

**FLOODWOOD SCHOOL
115 WEST 4TH AVENUE
FLOODWOOD, MN 55736**

**SUBSTITUTE NON CERTIFIED STAFF
ASSIGNMENT SHEET**

The School Board of Independent School District No. 698, Floodwood, Minnesota (hereinafter “District”) delegates this assignment pursuant to Minnesota Statute 179A, to **Chase Durovec** (hereinafter “Substitute non certified staff”). The Substitute non certified staff will perform the duties assigned by the District.

The School District and Substitute non certified staff further agree as follows:

I. Duty period:

The duty period will be effective September 2, 2025 through May 29, 2026 on a substitute basis. Any additional hours must be approved by the Superintendent. The work calendar will be developed by mutual agreement of the Substitute non certified staff and Superintendent based on coverage needs.

II. Employment Duration, Expiration, Termination and Mutual Consent:

This assignment covers a term of September 2, 2025 through May 29, 2026 . The Substitute non certified staff employment may be non-renewed, modified, discharged, or terminated either during or at the end of this contract as provided in that statute. This assignment may be terminated or modified at any time by the District.

III. Salary:

For services performed, the Substitute non certified staff shall be paid an hourly rate of **\$ 16.63 an hour**. This assignment sheet shall be effective only upon the signature of Substitute non certified staff and of the officers of the School Board after authorization for such signatures was taken by the School Board in appropriate action recorded in its minutes. This is not intended to act as a contract or agreement. It is intended to act as a clarification of the Substitute non certified staff remuneration for service rendered and the district’s financial obligation for those services provided.

(Substitute non certified staff’s Signature)

(Date of Substitute non certified staff’s Signature)

(School Board Chairperson’s Signature)

(Date of Chairperson’s Signature)

(School Board Clerk’s Signature)

(Date of Clerk’s Signature)