

Grandview ISD

Receipt of Benefits Information

SY 2018-2019

I have been given the benefits information from Grandview ISD and understand it is my responsibility to contact the Benefits Coordinator for enrollment forms.

This signed notice will stand as proof that benefits were offered to me as an employee of Grandview Independent School District.

Signature

Date

Printed Name

Please sign and return to your campus Secretary by August 24th.

Employee Handbook Receipt

Name

Campus/Department

I hereby acknowledge receipt of a copy of the Grandview ISD Employee Handbook. I agree to read the handbook and abide by the standards, policies, and procedures defined or referenced in this document.

Employees have the option of receiving the handbook in electronic format or hard copy.

Online at www.gvisd.org

Please indicate your choice by checking the appropriate box below:

- I choose to receive the employee handbook in electronic format and accept responsibility for accessing it according to the instructions provided.
- I choose to receive a hard copy of the employee handbook.

The information in this handbook is subject to change. I understand that changes in district policies may supersede, modify, or render obsolete the information summarized in this book. As the district provides updated policy information, I accept responsibility for reading and abiding by the changes.

I understand that no modifications to contractual relationships or alterations of at-will employment relationships are intended by this handbook.

I understand that I have an obligation to inform my supervisor or department head of any changes in personal information such as phone number, address, etc. I also accept responsibility for contacting my supervisor or the Superintendent's Secretary if I have questions or concerns or need further explanation.

Signature

Date

Please sign and date this receipt and forward it to the Superintendent's Secretary.

Exhibit 1A

**Texas Education Agency
Texas Public School Student/Staff Ethnicity and Race Data Questionnaire**

The United States Department of Education (USDE) requires all state and local education institutions to collect data on ethnicity and race for students and staff. This information is used for state and federal accountability reporting as well as for reporting to the Office of Civil Rights (OCR) and the Equal Employment Opportunity Commission (EEOC).

School district staff and parents or guardians of students enrolling in school are requested to provide this information. If you decline to provide this information, please be aware that the USDE requires school districts to use observer identification as a last resort for collecting the data for federal reporting.

Please answer both parts of the following questions on the student's or staff member's ethnicity and race. *United States Federal Register (71 FR 44866)*

Part 1. Ethnicity: Is the person Hispanic/Latino? (Choose only one)

- Hispanic/Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- Not Hispanic/Latino**

Part 2. Race: What is the person's race? (Choose one or more)

- American Indian or Alaska Native** - A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.
- Asian** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African American** - A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander** - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White** - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

_____ Student/Staff Name (please print)

_____ (Parent/Guardian)/(Staff) Signature

_____ Date

Student/Staff Identification Number

This space reserved for Local school observer – upon completion and entering data in student software system, file this form in student's permanent folder.

Ethnicity – choose only one:

- _____ Hispanic / Latino
- _____ Not Hispanic/Latino

Race – choose one or more:

- _____ American Indian or Alaska Native
- _____ Asian
- _____ Black or African American
- _____ Native Hawaiian or Other Pacific Islander
- _____ White

Observer signature:

Campus and Date:

Exhibit 1B

Agencia de Educación de Texas

Cuestionario de Información de Datos Raciales y de Etnicidad de Estudiantes/Miembros de Personal de las Escuelas Públicas de Texas

El Departamento de Educación de Estados Unidos (USDE) requiere que todas las instituciones estatales y locales de educación, recopilen datos sobre etnicidad y raza de los estudiantes y de miembros de personal. Esta información es utilizada para los reportes estatales y federales así como para reportar a la Oficina de Derechos Civiles (OCR) y a la Comisión de Igualdad en el Empleo (EEOC).

Al personal del distrito escolar y los padres o representante legal de estudiantes que deseen matricularse en la escuela, se le requiere proporcionar esta información. Si usted rehúsa proporcionarla, es importante que sepa que el USDE requiere que los distritos escolares usen la observación para identificación como último recurso para obtener estos datos utilizados para reportes federales.

Favor de contestar ambas partes de las siguientes preguntas sobre la etnicidad y raza del estudiante así como del miembro de personal. Registro Federal de Estados Unidos (71 FR 44866).

Parte 1. Etnicidad: ¿Es la persona Hispana/Latina? (Escoja solo una respuesta)

- Hispano/Latino** – Una persona de origen cubano, mexicano, puertorriqueño, centro o sudamericano o de otra cultura u origen español, sin importar la raza.
- No Hispano/Latino**

Parte 2. Raza. ¿Cuál es la raza de la persona? (Escoja uno o más de uno)

- Indio Americano o Nativo de Alaska** – Una persona con orígenes o de personas originarias de Norte y Sudamérica (incluyendo América Central), y que mantiene lazos o apego comunitario con una afiliación de alguna tribu.
- Asiático** – Una persona con orígenes o de personas originarias del Lejano Este, Sureste de Asia o el subcontinente indio, incluyendo, por ejemplo a Cambodia, China, India, Japón, Corea, Malasia, Pakistán, las Islas Filipinas, Tailandia y Vietnam.
- Negro o Africano-Americano** – Una persona con orígenes de cualquier grupo racial negro de África.
- Nativo de Hawai u otras islas del pacífico** – Una persona con orígenes o de personas originarias de Hawai, Guam, Samoa u otras Islas del Pacífico.
- Blanco** – Una persona con orígenes de personas originarias de Europa, el Medio Este o el Norte de África.

Nombre del Estudiante/Miembro de Personal
(por favor use letra de imprenta)

Firma (Padre/Representante legal)
/(Miembro de personal)

Número de Identificación del
Estudiante/Miembro del personal

Fecha

This space reserved for Local school observer – upon completion and entering data in student software system, file this form in student's permanent folder.

Ethnicity – choose only one:
 Hispanic / Latino
 Not Hispanic/Latino

Race – choose one or more:
 American Indian or Alaska Native
 Asian
 Black or African American
 Native Hawaiian or Other Pacific Islander
 White

Observer signature:

Campus and Date:

Public Access Notification: The Texas Public Information Act

Periodically, the public requests information concerning District employees. The Public Information Act requires the District to release information regarding name, salary, dates of employment, title, sex, ethnicity, certificates, employment contract, degrees, etc. to the public since this type of information is considered public information. Information related to taxes, benefits, criminal history, medical information, and the employee's evaluation is generally not available for public release since these types of information are considered personal and private under Texas law. Other personal information such as the employee's home address, telephone number, and information that reveals whether they have family members must be disclosed under the Public Information Act unless the employee elects to keep this information private.

Employees must elect within 14 days of employment to keep this information private or they may choose to open or close access to this information at any time by submitting a written statement to the Personnel Office. Note that your Social Security number is specifically protected from disclosure under the Texas Public Information Act, Section 552.147. If you do not elect to keep your home address, telephone numbers, and family member information confidential, it must be disclosed if requested under the Texas Public Information Act

Employee Information

Name _____

Last 4 digits of SSN _____

Home Address _____

Home Phone Number _____

Election to Close or Open Public Access

____ I elect to **close** public access to my home address, telephone number, social security number and information on family members.

____ I elect to **open** access to my home address, telephone number, social security number and information on family members.

Signature

Date

Please sign and return to your campus Secretary.

Grandview ISD

Sick Leave Bank

SY 2018-2019

The purpose of the Sick Leave Bank (SLB) is to provide additional sick leave days to members of the bank in the event of an unexpected, extended illness, surgery, or a temporary disability due to an injury. Days may be requested from the bank only after the member has exhausted all accumulated state and local leave.

Contribution of Days

To become a member of the bank, a full time employee must contribute one day minimum or two day's maximum from his / her accrued, or to be earned this year's, state sick leave.

- A. These days will be subtracted from the member's state sick leave.
- B. The days donated to SLB becomes the property of Grandview ISD
- C. For the purpose of the bank the school year will be September 1 through August 31. If a member leaves the employment of Grandview ISD, their eligibility to draw from the bank, will end with the last day of employment or resignation.
- D. A member must contribute to the SLB within the first two weeks of the school year or first two weeks of employment at GVISD.
- E. If a person chooses to leave the SLB, their days contributed remain the property of Grandview ISD.

Yes, I would like to participate in the GVISD Sick Leave Bank. I understand the procedure for enrollment and authorize GVISD to deduct from my state personal leave balance as stated above.

No, I would not like to participate in the GVISD Sick Leave Bank.

Signature

Date

Printed Name

Please sign and return to your campus Secretary.

Grandview ISD

Direct Deposit Authorization

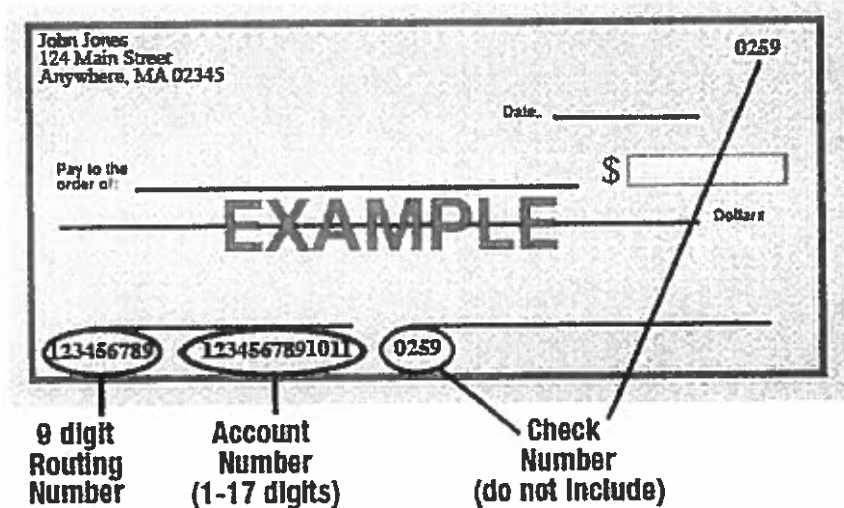
SY 2018-2019

To enroll in Direct Deposit, simply fill out this form and attach a voided check for your applicable checking account - not a deposit slip.

Name: _____

Address: _____

City, State, Zip: _____



Name of Bank: _____

Account #: _____

9-Digit Routing #: _____

Type of Account: Checking Savings (Circle One)

Please attach a voided check to which funds should be deposited.

GVISD is hereby authorized to directly deposit my pay to the account listed above. This authorization will remain in effect until I modify or cancel it in writing.

Signature

Date

Printed Name

2018 - 2019 ACCEPTABLE USE POLICY FOR STAFF MEMBERS

1. As a staff member of Grandview ISD, I understand that the use of computer equipment, software or data and access to the network or Internet is a privilege for the responsible - not a right for the employed.
2. Staff members in whose name an account is issued will be responsible for its proper use and shall not let others use their username and password including their own children. A password protected screen saver or screen lock to protect against unauthorized use of email, gradebook or personal files should be used.
3. Staff will ensure that students observe the *Acceptable Use Policy for Students*.
4. Electronic media (text or instant messaging, email, blogs, chat rooms, social network and video sharing sites, cell phones, web applications) shall only be used as an educational tool in a documented class project. Personal social network pages may not be updated using district equipment nor on district time. Please read the *Employee Handbook* for more details on use of electronic media.
5. I understand my use of the Internet should only be used to meet educational requirements and is not provided for my personal entertainment, checking personal email accounts, or using Internet radio.
6. I will not download software, audio, video or data which violates copyright laws. All users are expected to follow existing copyright laws.
7. I will not take home technology equipment (hardware or software) without written permission of a principal and superintendent or designee. *TEC §31.104 amended by SB 370*
8. I will not intentionally view on the computer system inappropriate material that originates from any source, whether it is stored on removable firmware, network drives or the Internet. Although Internet is filtered to block unacceptable sites, some pages may still contain inappropriate material until it can be blocked. It is my responsibility to exit the page and contact the technology personnel immediately.
9. Electronic mail transmissions and other electronic communication systems will be used only for educational or administrative purposes and shall not be considered private since they are available to anyone under the Open Records Act. All incoming and outgoing emails are archived under requirements of law.
10. Personal information on students sent by email should have *Confidential* in the subject line.
11. Since email access is provided for school business, do not forward messages that have no educational or professional value. Emails such as chain letters, hoaxes, or inspirational messages should be deleted, and the sender notified that those messages are not appropriate to receive on your district email account. Employees should not use email to advertise personal items (post on bulletin boards in campus workrooms).
12. I understand that information I receive or store on the network becomes the property of Grandview ISD and may be monitored by district personnel who have the right to remove material considered inappropriate or abuses available network space. Violation of the privilege of using the technology tools and Internet will result in consequences based on district policies and procedures and could include criminal prosecution under state law (Texas Penal Code, Computer Crimes, Chapter 33). The district will cooperate fully with local, state, or federal officials in any investigation concerning or relating to misuse of the computer system.

Please review the *Acceptable Use of Technology guidelines* available on www.gvisd.org – District Info – Policies and Procedures.

NAME PRINTED _____ DATE _____

First, Middle Initial, Last

SIGNATURE _____

CAMPUS _____