

MEMORANDUM

TO: PRINCIPALS

VIA: Vicki Reynolds
Chief Human Resource Officer

FROM: Andrew McCrimmon
Director
HR Employee Support

SUBJECT: **OPTIONAL and RESCIND PAY ELECTION FORMS**

DATE: May 12, 2011

Principals should inform all current eligible employees that the enrollment period for Optional Pay is now open through **June 14, 2011**. Please refer to the two attached forms which should be duplicated and made available to your staff. The **OPTIONAL PAY ELECTION FORM** is to be completed by those employees who wish to prorate their pay and extend their compensation over the number of checks stated on the election form for their employee group. **Employees who are already on the optional pay plan DO NOT need to return this form. Only those employees who are on regular pay and elect to change to optional pay need to submit the form.** The **RESCIND OPTIONAL PAY ELECTION FORM** should be submitted only by those employees who wish to rescind their optional pay election. Submission of the Rescind Form will result in the employee reverting back to regular pay (22 checks).

Once a plan is elected, it is continuous from one school year to the next, and can only be changed in writing via the appropriate form during the first week of the employee's work calendar in any subsequent year.

Should you have questions, please contact HR Employee Support at 390-2080.

OPTIONAL PAY PLAN ELECTION

Please Print

Employee _____
Last Name First Name M.I.

Personnel Number _____

Org Unit (RC) _____

Employee Group (check one):

- ____ teacher/administrator, 10 months (26 checks)
- ____ civil service, 10 months (24 checks)
- ____ civil service, 11 months (26 checks)
- ____ food service manager, 10 months (25 checks)
- ____ food service worker, 10 months (24 checks)
- ____ paraprofessional (25 checks)

I hereby elect the optional pay plan effective the **2011/2012** school year. I understand this plan prorates my pay to extend compensation over the number of checks stated above (regular pay is 22 checks). I also understand that once elected, this plan is continuous from school year to school year and ***cannot be changed except during the first week of the work calendar in any subsequent year when I must specifically cancel my elected option in writing.***

Should I elect leave, I understand that any compensation held by the School Board will be paid to me in a lump-sum payment and that upon my return the elected optional plan will revert to the regular pay plan. I cannot return to the optional plan unless I elect to do so during a subsequent school year.

Current Employees: HR Employee Support must receive this form by June 14, 2011

New Hires: HR Employee Support must receive this form by August 19, 2011

Employee Signature Date

Human Resource Technician Date

Return to:

HR Employee Support : 1701 Prudential Drive Administration Bldg. 1st Floor

