be Credited Toward Renewal:

<table>
<thead>
<tr>
<th>Option</th>
<th>Maximum Points</th>
<th>Points Earned</th>
<th>Virginia License #</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>(180)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>(45)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>(90)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>(90)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>(90)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>(90)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>(90)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>(180)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Credit for All Options: __________  

#### Required for individuals employed by a Virginia educational agency:

**Division or Accredited Nonpublic School:**  
**Advisor’s Name:** (Please print/type)  
**Title:**

Advisor’s Signature: ___________________________  Date: ___________________________

I recommend the renewal of the Virginia license and certify that the above-named license holder completed the listed activities and that these activities comply with Virginia’s renewal regulations.

**Superintendent’s or Designee’s Name:** (Please print/type)  
**Title:**

Superintendent’s or Designee’s Signature: ___________________________  Date: ___________________________

### Verification of Completed Activities

<table>
<thead>
<tr>
<th>Activity Points</th>
<th>Applicant Initials</th>
<th>Advisor Initials</th>
<th>Date</th>
</tr>
</thead>
</table>
| **Option 1:** College Credit (180)  
Course No./Title  
College/Year Taken |
| **Option 2:** Professional Conference (45)  
Name  
Dates Attended |
| **Option 3:** Curriculum Development (90)  
Title  
Dates |

**BY MY SIGNATURE, I CERTIFY THAT THE INFORMATION ON THIS FORM IS ACCURATE AND COMPLETE. I UNDERSTAND THAT MISREPRESENTATION MAY RESULT IN THE DENIAL, REVOCATION, CANCELLATION, OR SUSPENSION OF THE VIRGINIA LICENSE.**

Applicant’s Signature: ___________________________  Date: ___________________________

**ORIGINAL SIGNATURE REQUIRED**  MONTH/DAY/YEAR

---

The application is continued on the following page. Pages 1, 2 and 3 each must include the applicant’s signature and date.  
A complete application must be submitted.

*(Page 2 of 3)*
### Verification of Completed Activities

<table>
<thead>
<tr>
<th>Activity Points</th>
<th>Applicant Initials</th>
<th>Advisor Initials</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Option 4: Publication of Article (90)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Title</td>
<td>Magazine</td>
<td>Date Published</td>
<td></td>
</tr>
<tr>
<td><strong>Option 5: Publication of Book (90)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Title</td>
<td>Publisher</td>
<td>Date Published</td>
<td></td>
</tr>
<tr>
<td><strong>Option 6: Mentorship/Supervision (90)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Person</td>
<td>Date Supervised</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Option 7: Educational Project (90)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Title</td>
<td>Dates</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Option 8: Professional Development Activities (180)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Project/Title</td>
<td>Dates</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**BY MY SIGNATURE, I CERTIFY THAT THE INFORMATION ON THIS FORM IS ACCURATE AND COMPLETE. I UNDERSTAND THAT MISREPRESENTATION MAY RESULT IN THE DENIAL, REVOCATION, CANCELLATION, OR SUSPENSION OF THE VIRGINIA LICENSE.**

Applicant’s Signature: ___________________________ Date: __________/_____/______

ORIGINAL SIGNATURE REQUIRED MONTH/DAY/YEAR

The application is continued on the following page.
Pages 1, 2 and 3 each must include the applicant’s signature and date.
A complete application must be submitted.

(Page 3 of 3)