

SUBSTITUTES

Welcome to Trussville City Schools!

In payroll, we need your assistance in completing paperwork to set up your paycheck. Please type with proper capitalization completing the following few fields below which will complete almost all of your forms for you. You will then print the forms and complete the remaining blanks with your tax withholding selections. Print on white paper and bring all pages with you. Please only print single sided and do not print double sided.

We will make a copy of your driver's license and social security card.

Thank you for your assistance.

First name ONLY (as shown on your SS card)

Middle INITIAL(as shown on your SS card)

Last name (as shown on your SS card)

Date of Birth

Social Security Number

Mailing street

City

State

Zip

Telephone

School Location

Position

Trussville City Schools

113 North Chalkville Road, Trussville, AL 35173

Only completed packages will be accepted. Packages are accepted in person at the TCS payroll office.

SUBSTITUTES

All persons interested in working for the Trussville City School System will need to provide the following items:

- Coversheet Checklist (this sheet)
- Application Completed
- Copy of Current Alabama Teacher Certification or graduate letter of completion and college transcripts.
- Substitute Teacher's License Application package with receipt of payment if applying for new substitute or renewal license and does not hold a current unexpired Alabama Teacher Certification. A copy of receipt from fingerprinting location visit required as a new background review. If previously employed by an Alabama Public System, in most cases, the background and fingerprinting is not required again.
- Substitute Nurses will not need a Substitute License if NOT working as a substitute teacher and only as a nurse substitute. A copy of current RN card is required for substitute nurses.
- Social Security Card (original card – no copies accepted)
- Driver's License (original, NON-expired – no copies accepted)
- Information Data Sheet (page you typed information on)
- Employment Eligibility Verification Form – I-9
- Direct Deposit Form with voided check (with your name and address on check or memo from bank/credit union)
- W-4 Form Federal Tax Withholding Form
- A-4 Form State Tax Withholding Form
- FERPA Form
- Confidentiality and Privacy Form
- Receipt of Insurance Marketplace Coverage Options
- Emergency Preparedness Form
- ADA/AA Voluntary Request for Accommodations Offering
- Technology Agreement
- TB Test Reminder Page
- **Substitute cafeteria workers** – contact CNP Supervisor for additional health and food handler requirements
- **Substitute bus drivers and bus aides** – addendum received from the transportation department

Substitute Teacher Application

For substitute applicants **who hold a current Alabama teaching certificate**: Complete pdf package, print, sign, and return complete package to the substitute orientation workshop. A copy of the current Alabama teaching certificate is required. A cogent/background registration is not required. Please follow the checklist to make sure all necessary items are completed.

For substitute applicants **with a graduate letter of completion from their school for which an Alabama teaching certificate has not been issued by the state but is in process**: Complete pdf package, print, sign, and return complete package to the substitute orientation workshop. A copy of the letter of completion from the school is required. A cogent/background registration is not required if previously completed by enrolled school. A substitute license is not required as long as there is not a delay in teacher certification being issued. Please follow the checklist to make sure all necessary items are completed.

For substitute applicants **with an out of state teaching certification, expired Alabama teaching certificate, four year degree, or RN license**: Complete pdf package, print, sign, and return complete package to the substitute orientation workshop. Additionally, a substitute license application must be completed and copy of online payment for application. The substitute license application must be completed for the state which will be provided by our office for you to complete. Please contact our office for assistance with this process.

The link to online payment system is <https://www.alabamainteractive.org/education/>.

Additionally, the applicant needs to register with Cogent (sheet in packet) paying for a background review and then visit a convenient location to have fingerprints scanned after they have verified that a background has not been completed as per <https://tcert.alsde.edu/Portal/Public>. The link to Cogent is https://www.aps.gemalto.com/al/index_adeNew.htm and it also requires payment online. Please follow the checklist to make sure all necessary items are completed.

ALABAMA STATE DEPARTMENT OF EDUCATION
 EDUCATOR CERTIFICATION SECTION

Telephone: (334) 694-4557



This section must be completed by the employing Alabama school system or nonpublic/private school.

School System Code: _____

Nonpublic/Private School Code: _____

APPLICATION FOR A SUBSTITUTE LICENSE

The employing county/city superintendent or administrator of an eligible nonpublic/private school will submit this form directly to the Educator Certification Section.

The applicant CANNOT submit this application to the Educator Certification Section.

This application is to be completed for individuals seeking *initial issuance or reissuance* of a Substitute License. **Application forms and supporting documents are not accepted by fax or e-mail.** An individual holding a valid Substitute License may serve as a substitute teacher in any Alabama public or nonpublic/private school.

THE COUNTY/CITY SUPERINTENDENT OR NONPUBLIC/PRIVATE SCHOOL ADMINISTRATOR COMPLETES:

I am requesting this Substitute License for _____
 First Middle/Maiden Last

I have verification of graduation from high school or the completion of an Alabama State Department of Education approved equivalent on file for the above applicant. I understand that a certificate of attendance will not meet this requirement. I understand that this Substitute License, for use in the schools of Alabama, cannot be used as the basis for employing a full-time teacher and that the Substitute License will not be issued until the applicant has received background clearance.

 School System/Nonpublic/Private School

 Date

 Signature of Superintendent/Nonpublic/Private School Administrator

 Typed or Printed Name

Application Fee REQUIRED

A **\$30.00 NONREFUNDABLE application fee is required.** The fee must be paid by cashier's check or money order made payable to the Alabama State Department of Education or through the Alabama State Department of Education Educator Certification Online Payment System, with a major credit card, at www.alabamainteractive.org/education (a \$4.00 transaction fee will be applied). **Personal checks or cash will not be accepted.** The cashier's check, money order, or copy of the receipt verifying the confirmation number for the online payment must accompany this application.

Background Check REQUIRED

Applicants for initial certification, additional certification, and certificate renewal **who have not been cleared** by both the Alabama State Bureau of Investigation (ASBI) and Federal Bureau of Investigation (FBI) through the Educator Certification Section of the Alabama State Department of Education (ALSDE) are required to be fingerprinted for a criminal history background check through the ASBI and FBI. Instructions regarding the fingerprinting process through Gemalto Cogent may be obtained at https://www.aps.gemalto.com/al/index_adeNew.htm or by calling (866) 989-9316 (toll free). Applicants may verify whether their ASBI and FBI criminal history background checks have been completed and whether they are suitable and fit to teach under state law at <https://tcert.alsde.edu/Portal>.

APPLICANT COMPLETES: The purpose for submission of this form is:

- Issuance of my first Substitute License **OR**
- Reissuance of my Substitute License. A Substitute License **cannot** be reissued until the year it expires. Initial here _____ to confirm that <https://tcert.alsde.edu/Portal/Public> has been checked to verify that the Substitute License expires this year or has already expired.

APPLICANT COMPLETES: PERSONAL DATA (TYPE OR PRINT LEGIBLY, USING BLACK INK, WHEN COMPLETING THIS FORM):

Title (e.g., Mr.)	First	Middle	Maiden	Last	Suffix (e.g., Jr.)

Street/Apt./P.O. Box/Route and Box	City	State	ZIP Code

Cell Telephone	Home Telephone	Work Telephone	E-mail Address
()	()	()	

Social Security Number	Date of Birth (mm-dd-yyyy)
- -	- -

FOR STATISTICAL PURPOSES ONLY	
Ethnic Origin (choose one) <input type="checkbox"/> (01) Hispanic Latino <input type="checkbox"/> (02) Not Hispanic Latino	Race (choose one or more, regardless of Ethnicity) <input type="checkbox"/> (01) White <input type="checkbox"/> (02) Black or African American <input type="checkbox"/> (04) American Indian or Alaska Native <input type="checkbox"/> (05) Asian <input type="checkbox"/> (08) Native Hawaiian or Other Pacific Islander
Gender (choose one) <input type="checkbox"/> (F) Female <input type="checkbox"/> (M) Male	

APPLICANT COMPLETES: RECORD OF EDUCATION (Graduation from high school or the completion of an Alabama State Department of Education approved equivalent is required.)

NAME OF HIGH SCHOOL/COLLEGE	LOCATION	DATES ATTENDED	DIPLOMA/DEGREE

APPLICANT COMPLETES: CITIZENSHIP OR NATIONAL STATUS

This section is to be completed in compliance with *Ala. Code § 31-13-(29)(c)(1)* which provides that United States citizenship and lawful presence in the United States must be appropriately verified. The Systematic Alien Verification for Entitlements (SAVE) system will be used to verify lawful presence in the United States. Alabama certification will not be processed until documentation of United States citizenship or lawful presence has been confirmed by the Educator Certification Section.

Choose ONE as appropriate:

1. I hereby declare that I am a citizen of the United States. (*check one*) Yes No
I am providing proof of United States citizenship by submitting a legible photocopy (front and back) of one of the following documents.
Please mark an "X" next to the item letter of the documentation being submitted.

Mark Item Selected	ITEM	<i>If you are a United States citizen and have previously completed and submitted this form to the Educator Certification Section, it does not need to be submitted again.</i>
		Acceptable Documentation List
	A	An Alabama driver's license or non-driver's identification card issued by the Alabama Department of Public Safety
	B	A birth certificate indicating birth in the United States or one of its territories
	C	Pertinent pages of a United States valid or expired passport identifying the person and the person's passport number, or the person's United State passport
	D	United States naturalization documents or the number of the certificate of naturalization
	E	Other documents or methods of proof of United States citizenship issued by the federal government pursuant to the Immigration and Nationality Act of 1952, as amended
	F	Bureau of Indian Affairs card number, tribal treaty card number, or tribal enrollment number
	G	A consular report of birth abroad of a citizen of the United States of America
	H	A certification of citizenship issued by the United States Citizenship and Immigration Services
	I	A certification of report of birth issued by the United States Department of State
	J	An American Indian Card, with KIC classification, issued by the United States Department of Homeland Security
	K	Final adoption decree showing the person's name and United States birthplace
	L	An official United States Military record of service showing the applicant's place of birth in the United States
	M	An extract from a United States hospital record of birth created at the time of the person's birth indicating the place of birth in the United States
	N	AL-verify
	O	A valid Uniformed Services Privileges and Identification Card
	P	Any form of ID authorized by the Alabama Department of Revenue

OR

2. I hereby declare that I am an alien lawfully present in the United States. (*check one*) Yes No
I am providing proof of lawful presence by submitting a legible photocopy (front and back) of one of the following documents.
Please mark an "X" next to the item letter of the documentation being submitted.

Mark Item Selected	ITEM	<i>If you are an alien lawfully present in the United States, this form and documentation must be submitted with every application.</i>
		Acceptable Documentation List
	A	A valid tribal enrollment card or other form of tribal identification bearing a photograph or other biometric identifier
	B	Any valid United States federal or state government issued identification document bearing a photograph or other biometric identifier, including a valid Uniformed Services Privileges and Identification Card if issued by an entity that requires proof of lawful presence in the United States before issuance
	C	A foreign passport with an unexpired United States Visa and a corresponding stamp or notation by the United States Department of Homeland Security indicating the bearer's admission to the United States
	D	A foreign passport issued by a visa waiver country with the corresponding entry stamp and unexpired duration of stay notation or an I-94 W form by the United States Department of Homeland Security indicating the bearer's admission to the United States

APPLICANT COMPLETES: PROFESSIONAL STATUS AND CRIMINAL HISTORY INFORMATION

Check "yes" or "no" for each question below. "YES" responses require an attached explanation and any additional supporting documentation (e.g., court certified copies of judgment, conviction, and sentencing).

READ CAREFULLY

- Yes No Have you ever had any adverse action (e.g. warning, reprimand, suspension, revocation, denial, voluntary surrender) taken against a professional certificate, license or permit issued by an agency **other than the Alabama State Department of Education?**
- Yes No Are you currently the subject of an investigation involving a violation of a profession's laws, rules, standards or Code of Ethics by an agency **other than the Alabama State Department of Education?**
- Yes No Are you currently the subject of an investigation involving sexual misconduct or physical harm to a child?
- Yes No Have you ever resigned from a position rather than face disciplinary action?
- Yes No Have you ever been convicted of, or entered a plea of no contest to a felony or misdemeanor other than a minor traffic violation?
- Yes No Are you the subject of a pending investigation involving a criminal act?

I understand Alabama certification will not be processed if lawful presence or United States citizenship is not confirmed. I understand that if at any time it is determined by the ALSDE that I am not lawfully present in the United States, the ALSDE will deny this benefit or will terminate this benefit. I sign this declaration under penalties of perjury: making a false, fictitious, or fraudulent statement or representation in this declaration is perjury in the second degree pursuant to Ala. Code § 31-13-7(h).

I understand that I must meet all Alabama certification requirements in effect on the date the application and fee are received in the Educator Certification Section. I understand that it is also my responsibility to keep all personal data on file in the Educator Certification Section current. I certify that all information pertaining to this application is true and correct.

FAILURE TO SUBMIT ACCURATE INFORMATION MAY RESULT IN REVOCATION OR NON-ISSUANCE OF YOUR SUBSTITUTE LICENSE.

Date

Signature of Applicant

Check to be certain that all portions of this form have been completed, documents have been attached, and all signatures have been obtained. Incomplete forms will not be returned to the school system or eligible nonpublic/private school.

- A note will be placed on the individual's file indicating that the application was incomplete and a new application is required.*
- If a fee was submitted, the fee will be retained and entered to the individual's file.*

Alabama DOE Applicant Processing Services

Alabama Applicant Processing Service (AAPS) Fingerprinting Overview

STEP 1 - REGISTRATION

If you live out of state and cannot travel to Alabama to be fingerprinted [CLICK HERE](#)

Alabama applicants **MUST** be registered online prior to arriving at a fingerprint location

Currently only Alabama State Department of Education (ALSDE) applicants may use AAPS

Option 1 - Online Registration <https://www.aps.gemalto.com/AL>

- Applicants are responsible for their own registration. Information incorrectly entered during registration and submitted during fingerprinting CANNOT be corrected and is the responsibility of the applicants. Changes to incorrect registration data MAY be corrected online or by telephone prior to fingerprint submission.

Option 2 - Telephone Registration 866-989-9316

- Gemalto Cogent encourages ALL applicants to register online.
- Applicants are responsible for their own registration. Information incorrectly entered during registration and submitted during fingerprinting CANNOT be corrected and is the responsibility of the applicants. Changes to incorrect registration data MAY be corrected online or by telephone prior to fingerprint submission.

Option 3 - Out-of-State Applicants/Paper Fingerprint Cards

- Out-of-State applicants may submit a completed fingerprint card AND a money order or cashiers check in the amount of \$54.90 made out to Gemalto Cogent. Applicants **MUST** register ONLINE prior to mailing in fingerprint cards AND must include their REGISTRATION ID. Submit fingerprint cards to:

Gemalto Cogent
ALSDE Cards Scan
APS Department #165
2964 Bradley Street
Pasadena, CA 91107

STEP 2 - PAYMENT

Fingerprint Fee is \$48.15

- Applicants may pay online during registration using a debit or credit card
- No cash, credit card or business checks are accepted at the fingerprint locations.
- Applicants may pay at the fingerprint site with money order or cashier check

Payments must be made out to **Gemalto Cogent**

Payment amount for ALSDE fingerprinting is \$48.15

STEP 3 - FINGERPRINTING

Visit any Gemalto Cogent fingerprint location in Alabama. See *Print Locations & Hours* at <https://www.aps.gemalto.com/AL>

Be sure to bring valid identification with you to the print location. See *What to Bring* at <https://www.aps.gemalto.com/AL>

EMAIL ADDRESS: _____

TRUSSVILLE CITY BOARD OF EDUCATION

113 NORTH CHALKVILLE ROAD
TRUSSVILLE, AL 35173

Updated _____

APPLICATION

PERSONAL DATA

Name _____	SS# _____	Phone _____
Present Address _____	City _____	State _____ Zip _____
Permanent Address if Different _____	City _____	State _____ Zip _____

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CERTIFICATION:

Do you have an Alabama Certificate? _____ Grade/Class _____ Expiration Date _____

Area(s) of certification _____

REFERENCES:

List the name and addresses of three persons who are qualified to recommend you.

NAME	POSITION	ADDRESS	PHONE

EDUCATION:

	Name of School	Dates Attended	Graduation Date	College Major		College Minor	
				Subject/Sem. Hours		Subject/Sem. Hours	
High School							
College							
Graduate School							

EXPERIENCE: Please complete this section.

Below give information regarding your experience, beginning with your last year of experience and dating backward:

Name of School or Employer	City or County and State	Number of Employees	Dates	Number of Years	Positions Held

PROFESSIONAL INFORMATION:

Has your teaching contract ever been non-renewed or terminated? _____ Yes _____ No

Have you ever been convicted of or entered a plea of no contest to a felony or misdemeanor other than a minor traffic violation? _____ Yes _____ No

If you answered "YES", please provide details of conviction including date and place of conviction and submit court certified copies of the judgment, conviction, and sentencing.

OTHER PERTINENT COMMENTS:

I hereby certify that all the information I have provided in this application is true and correct. I give my permission for the Trussville City Board of Education School System to contact any references or prior employers given in conjunction with this application. I agree that falsification of any part of this application may be sufficient cause for dismissal. References and personal information that become a part of this application will be regarded as confidential and shall not be revealed to me.

Signature of Applicant

Date

NOTE: This application must be updated annually if you wish to keep it current.

NOTICE OF NON-DISCRIMINATION

Every applicant and employee is entitled to equal treatment with regard to all terms and conditions of employment, assignment, promotion, demotion, salary, dismissal, and training. The Trussville City Board of Education is an equal opportunity employer. It is the official policy of Trussville City Board of Education that no person, on the grounds of race, color, disability, sex, religion, national origin, age, or other legally protected status, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program, activity, or employment.

FOR OFFICE USE ONLY:

Date Interviewed _____

Date Employed _____

Assignment _____

TB SKIN TEST REMINDER

Please visit your doctor or health department to obtain a Tuberculosis (TB) test less than 12 months old.

Our office needs a copy of the results.



Employment Eligibility Verification
 Department of Homeland Security
 U.S. Citizenship and Immigration Services

USCIS
 Form I-9
 OMB No. 1615-0047
 Expires 08/31/2019

....START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers CANNOT specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Attestation *(Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.)*

Last Name (Family Name)		First Name (Given Name)		Middle Initial	Other Last Names Used (if any)	
Address (Street Number and Name)			Apt. Number	City or Town		State ZIP Code
Date of Birth (mm/dd/yyyy)	U.S. Social Security Number		Employee's E-mail Address		Employee's Telephone Number	

I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

I attest, under penalty of perjury, that I am (check one of the following boxes):

<input type="radio"/> 1. A citizen of the United States	
<input type="radio"/> 2. A noncitizen national of the United States <i>(See instructions)</i>	
<input type="radio"/> 3. A lawful permanent resident (Alien Registration Number/USCIS Number):	
<input type="radio"/> 4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy): Some aliens may write "N/A" in the expiration date field. <i>(See instructions)</i> <i>Aliens authorized to work must provide only one of the following document numbers to complete Form I-9: An Alien Registration Number/USCIS Number OR Form 1-94 Admission Number OR Foreign Passport Number.</i> 1. Alien Registration Number/USCIS Number: _____ OR 2. Form 1-94 Admission Number: _____ OR 3. Foreign Passport Number: _____ Country of Issuance: _____	
QR Code - Section 1 Do Not Write In This Space	

Signature of Employee

Today's Date (mm/dd/yyyy)

Preparer and/or Translator Certification (check one):

I did not use a preparer or translator. A preparer(s) and/or translator(s) assisted the employee in completing Section 1.
(Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)

I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.

Signature of Preparer or Translator		Today's Date (mm/dd/yyyy)	
Last Name (Family Name)		First Name (Given Name)	
Address (Street Number and Name)		City or Town	State ZIP Code

If a PO Box as address, a physical street address is required for this form.

Employer Completes Next Page



Employment Eligibility Verification
 Department of Homeland Security
 U.S. Citizenship and Immigration Services

USCIS
 Form I-9
 OMB No. 1615-0047
 Expires 08/31/2019

Section 2. Employer or Authorized Representative Review and Verification

Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents."

Last Name (Family Name)	First Name (Given Name)	M. I.	Citizenship/Immigration Status
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List A Identity and Employment Authorization	OR List B Identity	AND List C Employment Authorization
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Certification: I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

The employee's first day of employment (mm/dd/yyyy): _____ (See instructions for exemptions)

Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)	Title of Employer or Authorized Representative Payroll Representative
Last Name of Employer or Authorized Representative	First Name of Employer or Authorized Representative	Employer's Business or Organization Name Trussville City Bd of Education
Employer's Business or Organization Address (Street Number and Name) 113 North Chalkville Road	City or Town Trussville	State ZIP Code AL 35173

Section 3. Reverification and Rehires (To be completed and signed by employer or authorized representative.)

A. New Name (if applicable)	B. Date of Rehire (if applicable)
Last Name (Family Name) First Name (Given Name) Middle Initial	Date (mm/dd/yyyy)

C. If the employee's previous grant of employment authorization has expired, provide the information for the document or receipt that establishes continuing employment authorization in the space provided below.

Document Title	Document Number	Expiration Date (if any) (mm/dd/yyyy)
----------------	-----------------	---------------------------------------

I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)	Name of Employer or Authorized Representative
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TRUSSVILLE CITY SCHOOLS

PAYROLL DIRECT DEPOSIT AUTHORIZATION

- New to direct deposit program
- Add/change/delete existing direct deposits
- Secondary Deposit Request

Employee last 4 SSN or ID		Employee name (last, first, middle initial)		School/Department	Phone
Action	Priority # (e.g. 1,2,3)	Bank ID Number* (9 digits)	Account Number* (up to 17 characters)	Deposit Type	Account Type*
<input type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Delete				<input type="checkbox"/> Amount \$ _____ <input type="checkbox"/> Net Pay	<input type="checkbox"/> Checking <input type="checkbox"/> Savings

Effective Date	Financial institution (name, city, state)
----------------	---

Attach Voided Check >>>>>> Check Must Be Preprinted With Name Or Account Identity Provided Do Not Attach A Deposit Slip	<p style="font-size: 1.2em;">If you do not have imprinted checks with your name then a memo or authorization from the bank is required as proof of account in addition to this form. The bank can sign/stamp this form as authorization.</p>
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IF YOU SELECTED CHECKING ACCOUNT, ATTACH A VOIDED CHECK TO THIS FORM. IF YOU SELECTED SAVINGS ACCOUNT, ATTACH A DEPOSIT SLIP TO THIS FORM. (NOTE: DO NOT ATTACH THE VOID CHECK or DEPOSIT SLIP IF IT DOES NOT HAVE PRE-PRINTED BANK AND ACCOUNT NUMBERS. YOU WILL NEED DOCUMENTATION THAT YOU HAVE AUTHORIZED ACCESS TO THE ACCOUNT FROM THE FINANCIAL INSTITUTION IF PRE-PRINTED DOCUMENTATION IS NOT PROVIDED.)

*** Adding a new direct deposit or changing account type, bank identification number or account number requires a prenote to be sent to the bank before the add or change becomes effective. A prenote sends your account type, bank ID and account number to the bank to assure the accuracy of the numbers. Changes should be submitted 20 days prior to effective date. You may receive checks until the prenoting process is complete.**

--	--

I authorize TRUSSVILLE CITY SCHOOLS and my financial institutions indicated above to initiate electronic credit entries (direct deposit) of the amounts I designated and if necessary, debit entries and adjustments for any credit entries made in error to my accounts as I indicated above. I understand that this authorization will cause any previously authorized direct deposits to financial institutions to be discontinued.

Employee Signature	Date
---------------------------	-------------

Send this form to your Central Office payroll office.



Employee's Withholding Tax Exemption Certificate

Every employee, on or before the date of commencement of employment, shall furnish his or her employer with a signed Alabama withholding exemption certificate relating to the number of withholding exemptions which he or she claims, which in no event shall exceed the number to which the employee is entitled. In the event the employee inflates the number of exemptions allowed by this Chapter on Form A4, the employee shall pay a penalty of five hundred dollars (\$500) for such action pursuant to Section 40-29-75.

Part I – To be completed by the employee

EMPLOYEE NAME _____ EMPLOYEE SOCIAL SECURITY NUMBER _____

STREET ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

HOW TO CLAIM YOUR WITHHOLDING EXEMPTIONS

DOB

1. If you claim no personal exemption for yourself and wish to withhold at the highest rate, write the figure "0", sign and date Form A4 and file it with your employer. _____
2. If you are SINGLE or MARRIED FILING SEPARATELY, a \$1,500 personal exemption is allowed. Write the letter "S" if claiming the SINGLE exemption or "MS" if claiming the MARRIED FILING SEPARATELY exemption _____
3. If you are MARRIED or SINGLE CLAIMING HEAD OF FAMILY, a \$3,000 personal exemption is allowed. Write the letter "M" if you are claiming an exemption for both yourself and your spouse or "H" if you are single with qualifying dependents and are claiming the HEAD OF FAMILY exemption _____
4. Number of dependents (other than spouse) that you will provide more than one-half of the support for during the year. *See dependent qualification below.* _____
5. Additional amount, if any, you want deducted each pay period. \$ _____
6. **This line to be completed by your employer:** Total exemptions (example: employee claims "M" on line 3 and "2" on line 4. Employer should use column M-2 (married with 2 dependents) in the withholding tables) _____

Under penalties of perjury, I certify that I have examined this certificate and to the best of my knowledge and belief, it is true, correct, and complete.

Employee's Signature _____ **Date** _____

Part II – To be completed by the employer

EMPLOYER NAME _____ EMPLOYER IDENTIFICATION NUMBER (EIN) _____

TRUSSVILLE CITY SCHOOLS
ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

113 North Chalkville Road, Trussville, AL 35173

Employers are required to keep this certificate on file. If the employee is believed to have claimed more exemption than legally entitled or claims 8 or more dependent exemptions, the employer should contact the Department at the following address or phone number for verification: Alabama Department of Revenue, Withholding Tax Section, P.O. Box 327480, Montgomery, AL 36132-7480, by phone at (334) 242-1300, or by fax at (334) 242-0112. If the employee does not qualify for the exemptions claimed upon verification, the employer is required to withhold at the highest rate until the employee submits a corrected Form A4 reflecting the proper exemption they are entitled to claim.

DEPENDENTS: To qualify as your dependent (Line 4 above), a person must receive more than one-half of his or her support from you for the year and must be related to you as follows:

- Your son or daughter (including legally adopted children), grandchild, stepson, stepdaughter, son-in-law, or daughter-in-law;
- Your father, mother, grandparent, stepfather, stepmother, father-in-law, or mother-in-law;
- Your brother, sister, stepbrother, stepsister, half-brother, half-sister, brother-in-law, or sister-in-law;
- Your uncle, aunt, nephew, or niece (but only if related by blood).

Form W-4 (2019)

Future developments. For the latest information about any future developments related to Form W-4, such as legislation enacted after it was published, go to www.irs.gov/FormW4.

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. You may claim exemption from withholding for 2019 if **both** of the following apply.

- For 2018 you had a right to a refund of **all** federal income tax withheld because you had **no** tax liability, **and**
- For 2019 you expect a refund of **all** federal income tax withheld because you expect to have **no** tax liability.

If you're exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2019 expires February 17, 2020. See Pub. 505, Tax Withholding and Estimated Tax, to learn more about whether you qualify for exemption from withholding.

General Instructions

If you aren't exempt, follow the rest of these instructions to determine the number of withholding allowances you should claim for withholding for 2019 and any additional amount of tax to have withheld. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

You can also use the calculator at www.irs.gov/W4App to determine your tax withholding more accurately. Consider

using this calculator if you have a more complicated tax situation, such as if you have a working spouse, more than one job, or a large amount of nonwage income not subject to withholding outside of your job. After your Form W-4 takes effect, you can also use this calculator to see how the amount of tax you're having withheld compares to your projected total tax for 2019. If you use the calculator, you don't need to complete any of the worksheets for Form W-4.

Note that if you have too much tax withheld, you will receive a refund when you file your tax return. If you have too little tax withheld, you will owe tax when you file your tax return, and you might owe a penalty.

Filers with multiple jobs or working spouses. If you have more than one job at a time, or if you're married filing jointly and your spouse is also working, read all of the instructions including the instructions for the Two-Earners/Multiple Jobs Worksheet before beginning.

Nonwage income. If you have a large amount of nonwage income not subject to withholding, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you might owe additional tax. Or, you can use the Deductions, Adjustments, and Additional Income Worksheet on page 3 or the calculator at www.irs.gov/W4App to make sure you have enough tax withheld from your paycheck. If you have pension or annuity income, see Pub. 505 or use the calculator at www.irs.gov/W4App to find out if you should adjust your withholding on Form W-4 or W-4P.

Nonresident alien. If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

W-4 Form Department of the Treasury Internal Revenue Service		Employee's Withholding Allowance Certificate ▶ Whether you're entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.		OMB No. 1545-0074 2019
1 Your first name and middle initial		Last name		2 Your social security number
Home address (number and street or rural route)		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. Note: If married filing separately, check "Married, but withhold at higher Single rate."		
City or town, state, and ZIP code		4 If your last name differs from that shown on your social security card, check here. You must call 800-772-1213 for a replacement card. ▶ <input type="checkbox"/>		
5 Total number of allowances you're claiming (from the applicable worksheet on the following pages)				5
6 Additional amount, if any, you want withheld from each paycheck				6 \$
7 I claim exemption from withholding for 2019, and I certify that I meet both of the following conditions for exemption. • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. If you meet both conditions, write "Exempt" here ▶				7
Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.				
Employee's signature (This form is not valid unless you sign it.) ▶				
8 Employer's name and address (Employer: Complete boxes 8 and 10 if sending to IRS and complete boxes 8, 9, and 10 if sending to State Directory of New Hires.)		9 First date of employment		10 Employer identification number (EIN)



113 North Chalkville Road, Trussville, AL 35173

205-228-3000

Fax: 205-228-3001

Notice to Employees regarding FERPA

(IDEA 2004, ADA and Section 504)

All employees hired by Trussville City Schools need to understand that the Family Education Rights and Privacy Act (FERPA) protects student educational records. This act assures that information about students is not disclosed without the written consent of their parents. A student's right of privacy is violated when personal information is disclosed to others without consent, or when he or she is being asked for personal information by others who have no legal basis to do so.

FERPA applies to education records that include but are not limited to the following:

- Family information
- Personal information
- Grades
- Test records
- Special education records
- Disciplinary records
- Medical and health records
- Transcripts
- Videotaping

All employees are expected to comply with confidentiality demands of FERPA and may not disclose any student information verbally, in writing, or electronically to anyone other than another school employee who has a need to know due to a legitimate educational interest.

This requirement applies to *any* knowledge, written or otherwise, that an employee might have about a student's educational experience that is gleaned from working as a Trussville City Schools employee.

I, _____ have read the information explaining the confidentiality of student records protected by FERPA. I understand that I may not disclose any information about a student under my charge as a Trussville City Schools employee to anyone other than another school employee who has a legitimate educational interest in that student. I agree to abide by these standards.

Signed: _____

Date: _____

Trussville City Schools
Confidentiality and Privacy Statement

Given the nature of our work, it is imperative that employees of Trussville City Schools maintain the confidence of parents, students, and staff about any information that we may learn in the course of our work. Trussville City Schools prohibits the release of any student, staff, or parent information gained through participation in the typical classroom/school setting, meetings, and paperwork to anyone outside.

- The privacy of participants involved in the school setting, and information gained in the course of the day is strictly confidential.
- Knowledge of events and information gained in the school setting are not shared or discussed with anyone outside of the staff, student, and/or family, and deliberate care is given to respect persons' safety and right to privacy.
- Trussville City School Employees adhere to strict confidentiality standards regarding personal or sensitive information concerning students and/or their families.
- Confidential, personal, or sensitive information includes, but is not limited to, the following:
 - racial and/or ethnic background
 - religious, cultural, or political beliefs
 - sexual orientation
 - criminal record, history, or acts
 - health records
 - inappropriate school behaviours
 - academic issues
 - family issues

Trussville City School Employee Declaration of Confidentiality

- As a Trussville City School Employee, I have read and understood the above declaration on confidentiality and agree to work within these arrangements.
- I will maintain the confidentiality of the staff, students and their parents regarding any personal, sensitive, or confidential information.
- I will not mention the names or other details of staff, students and parents in conversation with people outside this meeting.

Name _____ Signature _____ Date _____
Please print

Date: _____

Printed Name: _____

I have received a copy of the New Health Insurance Marketplace Coverage Options and Your Health Coverage notice.

Signature: _____



New Health Insurance Marketplace Coverage Options and Your Health Coverage

Form Approved
OMB No. 1210-0149
(expires 11-30-2013)

PART A: General Information

When key parts of the health care law take effect in 2014, there will be a new way to buy health insurance: the Health Insurance Marketplace. To assist you as you evaluate options for you and your family, this notice provides some basic information about the new Marketplace and employment-based health coverage offered by your employer.

What is the Health Insurance Marketplace?

The Marketplace is designed to help you find health insurance that meets your needs and fits your budget. The Marketplace offers "one-stop shopping" to find and compare private health insurance options. You may also be eligible for a new kind of tax credit that lowers your monthly premium right away. Open enrollment for health insurance coverage through the Marketplace begins in October 2013 for coverage starting as early as January 1, 2014.

Can I Save Money on my Health Insurance Premiums in the Marketplace?

You may qualify to save money and lower your monthly premium, but only if your employer does not offer coverage, or offers coverage that doesn't meet certain standards. The savings on your premium that you're eligible for depends on your household income.

Does Employer Health Coverage Affect Eligibility for Premium Savings through the Marketplace?

Yes. If you have an offer of health coverage from your employer that meets certain standards, you will not be eligible for a tax credit through the Marketplace and may wish to enroll in your employer's health plan. However, you may be eligible for a tax credit that lowers your monthly premium, or a reduction in certain cost-sharing if your employer does not offer coverage to you at all or does not offer coverage that meets certain standards. If the cost of a plan from your employer that would cover you (and not any other members of your family) is more than 9.5% of your household income for the year, or if the coverage your employer provides does not meet the "minimum value" standard set by the Affordable Care Act, you may be eligible for a tax credit.¹

Note: If you purchase a health plan through the Marketplace instead of accepting health coverage offered by your employer, then you may lose the employer contribution (if any) to the employer-offered coverage. Also, this employer contribution –as well as your employee contribution to employer-offered coverage– is often excluded from income for Federal and State income tax purposes. Your payments for coverage through the Marketplace are made on an after-tax basis.

How Can I Get More Information?

For more information about your coverage offered by your employer, please check your summary plan description available on the PEEHIP website at www.rsa-al.gov or contact the Public Education Employees' Health Insurance Plan (PEEHIP) toll free at 1-877-517-0020

The Marketplace can help you evaluate your coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit HealthCare.gov for more information, including an online application for health insurance coverage and contact information for a Health Insurance Marketplace in your area.

¹ An employer-sponsored health plan meets the "minimum value standard" if the plan's share of the total allowed benefit costs covered by the plan is no less than 60 percent of such costs.

PART B: Information About Health Coverage Offered by Your Employer

This section contains information about any health coverage offered by your employer. If you decide to complete an application for coverage in the Marketplace, you will be asked to provide this information. This information is numbered to correspond to the Marketplace application.

3. Employer name Trussville City Schools		4. Employer Identification Number (EIN) 68-0595540	
5. Employer address 113 N Chalkville Road		6. Employer phone number 205.228.3023	
7. City Trussville	8. State AL	9. ZIP code 35173	
10. Who can we contact about employee health coverage at this job? Finance Office			
11. Phone number (if different from above) 205-228-3000		12. Email address finance@trussvillecityschools.com	

Here is some basic information about health coverage offered by this employer:

- As your employer, we offer a health plan to:
 - All employees. Eligible employees are:
 - Some employees. Eligible employees are:
Full-time employees and permanent part-time employees employed in any public institution of education within the state of Alabama that provides instruction for any combination of grades K - 14 exclusively, under the auspices of the State Board of Education. A permanent part-time employee must agree to payroll deduction for a pro-rata portion of the premium cost for a full-time employee based on the percentage of time the permanent part-time worker is employed.
- With respect to dependents:
 - We do offer coverage. Eligible dependents are:
 - An employee's spouse as defined by Alabama law to whom the employee is currently and legally married (excludes divorced or common-law spouses).
 - A child under the age of 26 who is the employee's biological child, legally adopted child, stepchild, or foster child placed with the employee by an authorized placement agency or by judgment, decree, or other order of any court of competent jurisdiction. Any other children such as a grandchild, must meet the same requirements as a foster child.
 - A dependent child of any age incapable of self-sustaining employment because of a physical or mental handicap and is chiefly dependent on the employee for support. The handicap must have existed prior to the time the child attained age 26 and was covered as a dependent on the employee's PEEHIP policy before age 26.
 - We do not offer coverage.
 - If checked, this coverage meets the minimum value standard, and the cost of this coverage to you is intended to be affordable, based on employee wages.
- ** Even if your employer intends your coverage to be affordable, you may still be eligible for a premium discount through the Marketplace. The Marketplace will use your household income, along with other factors, to determine whether you may be eligible for a premium discount. If, for example, your wages vary from week to week (perhaps you are an hourly employee or you work on a commission basis), if you are newly employed mid-year, or if you have other income losses, you may still qualify for a premium discount.

If you decide to shop for coverage in the Marketplace, [HealthCare.gov](https://www.healthcare.gov) will guide you through the process. Here's the employer information you'll enter when you visit [HealthCare.gov](https://www.healthcare.gov) to find out if you can get a tax credit to lower your monthly premiums.

• An employer-sponsored health plan meets the "minimum value standard" if the plan's share of the total allowed benefit costs covered by the plan is no less than 60 percent of such costs (Section 36B(c)(2)(C)(ii) of the Internal Revenue Code of 1986)

RE: New Health Insurance Marketplace Coverage Options and Your Health Coverage

To: **TRUSSVILLE CITY SCHOOLS** Employees:

There is a lot of talk about healthcare reform today, and you will be hearing much more in the coming months.

It is important to know that the Public Education Employees' Health Insurance Plan (PEEHIP) will continue to offer health coverage to our eligible employees. This coverage is an important part of our total compensation package.

The Patient Protection and Affordable Care Act (ACA) requires employers subject to the Fair Labor Standards Act to provide the attached notice to all working full-time and part-time employees. The notice provides basic information about individual health insurance options that will be available through the Marketplace (also referred to as Exchanges) beginning in 2014. In Alabama, the Health Insurance Marketplace will be administered by the federal government.

The required notice also explains that some individuals may be eligible for federal subsidies to help pay for some of the cost of individual health insurance policies sold through a public exchange. The value of these subsidies will vary based on an individual's household income.

According to the ACA and IRS regulations, if an employee is eligible for an employer sponsored health plan, and that plan meets the government's definition of affordable, minimum value coverage, then the employee and any family members eligible for the employer plan are not eligible for the federal subsidies described in the attached notice, regardless of household income. **Coverage offered to you by PEEHIP meets the minimum value standard, and the cost of this coverage to you is intended to be affordable, based on employee wages.**

Important Note for Employees Who Are Eligible for PEEHIP Coverage:

Is PEEHIP coverage "affordable" to you according to ACA rules?

The ACA defines "affordable" as a plan that requires an employee to contribute no more than 9.5% of their household income to participate in employee only coverage (single coverage).

- PEEHIP offers a plan that requires a monthly contribution of \$15 for single coverage for full time employees earning a full allocation.
- Note: Employees who qualify and apply for PEEHIP's Federal Poverty Level premium discount program will have a reduced premium of 10% up to 50% depending on your income.

Note: If you purchase a health plan through the Marketplace instead of accepting coverage offered through PEEHIP, you will lose the PEEHIP (employer) contribution to the PEEHIP offered coverage. Also, a health plan purchased through the Marketplace is not paid for with pre-tax dollars. Premium payments made through the Marketplace are made on an after-tax basis.

Important Note for Employees Who are Not Eligible for PEEHIP Coverage:

If you are not eligible for PEEHIP coverage, you may want to review the attached notice and explore individual health insurance options available to you through a public exchange. Since you are not eligible for PEEHIP coverage, you may qualify for the federal subsidies described in the notice.

For further information on the ACA or the Health Insurance Marketplace, call 1-800-318-2596 or visit www.healthcare.gov.

TRUSSVILLE CITY SCHOOLS EMERGENCY PREPAREDNESS FORM

The information that you provide will be kept completely confidential and will only be shared with the appropriate school emergency team member(s).

Employee Name _____ Employee ID _____

Position _____ Department _____

Location _____ Principal/Supervisor _____

Work Schedule (days and hours) _____

1: Do you possess any skills or training that will be helpful in the event of an emergency?
(I.e. CPR, EMT, etc...)

Yes

No

If yes, please describe in detail.

2: Do you have a disability or special need that may require assistance in the event of an emergency?

Yes

No

If yes, please describe in detail.

Signature _____ Date _____

TRUSSVILLE CITY SCHOOLS
ADAAA Voluntary Request for Accommodation Form

CONFIDENTIAL

If you wish to identify yourself as an individual with a disability, please provide the information requested below. An individual with a disability is a person who has a physical or mental impairment which substantially limits one or more major life activities; a record (or past history) of such an impairment; or being regarded as having a disability. If you have submitted this information in the past, you need not do so again.

Date _____

Employee Name _____ Employee ID _____

Position _____ Department _____

Location _____ Principal/Supervisor _____

Work Schedule (days and hours) _____

Please use the back of this sheet or attach additional sheets if you need more room to answer any question listed below.

1. Please describe the physical or mental impairments(s) that limit(s) your ability to do your job.
 - a. What, if any, job function are you having difficulty performing?

2. Describe the accommodations you are requesting. Be as specific as possible (i.e. if you are requesting a piece of equipment or device, please provide description, manufacturer, cost, where to order, etc.).
 - a. If you are unsure of what accommodation is needed, do you have any suggestions?

 - b. Have you had any accommodations in the past for this same limitation? ___Yes ___ No
 - If yes, what were they and how effective were they?

TRUSSVILLE CITY SCHOOLS
ADAAA Voluntary Request for Accommodation Form

3. Describe how the requested accommodations will enable you to perform your job.

4. Please describe the expected duration of the requested accommodation:

- Permanent _____

- Until _____

5. Please provide any additional information that might help evaluate your request.

Signature _____ Date _____

I have read and understand the Responsible Use of Technology for Staff.

Printed Name

Signature

Date

School

Trussville City Schools

Responsible Use of Technology for Staff

Trussville City Schools makes a variety of communications and information technologies available to board staff through computer/network/Internet access. These technologies, when properly used, promote educational excellence in the Board by facilitating resource sharing, innovation, and communication. Illegal, unethical or inappropriate use of these technologies can have significant consequences, harming the board, its students and its staff. These Responsible Use Procedures are intended to minimize the likelihood of such harm by educating board staff and setting standards which will serve to protect the board. The Board firmly believes that digital resources, information and interaction available on the computer/network/Internet far outweigh any disadvantages.

Mandatory Review

To educate staff on proper computer/network/Internet use and conduct, users are required to review these procedures at the beginning of each school year. All staff shall be required to acknowledge receipt and understanding of all administrative regulations governing use of the system. These procedures are included in the Trussville City Schools' Faculty and Staff Handbook.

Definition of Board Technology System

The Board's computer systems and networks (system) are any configuration of hardware and software. The system includes but is not limited to the following:

- Telephones, cellular telephones, and voicemail technologies
- Email accounts
- Fax machines
- Copiers
- Servers
- Computer hardware and peripherals
- Software including operating system software and application software
- Digitized information including stored text, data files, email, digital images, and video and audio files;
- Internally or externally accessed databases, applications, tools (Internet or Board server based);
- Board-provided Internet access;
- Board-filtered public Wi-Fi;
- Virtual environments; and
- New technologies as they become available.

Availability of Access

Acceptable Use

Computer/Network/Internet access will be used to improve teaching and enhance learning consistent with the Board's educational goals. The Board requires legal, ethical and appropriate computer/network/Internet use by all Board staff.

Privilege

Access to the Board's computer/network/Internet is a privilege, not a right. Persons who violate any Board policy, rule, or procedure regarding technology use may be denied use of the Board's technology resources and may be subject to additional disciplinary action. (**Restriction or Loss of Technology Privileges, Board Policy 4.92**)

Access to Computer/Network/Internet

The Board permits restricted and conditional access to and use of its technology resources, including but not limited to computers, the "Internet," network storage areas, and electronic mail. Such access and use is restricted to employees, students, and other persons who are engaged in bona fide educational and administrative activities that serve and are consistent with identified educational objectives or authorized support functions, and who, by signing a Staff or Student Responsible Use Procedure for Technology agreement, agree to abide by all Board policies, rules, and regulations regarding technology use. The Responsible Use of Technology for Staff or Student agreement will be developed by the Superintendent for approval by the Board. (**Access to Technology Resources, Board Policy 4.91**) All such agreements will be maintained on file in the Technology Department.

- Staff members should NOT attempt to install software or hardware or change the system configuration including network settings without prior consultation with Tech Support.
- Staff members are expected to protect school laptops from damage and theft.
- Each staff member is monetarily responsible for any hardware damage that occurs off school premises and/or software damage (including labor costs). This includes replacement of equipment at comparable replacement cost.
- Staff members will not be held responsible for computer problems resulting from regular school-related use; however, staff members will be held personally responsible for any problems caused by their negligence as deemed the District's administration.
- Staff members will provide access to any laptop computer, equipment, and/or accessories they have been assigned upon the District's request.
- Staff are required to maintain password confidentiality by not sharing their password with others and may not use another person's system account. (Appendix H Password Control Standards, Data Governance Procedures, Policy I 15.2)
- Staff identified as a security risk or having violated the Board's Staff Responsible Use Procedures may be denied access to the Board's system. Other consequences may also be assigned.
- Computer/Network/Internet access is provided to all Board staff.
- Each Board computer and public Wi-Fi (available for individuals who bring their own personal telecommunication devices) has software installed that utilizes filtered Internet access as defined by Children's Internet Protection Act.
- Limited personal use is permitted if the use imposes no tangible cost to the Board, does not unduly burden the Board's computer or network resources, and has no adverse effect on a staff member's job performance.
- All non-staff/non-student users must obtain approval from the principal, departmental supervisor and Technology Coordinator through a Work Order Request Form to gain individual access to the Board's system.

Content/Third-Party Supplied Information

Staff with access to the Board's system should be aware that use of the system may provide access to other electronic communication systems in the global electronic network that may contain inaccurate and/or objectionable material.

Staff who knowingly bring prohibited materials into the school's electronic environment will be subject to disciplinary action in accordance with Board policies.

Subject to Monitoring

All technology resources, including network and Internet resources, e-mail systems, and computers or other access devices owned, leased, or maintained by the Board are the sole property of the Board. Board personnel may, at any time and without prior notice, access, search, examine, inspect, collect, or retrieve information of any kind from the Board's technology resources, including computer or related equipment, files, and data, to determine if a user is in violation of any of the Board's policies, rules, and regulations regarding access to and use of technology resources, for or in connection with any other matter or reason related to the safe and efficient operation or administration of the school system, or for any other reason not prohibited by law. Users of school system technology resources have no personal right of privacy or confidentiality with respect to the use or content of such resources. (**Ownership of Technology Resources and Data, Board Policy 4.93**)

Use of Personal Devices

The Board will provide a filtered, wireless public network to which staff will be able to connect personal telecommunication devices for instructional and administrative functions. These devices are the sole responsibility of the staff owner. The school or Board assumes no responsibility for personal telecommunication devices if they are lost, loaned, damaged or stolen and only limited time or resources will be spent trying to locate stolen or lost items. Each staff member is responsible for their own device; set up, maintenance, charging and security. Board staff will not diagnose, repair or install software on another staff members or student's device. Any and all school district information on the personal device is subject to examination, retrieval, search and/or subpoena.

Staff Computer/Network/Internet Responsibilities

Staff are responsible for their actions in accessing available resources.

Board staff are bound by all portions of the Board's Staff Responsible Use of Technology. Staff who knowingly violate any portion of the Responsible Use of Technology for Staff will be subject to disciplinary action in accordance with Board policies.

School and Departmental-Level Responsibilities

The principal/departmental administrator or designee will:

1. Be responsible for disseminating and enforcing the Board's Technology Policies and Responsible Use of Technology for Staff and Student at the school or departmental level such as unauthorized disclosure, use, and dissemination of personal information regarding minors; prevention of hacking or other forms of unauthorized use of or access to files, sites, databases or equipment, etc. (Board Policy 4.9)

2. Ensure that all staff users of the Board's system complete and sign an agreement to abide by Board policies and administrative regulations regarding such use. All such agreements will be maintained on file in the Technology Department's office.
3. Ensure that staff supervising students who use the Board's systems provide education and information emphasizing its appropriate, safe, and ethical use.
4. Monitor all users of the Board's systems to ensure appropriate and ethical use.
5. Use the Board's student information system to identify students who do not have permission to use the Internet and inform staff who are responsible for these students that they do not have permission to use the Internet, student email or Websites that require parental consent for students under the age of 13.
6. Provide training to staff that supervise students on digital responsibility, digital citizenship/ and appropriate use of technology resources.

Teacher Responsibilities

The teacher will:

1. Provide age-appropriate lessons in Internet safety, digital responsibility, and cyber security for students throughout the year.
2. Review Board computer/network/Internet responsibilities prior to gaining access to such system.
3. Verify the list of students (age 13 and younger) who require additional parent consent to access the Internet, email, and Websites through email received from office.
4. Provide developmentally-appropriate guidance to students as they use electronic resources related to instructional goals.
5. Use computer/network/Internet in support of instructional goals.
6. Provide alternate activities for students who do not have permission to use the Internet or email.
7. Provide a variety of comparable activities for students who do not bring their own device.
8. Address student violations of the Board's Responsible Use of Technology for Students as defined in the *Student Code of Conduct*.
9. Prevention unauthorized disclosure, use, and dissemination of personal information regarding minors to other persons including third party software companies. Approval must be obtained through submitting a Work Order Request Form (WORF) which will be reviewed by school and district data governance teams. **(Data Governance Policy, I 15.2 (4.10) and Procedures)**

Staff Code of Conduct

Board staff are expected to maintain appropriate conduct when accessing the communications and information technologies available through computer/network/ Internet access. All staff must comply with the Board's Responsible Use of Technology for Staff at all times when accessing any part of the technology system.

Staff will guard and protect access to secure systems by:

1. **Protecting passwords and other similar authorization information.** Passwords are the primary way in which staff members are authenticated and allowed to use the Board's computing resources. Staff will not disclose personal password(s) to any individual, including another staff member. Similarly, staff will not disclose other identifying information used to access specific system information, recognizing that if they do so, they will be held accountable for their actions as well as those of other parties to whom they have given access.
2. **Guarding unauthorized use of resources.** Staff will not allow others to make use of their accounts or network access privileges to gain access to resources to which they would otherwise be denied.
3. **Not circumventing or compromising security.** Staff must not utilize any hardware or software in an attempt to compromise the security of any other system, whether internal or external to the Board's systems and network. Examples of prohibited activities include (but are not limited to) Trojan horses,

Responsible Use of Technology for Staff, 4

password crackers, port security probes, network snoopers, IP spoofing, and intentional transmission of viruses or worms.

Computer/Network/Internet usage is subject to monitoring by designated staff at any time to ensure appropriate use. Electronic files sent, received or stored anywhere in the computer system are available for review by any authorized representative of the Board for any purpose. Staff will affirm, in writing that at all times their actions while using the Board's system will not violate the law or the rules of network etiquette, will conform to the Procedures set forth in the Staff Responsible Use Procedures, and will not violate or hamper the integrity or security of the Board's technology system.

If a violation of the Responsible Use of Technology for Staff occurs, staff will be subject to one or more of the following actions:

1. Revocation of access
2. Possible monetarily responsibility
3. Disciplinary action
4. Loss of employment with the Board
5. Appropriate legal action

Use of Online Tools and Resources

Communication with students and parents should be conducted through district issued website and email. It is recommended that any social media communication occur within the school's social media pages. See your administrator for more information regarding approval and process for publishing information through the school's social media pages.

The use of any online tool and resources is considered an extension of the classroom. Verbal or written language that is considered inappropriate in the classroom is also inappropriate online. Staff who use digital learning tools in their classrooms must monitor student actions to ensure compliance with *the Responsible Technology of Technology for Students in the Student Code of Conduct*.

Use of System Resources

Staff are asked to purge email or outdated files on a regular basis.

Reporting Security Problem

If knowledge of inappropriate material or a security problem on the computer/network/Internet is identified, the staff should immediately notify the Board's Help Desk at 3006. The security problem should not be shared with others.

Inappropriate Use

Inappropriate use includes, but is not limited to, those uses that violate the law, that are specifically named as violations in this document, that violate the rules of network etiquette, or that hamper the integrity or security of this computer/network/Internet system or any components that are connected to it. The following actions are considered inappropriate uses and are prohibited:

Violations of Law

Transmission of any material in violation of any federal or state law is prohibited. This includes, but is not limited to:

- threatening, harassing, defamatory or obscene material;
- copyrighted material;
- plagiarized material;
- material protected by trade secret; or
- blog posts, Web posts, or discussion forum/replies posted to the Internet which violate federal or state law.

Tampering with or theft of components from Board systems may be regarded as criminal activity under applicable state and federal laws.

Any attempt to break the law through the use of a Board computer/network/Internet account may result in prosecution against the offender by the proper authorities. If such an event should occur, the Board will fully comply with the authorities to provide any information necessary for the litigation process.

Modification of Computer

Modifying or changing computer settings and/or internal or external configurations without appropriate permission is prohibited.

Transmitting Confidential Information

Staff may not redistribute or forward confidential information (i.e. educational records, directory information, personnel records, etc.) without proper authorization. Confidential information should never be transmitted, redistributed or forwarded to outside individuals who are not expressly authorized to receive the information. Revealing personal information about oneself such as, but not limited to, home addresses, phone numbers, email addresses, birthdates of or of others is prohibited. (Data Governance and Use Policy, I 15.2 (4.10))

Commercial Use

Use of the system for any type of income-generating activity is prohibited. Advertising the sale of products, whether commercial or personal is prohibited.

Marketing by Non-TCS Organizations

Use of the system for promoting activities or events for individuals or organizations not directly affiliated with or sanctioned by the Board is prohibited.

Vandalism/Mischief

Any malicious attempt to harm or destroy Board equipment, materials or data; or the malicious attempt to harm or destroy data of another user of the Board's system, or any of the agencies or other networks to which the Board has access is prohibited. Deliberate attempts to degrade or disrupt system performance are violations of Board policy and administrative regulations and may constitute criminal activity under applicable state and federal laws. Such prohibited activity includes, but is not limited to, the uploading or creating of computer viruses.

Vandalism as defined above is prohibited and will result in the cancellation of system use privileges. Staff committing vandalism will be required to provide restitution for costs associated with system restoration and may be subject to other appropriate consequences.

Copyright

Staff must always respect copyrights and trademarks of third-parties and their ownership claims in images, text, video and audio material, software, information and inventions. The copy, use, or transfer of others' materials without appropriate authorization is not allowed. "Over the years, librarians, educators, and publishers have developed voluntary guidelines to address fair use," Willard told Education World. "Although these guidelines are not statutory, they are contained in the legislative history of the Copyright Act."

Those guidelines **allow** educators, under most circumstances, to copy or use

- a single chapter from a book
- an excerpt from a work that combines language and illustrations, such as a children's book, not exceeding two pages or 10 percent of the work, whichever is less
- a poem of 250 words or less or up to 250 words of a longer poem
- an article, short story, or essay of 2,500 words or less, or excerpts of up to 1,000 words or 10 percent of a longer work, whichever is less; or
- a single chart, graph, diagram, drawing, cartoon, or picture from a book, periodical, or newspaper.
- up to three minutes or 10 percent, whichever is less, of a single copyrighted motion media work
- up to 30 seconds or 10 percent, whichever is less, of music and lyrics from a single musical work
- up to five photographs or illustrations by one person and no more than 15 images or 10 percent, whichever is less, of the photographs or illustrations from a single published work
- up to 2,500 fields or cell entries or 10 percent, whichever is less, from a numerical database or data table
- all multimedia projects that include copyrighted materials credit the sources, display the copyright notice, and provide copyright ownership information. (The credit identifies the source of the work, including the author, title, publisher, and place and date of publication. The copyright ownership information includes the copyright notice, year of first publication, and name of the copyright holder.)

The guidelines **do not** allow users to

- make multiple copies of different works as a substitute for the purchase of books or periodicals
- copy the same works for more than one semester, class, or course
- copy the same work more than nine times in a single semester
- use copyrighted work for commercial purposes
- use copyrighted work for over two years without obtaining permission
- use copyrighted work without attributing the author.

- See more at: http://www.educationworld.com/a_curr/curr280b.shtml#sthash.nmh5JpmW.dpuf

Copyright Violations

Downloading or using copyrighted information without following approved Board procedures is prohibited.

Intellectual Property

An original work created by a student that will be published on the Internet will require written parental consent.

Plagiarism

Fraudulently altering or copying documents or files authored by another individual is prohibited.

Impersonation

Attempts to log on to the computer/network/Internet impersonating a system administrator or Board staff, student, or individual other than oneself, will result in revocation of the staff member's access to computer/network/Internet.

Illegally Accessing or Hacking Violations

Intentional or unauthorized access or attempted access of any portion of the Board's computer systems, networks, or private databases to view, obtain, manipulate, or transmit information, programs, or codes is prohibited.

File/Data Violations

Deleting, examining, copying, or modifying files and/or data belonging to other users, without their permission is prohibited.

System Interference/Alteration

Deliberate attempts to exceed, evade or change resource quotas are prohibited. The deliberate causing of network congestion through mass consumption of system resources is prohibited.

Email and Communication Tools

Email and other digital tools such as, but not limited to online learning environments, websites, blogs, and other online resources, are tools used to communicate within the Board. The use of these communication tools should be limited to instructional, school-related activities, or administrative needs. Employees must only use @trussvillecityschools.com, @tvboe.com, or @trussvillecityschools.org email addresses to create school related online accounts.

Communication with students and parents should be conducted through district issued website and email.

Staff will be issued email accounts. Staff should check email frequently, delete unwanted messages promptly, and stay within the email server space allocations. Email attachments, both internal and external, are limited to 50MB or smaller.

Staff should keep the following points in mind:

Perceived Representation

Using school-related email addresses, online learning environments, blogs, and other communication tools might cause some recipients or other readers of the email to assume that the staff member's comments represent the Board or school, whether or not that was the staff member's intention.

Privacy

Email, online learning environments, websites, blogs and other communication within online tools should not be considered a private, personal form of communication. Private information, such as home addresses, phone numbers, last names, pictures, or email addresses, should not be divulged. To avoid disclosing email addresses that are protected, all email communications to multiple recipients should be sent using the blind carbon copy (bcc) feature, if applicable.

Inappropriate Language

Using obscene, profane, lewd, vulgar, rude, inflammatory, threatening, or disrespectful language in emails, blogs or other communication tools is prohibited. Sending messages that could cause danger or disruption, personal attacks, including prejudicial or discriminatory attacks are prohibited.

Communications with Students

Communication with students and parents should be conducted through district issued website and email.

Employees shall refrain from inappropriate communication with a student or minor, including, but not limited to, electronic communication such as cell phone, text messaging, email, instant messaging, blogging, or other online communication tools. The employee shall limit communications to matters within the scope of the employee's professional responsibilities (e.g., for classroom teachers, matters relating to class work, homework, and tests; for an employee with an extracurricular duty, matters relating to the extracurricular activity). Communication should be within a group setting and not individual.

Factors that may be considered in assessing whether the communication is inappropriate include, but are not limited to:

- The nature, purpose, timing, and amount of the communication;
- The subject matter of the communication;
- Whether the communication was made openly or the educator attempted to conceal the communication;
- Whether the communication could be reasonably interpreted as soliciting sexual contact or a romantic relationship;
- Whether the communication was sexually explicit; and
- Whether the communication involved discussion(s) of the physical or sexual attractiveness or the sexual history, activities, preferences, or fantasies of either the educator or the student.

The employee does not have a right to privacy with respect to communications with students and parents.

The employee continues to be subject to federal laws, local policies, and administrative regulations, and the Alabama Code of Ethics including:

- Compliance with the Public Information Act and the Family Educational Rights and Privacy Act (FERPA), including retention and confidentiality of student records.
- Copyright law
- Prohibitions against soliciting or engaging in sexual conduct or a romantic relationship with a student.

Upon request from administration, an employee will provide the phone number(s), online site(s), or other information regarding the method(s) of electronic media the employee uses to communicate with any one or more currently-enrolled students.

Political Lobbying

Consistent with State ethics laws, Board resources and equipment, including, but not limited to, emails, blogs or other communication tools must not be used to conduct any political activities, including political advertising or lobbying. This includes using Board email or other communication tools to create, distribute, forward, or reply to messages, from either internal or external sources, which expressly or implicitly support or oppose a candidate for nomination or election to either a public office or an office of a political party or support or oppose an officeholder, a political party, or a measure (a ballot proposition). These Procedures prohibit direct communications as well as the transmission or forwarding of emails, hyperlinks, or other external references within emails regarding any political advertising.

Forgery

Forgery or attempted forgery of email messages is prohibited. Attempts to read, delete, copy or modify the email of other system users, deliberate interference with the ability of other system users to send/receive email, or the use of another person's user ID and/or password is prohibited.

Junk Mail/Chain Letters

Staff should refrain from forwarding emails which do not relate to the educational purposes of the Board. Chain letters or other email intended for forwarding or distributing to others is prohibited. Creating, distributing or forwarding any unnecessary message to a large number of people (spamming) is also prohibited. Such emails should be deleted without opening.

Board and School Websites Responsibilities

The purpose of Board websites is to communicate Board, school and/or class activities and information. Official school and Board Web sites should be hosted on a Board provided site.

The principal and or Board reserves the right to alter or delete any content contained on a Board Web site in order to ensure that it conforms with the school and Board's communications objectives.

Content Issues

For the requirements below, "content" is defined as text, graphics, media, or other information that is visible and/or audible on a Board Web page.

Content shall not be displayed if it:

- ❖ Contains questionable and/or inappropriate material and/or themes.
- ❖ Is of a personal nature.
- ❖ Includes commercial, trademarked, and/or copyrighted material without the express written consent of the “owner” of the content. If consent is obtained, the proper trademark/copyright symbol and/or owner’s credits must be displayed.
- ❖ Is out-of-date or inaccurate.
- ❖ Contains hyperlinks that do not return an active Web page and displays a “Page Not Found”.
- ❖ Contains hyperlinks that do not return a document and displays a “Page Not Found”.

Display of Student Information on the Internet

The following conditions apply to the display of student information on school and Board websites.

- Student-created projects, writings, and/or artwork are permitted on school/Board websites, or Board-approved blog and online sites, if the appropriate parental consent has been obtained.
- Student photographs and names are permitted only if the parent has given consent
- First name and last name initials should only be used

Consequences of Agreement Violation

Any attempt to violate the provisions of this agreement may result in revocation of the staff member’s access to the computer/network/Internet, regardless of the success or failure of the attempt. In addition, monetary responsibility, school disciplinary action and/or appropriate legal action may be taken.

Denial, Revocation, or Suspension of Access Privileges

With just cause, the building principal or Board may deny, revoke, or suspend computer/network/Internet access as required, pending an investigation.

Warning

Sites accessible via the computer/network/Internet may contain material that is illegal, defamatory, inaccurate or controversial. Each Board computer with Internet access has software installed that utilizes filtered Internet access as defined by Children’s Internet Protection Act. The Board makes every effort to limit access to objectionable material; however, controlling all such materials on the computer/network/Internet is impossible, even with filtering in place. With global access to computers and people, a risk exists that students may access material that may not be of educational value in the school setting.

Limitation on Liability

The Board makes no warranties of any kind either express or implied, that the functions or the services provided by or through the Board’s technology resources will be error-free or without defect. The Board will not be responsible for damage users may suffer, including but not limited to loss of data or interruption of services. **(Board Policy 4.95)** [Reference: 47 U.S.C. 254(h) and (l)]

