



**Columbia Union School District
Employee Handbook**

Purchasing

Purchase Order

- A purchase order (PO) should be used for purchases.
- To request a PO complete an Outside Requisition form.
- If you would like to purchase items from a company that does not accept POs, we can get a total from the company and send a check. (Checks can take as much as 2 weeks to process.)
- In some instances, purchases may need to be made by the individual and reimbursed by the district. Reimbursements over \$25 will need prior authorization.
- The district credit card is **not** an option for most purchases. Plan ahead!!!
- Return packing slips, receipts and invoices to DO.
- Questions about purchasing can be directed to Michelle Solis
msolis@cusd49.com extension 174.

Purchasing from Office Depot

1. Log in to the Office Depot web site www.business.officedepot.com
Login-**Columbia Teachers**
Password-**password**
2. Select the items you need.
3. Once your order is complete, proceed to check-out
4. Review your order on the check-out screen (items selected, price).
Add your name in the comments.
5. Place your order on **hold**.
6. Print order and attach to a **Classroom Supply Order Form**.
You do not need to list items again, just write "As Per Attached Order # _____" in the item description area. Write the total dollar amount. Give your order to **Suzanne** for approval.

Ordering from other vendors/Outside Requisition Forms:

To place an order from a vendor other than Office Depot, please fill out an *Outside Requisition Form*. Complete the information on the form for the vendor and the items you would like to order. The form must be approved and signed by the Principal before it is given to the district office to place the order.

COLUMBIA UNION SCHOOL DISTRICT

22540 Parrotts Ferry Rd.

Columbia, CA. 95310

(209) 533-7700

Fax (209) 532-4998

OUTSIDE REQUISITION

Please fill out, print, have it signed for approval and send to the District Office

Requesting Department/Program or Person:

Requesting Department/Program or Person Account Number:

Suggested Supplier:

(Name of vendor)

(Mailing Address)

(City, State and Zip)

(Vendor phone number)

(Fax number)

Date requested:

Date needed:

PO# assigned:

Quan.	Unit	Cat.#	'Complete' Description	Unit Price	Total Price
				Sub Total	<input type="text"/>
				Tax	<input type="text"/>
				Shipping	<input type="text"/>
				Total	<input type="text"/>

Ordered by:

Approved by: _____

Reimbursements

- You may wish to purchase items from your classroom on your own and seek reimbursement. This is generally acceptable, but please keep the following in mind:
 - In some instances, purchases may need to be made by the individual and reimbursed by the district. Reimbursements over \$25 will need prior authorization.
 - The reimbursement is from your classroom budget. If you are overdrawn in your budget, you will not be reimbursed. You can check with Lesa or Michelle in the District Office if you would like to know your budget remaining.
 - Reimbursement requests must have the Reimbursement Claim form completed as well as original receipts attached.
 - If you are ordering from Amazon or another service, please make sure the item is delivered to the school's address. Items delivered to home addresses raise issues with our auditor.
 - If you are requesting reimbursement for mileage for travel associated with work, please complete the Mileage Report form and attach a printout showing the mileage from the school to your destination. (Always make your starting point Columbia Elementary School)

**COLUMBIA UNION SCHOOL DISTRICT
REIMBURSEMENT CLAIM FORM**

Pre-approval is necessary to present claim

Payee: _____

Mailing Address: _____

City/State/Zip: _____

Estimated expense: _____

***Pre-Approval Signature:** _____ **Date:** _____

ITEM #	PURPOSE	EXPENSE
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1)	_____	_____
2)	_____	_____
3)	_____	_____
4)	_____	_____
Total reimbursement requested		\$ _____

Receipts are required for ALL reimbursable costs

Signature of claimant Date Signature of Supervisor Date

Account: _____

Money Collections

- Remember, all monies collected for field trips or other reasons must be properly accounted for.
- Cash received for field trips should have a receipt or log of who paid and how much.
- At the end of each day, you should ensure any money collected is securely locked up in your classroom. You can also bring the money to the District Office to be placed in the safe.
- At the end of each week, money collected should be turned in to the District Office along with a copy of any checks, copy of receipts/log showing payment, and the Receipt for Funds Received form. You will need to count the money with DO staff present, so plan for a few minutes.
- Questions about money collections can be directed to Michelle Solis msolis@cusd49.com extension 174.

Columbia Union School District

Receipt for Funds Received

Date: _____

Money received for _____
 (Activity - cafeteria; student store; dances; candy sales; etc.)

Currency Received	Coin Received
x \$20 = \$ _____	x \$.25 = \$ _____
x \$10 = \$ _____	x \$.10 = \$ _____
x \$5 = \$ _____	x \$.05 = \$ _____
x \$1 = \$ _____	x \$.01 = \$ _____
x _____ = \$ _____	x _____ = \$ _____
x _____ = \$ _____	x _____ = \$ _____
Sub Total: \$ _____	Sub Total: \$ _____

Currency: \$ _____
Coin: \$ _____
Checks: \$ _____ (make copies and attach)
Total Funds: \$ _____

 Advisor/ Teacher

APPROVED BY:

VERIFIED BY:

 Superintendent/Principal

 Business Personnel

Professional Development/Conference Requests

- Select professional development opportunities which align with our school goals and your goals as a professional.
- Complete the form conference request form. Submit the form for approval to the principal with all conference information attached. Michelle will be registering for the conference once it has been approved. (Be sure to include estimates of all expenses including mileage, tolls, hotel, and meals in addition to the registration costs)
- The DO can make hotel reservations and prepay the stay if enough advanced notice is given. Otherwise, the cost of the hotel will be reimbursed to the employee if approved.
- Questions about conference request process can be directed to Michelle Solis (msolis@cusd49.com ext 174).



**COLUMBIA UNION SCHOOL DISTRICT
CONFERENCE REQUEST/EXPENSE FORM**

INSTRUCTIONS: The employee shall receive approval from the Superintendent/Principal or designee. Obtain this approval by completing Section I. Complete Section II upon return from the conference. Travel and conference expenses shall be in accordance with California Educational Codes, Sections 44016-44033. Reimbursement for conference expenses are to be in accordance with Board Policy Number 3350.

SECTION I: CONFERENCE REQUEST

REQUESTED BY: _____ DATE: _____

NAME OF CONFERENCE: _____

LOCATION: _____ DATE(S): _____

BRIEF DESCRIPTION OF CONFERENCE: _____

MEANS OF TRAVEL: PRIVATE CAR DISTRICT VAN OTHER: _____

ESTIMATED COSTS:

- | | |
|-----------------------|--|
| Registration: _____ | <input type="checkbox"/> Purchase Order Needed |
| Lodging: _____ | <input type="checkbox"/> Lodging Arrangements Needed |
| Transportation: _____ | <input type="checkbox"/> District Fuel Card Needed (Check out the day prior to your conference) |
| Other: _____ | |
| Total: _____ | |

ATTENDANCE TO THE ABOVE CONFERENCE IS: APPROVED DENIED

SUPERINTENDENT/PRINCIPAL OR DESIGNEE SIGNATURE: _____ Date: _____

SECTION II: REIMBURSEMENT REQUEST (ACTUAL EXPENSES)

**Itemized receipts must accompany this reimbursement claim section in order to receive reimbursement (the district will not reimburse for receipts that are not itemized, alcohol or personal items)*

Lodging	\$ _____
Meals*	
Breakfast (\$10.00 per diem)	\$ _____
Lunch (\$15.00 per diem)	\$ _____
Dinner (\$20.00 per diem)	\$ _____
Miscellaneous: (i.e. parking)	\$ _____

**Per diem is limited to \$45.00 for meals for any 24 hour period (breakfast \$10.00 per diem, lunch \$15.00 per diem, dinner \$20.00 per diem).*

I certify that the above claim is a true and accurate account of expenditure for the period indicated. ALL SIGNATURES ARE REQUIRED BEFORE PAYMENT WILL BE MADE.

CLAIMANT SIGNATURE: _____ Date: _____

APPROVED FOR PAYMENT:

DISTRICT OFFICE USE ONLY

SUPERINTENDENT/PRINCIPAL OR DESIGNEE SIGNATURE: _____ Date: _____

FUNDING SOURCE/ACCOUNT #: _____

Leave Requests

- Submit your leave requests to Lori Stewart lstewart@cusd49.com extension 172 with as much advance notice as possible.
- If you need to be absent due to an illness or other emergency, please call or text Lori Stewart at 209-559-3990 as soon as possible but no later than 1.5 hours before your start time.
- Consult your Master Bargaining Agreement for information on the types of leaves and to what situations they apply.

COLUMBIA UNION SCHOOL DISTRICT REQUEST FOR LEAVE

Name: _____ Today's Date: _____

I request leave on the following date(s):

From	to	Total # days /or hours
_____	_____	_____/____
_____	_____	_____/____
_____	_____	_____/____
_____	_____	_____/____

Substitute requested: YES NO Preferred Sub: _____

Type of Leave:

Personal Necessity (reason): _____
 Sick Leave
 Jury Duty Bereavement (relationship): _____
 School Business (type): _____

CLASSIFIED ONLY: Vacation Comp Time Floating Holiday

The above is true to the best of my knowledge.

Employee's Signature: _____ Date: _____

OFFICE USE ONLY

Approved Denied: _____

Supervisor's Signature: _____ Date: _____

Distribution: White: Personnel Yellow: File Pink: Employee

Prep Time

- You will have prep time while your class is participating in physical education or music throughout the week for lower grades, or as scheduled in the master schedule for upper grades.
- Library time is not prep time. If full classes are in attendance in the library, the classroom teacher is to accompany them.

Extra Duty Activities

- If you are providing extra duty services (coaching, leadership, etc) and are receiving the extra duty stipend, the activity must occur on time that you are not already contracted. You may use your lunch or before or after contracted time to lead the activity.
- Music and Drama are exceptions to this expectation as they meet during the school day as well as require significant time outside of school.
- After completion of the extra duty, submit the stipend request form to Lesa Edwards by the 10th of the month in which you wish to be paid.

COLUMBIA UNION SCHOOL DISTRICT

STIPEND PAY REQUEST FORM

Name:

Signature:

ATHLETICS	CLASSIFIED	CERTIFICATED	COMMENTS
Girl's Basketball	\$1,100	\$1,300	
Girl's Volleyball	\$1,100	\$1,300	
Boy's Basketball	\$1,100	\$1,300	
Wrestling	\$1,100	\$1,300	
Wrestling Assistant	\$700	\$700	
Track	\$700	\$900	
Cross Country	\$700	\$900	
Athletic Director		\$2,200	

ACTIVITIES			COMMENTS
Drama		\$1,600	
Student Council		\$1,600	
Activities Director		\$1,600	
Yearbook		\$1,030	
Music		\$1,650	
Art		\$1,600	
Hlstroy Day		\$360	
Science Fair		\$600	

OTHER			COMMENTS
Special Education		\$2,000	
Science Night		\$410	
Talent Show		\$700	
Lunch Detention		\$2,100	

OTHER DUTIES			COMMENTS
available amount		\$1,800	paid at \$26 per hour with pre-approval from administration

FINAL APPROVAL (required)

Administration Signature (required) :

Date:

APPROVED 09/13/2016

Early Release Days

- Early release Fridays will be designated for staff meetings and collaborative time. **Schedule personal appointments outside of this time.**
- If an employee is absent from an early release day, she/he is expected to turn in a leave request as this is contracted time.

Stored Curriculum Materials

- We have math modules and other support materials for the curriculum in storage on campus.
- Before asking to purchase any items, please check to see if we already have any items that would meet the same need.
- To access stored curriculum materials, please email Colleen Canida at ccanida@cusd49.com.

Field Trips

- General guidelines are: one in county and one out of county field trip per grade level, per calendar year that require transportation
 - Walking field trips are on a case by case basis
- Field trips require a 30 day notice, especially for those requiring transportation- As soon as you know, fill out the request.
- Requisition for check/payment to the destination must be turned in to the district office at least two weeks in advance.
- Please make sure you fill out the proper form with first and last names for school lunches & submit it at least 2 days prior.
- Complete a Field Trip Request Form & turn in to Lori in the front office (this will get it tentatively calendared)
- From there it goes to admin and then transportation approval
 - Upon approval, it will be calendared and Lori will get you permission slips, and on the day of, emergency kits.

Guest Visitors & Assemblies

- **Must be approved through admin.**
 - Please email the Principal and Office Secretary
- **Complete Facilities use form if your visitors will be anywhere other than your own classroom.**
 - Turn in the Facilities Permit to the District Office
 - This will get it calendared and alert others
 - It allows maintenance to be ready and set up for your visitors
- **The more notice the better for the gym, this is the classroom for P.E.**

Facilities Use Permits

- Must be completed for all meetings, clubs, and activities taking place on campus.
- Once completed, turn in to the **District Office**
- From there it gets calendered and distributed to the front office and MOT



USE OF FACILITIES APPLICATION AND PERMIT COLUMBIA UNION SCHOOL DISTRICT

22540 Parrotts Ferry Road, Columbia CA 95310 ~ (209) 532-0202 – Fax (209)533-7709

~*~*~*PLEASE PRINT~*~*~*

USER GROUP NAME: _____ PHONE: _____

ADDRESS: _____

REQUESTED BY (OFFICER): _____

ROOMS AND/OR EQUIPMENT REQUESTED (BE SPECIFIC):

- | | | | |
|------------------------------------|--------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> CAFETERIA | <input type="checkbox"/> KITCHEN | <input type="checkbox"/> GYM/MULTI-USE | <input type="checkbox"/> AMPHITHEATRE |
| _____ NUMBER OF TABLES | <input type="checkbox"/> UPPER FIELD | <input type="checkbox"/> LOWER FIELD | <input type="checkbox"/> PA EQUIPMENT |
| _____ NUMBER OF CHAIRS | <input type="checkbox"/> PARKING LOT | <input type="checkbox"/> OTHER: _____ | |

PURPOSE OF MEETING/EVENT: _____

DATE(S) & TIME(S) DESIRED: _____ EXPECTED ATTENDANCE: _____ ADULTS _____ KIDS TOTAL: _____

WILL AN ADMISSION CHARGE OR COLLECTION BE MADE? YES NO AMOUNT: _____ PROCEEDS USED FOR: _____

It is district policy that a district employee is on duty while school facilities are being used. If an employee is arranged to cover outside of his/her normal working hours, you will be asked to pay for the employee's time. User group agrees that the district makes no representations or warranties as to the condition or suitability of the facilities and agrees to use the facilities "as is." User group acknowledges it will inspect the facilities before use to determine suitability and note any possible hazards that could lead to bodily injury or property damage.

Any Group using the facilities of the Columbia Union School District shall be required to provide a Certificate of General Liability Insurance with a minimum limit of \$1,000,000 per occurrence and name the District an "Additional Insured", by separate endorsement to the liability insurance policy, for the period of the facility use.

HOLD HARMLESS AGREEMENT

The undersigned, on behalf of the user group, agrees to defend, indemnify, and hold harmless the Columbia Union School District, its Board of Trustees, agents, and employees from and against all liability, costs, losses, claims, actions, and judgments arising from bodily injury, personal injuries, property damage or otherwise, however caused, that may arise during use of facilities.

The undersigned agrees to be personally responsible for enforcement of state laws, Board Policy and the rules and regulations of this district including prohibiting the use of tobacco and any possession or use of alcoholic beverages on district property.

SIGNATURE OF AUTHORIZED REPRESENTATIVE FOR USER GROUP: _____

PRINTED NAME: _____ DATE: _____

TO BE COMPLETED BY SCHOOL PERSONNEL

Approved By Superintendent or Designee: _____ Date: _____

Calendarized By: _____ Date: _____

Personnel Assigned: _____

Duties Required: _____