

INDEPENDENT SCHOOL DISTRICT #2143  
WATERVILLE-ELYSIAN-MORRISTOWN PUBLIC SCHOOLS  
WATERVILLE, MN 56096

2024-2025 TERMS AND CONDITIONS OF EMPLOYMENT

The School Board of Independent School District #2143, Waterville, MN, enters into this agreement with **Heidi Schott**, who agrees to perform the duties of Special Education Case Facilitator of the School District.

ARTICLE I  
GROUP INSURANCE

- Sect. 1 Selection of Carrier: The selection of the insurance carrier and policy shall be made by the School District as provided by law. (It is understood that the School District's only obligation is to purchase an insurance policy and pay such amounts as agreed to herein and no claim shall be made against the School District as a result of denial of insurance benefits by an insurance carrier).
- Sect. 2 Health and Hospitalization Insurance: The School District shall contribute an annual amount up to \$12,699 per year toward single coverage, \$19,952.52 per year toward dependent coverage, or \$20,300.52 per year toward family coverage.
- Sect. 3 Dental Insurance: A single dental insurance plan will be provided by the School District subject to provisions set forth by the insurance carrier. The School District shall contribute a monthly amount up to \$25 toward the cost of the premium for each full-time employee for single, dependent, or family coverage.
- Sect. 4 Term Life Insurance: Term life insurance in the amount of \$20,000 shall be provided by the School District. The employee may elect to personally purchase additional term insurance in an amount approved by the life insurance carrier. The optional insurance may be purchased once each year prior to June 1 of the preceding year.
- Sect. 5 Income Protection Insurance: The School District shall provide all full time employees with an income protection plan. The plan shall provide seventy percent (70%) of the base wage upon disability with a thirty (30) calendar day waiting period from the onset of the disability. In the event an employee's sick leave balance is not used at that time insurance benefits commence, sick leave benefits will be coordinated with the insurance benefits to equal one hundred percent (100%) of the contracted daily wage. Coordinated benefits will continue until sick leave balance is exhausted. Sick leave accrual will not be allowed for the insurance portion of the aforementioned formula.

Sect. 6 Duration of Insurance Contribution: An employee is eligible for School District contribution as provided in this Article as long as the employee is employed by the School District. Upon termination of employment, all District contribution shall cease.

ARTICLE II  
LEAVES OF ABSENCE

Sect. 1 Sick Leave:

- Subd. 1 The employee shall earn sick leave at the rate of sixteen (16) days per year. Eight (8) days of leave shall be credited on September 1, and eight (8) days of leave shall be credited on January 1. Any employee taking an approved leave of absence will earn sick leave prorated at a rate of 1.78 days per month for the months they are employed. Notification of comp time and sick leave will be provided electronically.
- Subd. 2 Unused sick leave shall accumulate to a maximum of 115 days per employee.
- Subd. 3 Sick leave with pay shall be allowed by the School Board whenever an employee's absence is found to have been due to disability which prevented his/her attendance at school and performance duties on that day or days.
- Subd. 4 The School District may require an employee to furnish a medical certificate from the school health officer or from a qualified medical doctor as evidence of illness, indicating such absence was due to illness, in order to qualify for sick leave pay. However, the final determination as to the eligibility of an employee for sick leave is reserved to the School Board.
- Subd. 5 In the event that a medical certificate will be required, the employee shall be so advised. The School District shall pay the medical cost of the required certificate.
- Subd. 6 Sick leave allowed shall be deducted from the accrued sick leave days earned by the employee, partial days will be deducted in 1/7 increments.
- Subd. 7 Sick leave pay shall be approved only upon submission of a signed request form.
- Subd. 8 Notification of earned sick leave will be electronically.

Sect. 2 Bereavement and Family Illness Leave: Five (5) days, non-accumulative, deducted from sick leave, will be granted each year for non-personal illness or bereavement. Additional days may be granted at the discretion of the Superintendent.

Sect. 3 Personal Leave: Each year, an employee shall be granted three (3) personal leave days and may carry two (2) forward to a max of five (5), with pay and deducted from sick leave.

- Subd. 1 Requests for personal leave must be made to the Superintendent or his/her designee at least two (2) days in advance and do not need to state reasons. In emergencies, leaves may be requested via telephone.
- Subd. 2 Requests for personal leave on non-student contact days (curriculum days) are subject to the Superintendent's approval.
- Subd. 3 Leaves of three (3) or more consecutive days must be submitted for approval at least seven (7) days in advance. If notice is less than seven (7) days, approval may be made at the Superintendent's discretion.
- Subd. 4 Personal leave may not be used the day before or after a break.

Sect. 4 Worker's Compensation: Pursuant to M.S. 176, an employee injured on the job in the service of the School District and collecting worker's compensation insurance, may draw sick leave and receive full salary from the School District, the salary to be reduced by an amount equal to the insurance payments and only that fraction of the days not covered by insurance will be deducted from the sick leave balance. That fraction of the days covered by insurance is not eligible for accrual of sick leave.

Sect. 5 Medical Leave:

- Subd. 1 An employee who is unable to perform duties because of illness or who has exhausted all sick leave credit available, or has become eligible for long term disability compensation, may, upon request, be granted a medical leave of absence, without pay, up to six (6) months. This leave may be renewed at the discretion of the School District.
- Subd. 2 A request for leave of absence, or renewal thereof, under this section shall be accomplished by a doctor's written statement outlining the condition of health and estimated time at which the employee is expected to be able to assume normal responsibilities.

Sect. 6 Insurance Application: An employee on unpaid leave is eligible to continue to participate in group insurance programs if permitted under the insurance policy provisions. The employee shall pay the entire premium for such insurance commencing with the beginning of the leave, and shall pay to the School District the monthly premium in advance. Those employees qualifying for leave per FMLA and who duly request such leave on a timely basis shall be excluded from this provision.

Sect. 7 Credit: An employee who returns from an unpaid leave shall retain experience credit for pay purposes and other benefits which had accrued at the time leave commenced. No credit shall accrue for the period of time that an employee was on unpaid leave, subject to FMLA entitlements.

Sect. 8 Jury Duty: Per state law.

Sect. 9 Donation: Under extraordinary circumstances, staff may donate vacation or personal leave to a staff person that has no leave time left. District approval needed.

ARTICLE III  
LOCAL TRAVEL ALLOWANCE

Sect. 1 Travel Allowance: All pre-approved automobile usage which is incurred in connection with School District business shall be reimbursed at the current district mileage rate.

ARTICLE IV  
RATES OF PAY

Sect. 1 Salary: Special Education Case Facilitator

Days 2024-2025

190                      \$75,000

Sect. 2 Deductions: In the event of an absence without leave and a pay deduction is to be made for such absence, the amount for deduction for each day of absence shall be determined by the following formula:

Annual Salary/190 Duty Days

IN WITNESS THEREOF, I have subscribed my signature this 19 day of  
May, 2024

Heidi Schott \_\_\_\_\_ Special Education Case  
Facilitator

IN WITNESS THEREOF, we have subscribed our signatures this \_\_\_\_\_ day of  
\_\_\_\_\_, 2024.

INDEPENDENT SCHOOL DISTRICT #2143

\_\_\_\_\_ Chairperson

\_\_\_\_\_ Clerk