

Welcome BEA Licensed Staff (Teacher Packet)

Billings Public Schools
Human Resources
Room 202
415 North 30th Street
Billings, MT 59101

**Please keep additional paperwork for
your records and training purposes.**

Friendly Reminder: HR needs the following documents:

- 1. Official college transcripts**
- 2. OPI Certificates copies from the last 3 years**
- 3. Montana Educator's License registered at the
Yellowstone County Courthouse.**

**HR needs all of your Official Transcripts and copies of
your MT OPI Certificate(s) for the last 3 years in order to
do your Initial Salary placement.**



**OFFICIAL
TRANSCRIPT**

Official college transcript(s)



opi.mt.gov

**Please contact all of your colleges and have the official transcript(s)
mailed to you. Please turn the official transcripts into HR. The
transcripts must be "Official", they cannot be copies.**

OPI Certificate(s).

**If you have any MT OPI Certificates with classes you have completed in
the last three (3) years, please submit copies of those certificates to HR.**

Montana Educator's License

**HR needs one of the two-sided copies of your Montana Educator's License
registered by the Yellowstone County Superintendent of Schools.**

**Yellowstone County Courthouse
County Treasurer's Office
Room 108
217 North 27th Street
Billings, MT 59101.**



**Please go to the
1st Floor, Room 103
for your insurance
paperwork.**

BEA Licensed New Hire Employees:

The Insurance Office will hand out Insurance packets and cover benefits during the new hire orientation in August. (March – August New Hires)

New Hire Employees:

Union employees working between 17-20 hours a week have the option to purchase Billings Public Schools Insurance.

**Billings Public Schools Insurance Office
Jennifer Kennedy
Phone: (406) 281-5045
Email: kennedyj@billingssschools.org**

LICENSED BEA NEW HIRE ORIENTATION

August

Lincoln Center – Board Room 415 N. 30th Street; Billings MT 59101



8:00 a.m. - 8:30 a.m. Welcome and Introductions

Greg Upham, Superintendent of Schools

Katie Nordstrom, Executive Director, Human Resources

David Cobb, Executive Director, School Leadership Support

Brenda Koch, Executive Director, School Leadership Support

8:30 a.m. - 8:50 a.m. Worker's Compensation; Shauna Foley and Annette Satterly from Helena Laurie Bogers, 281-5044, bogersl@billingsschools.org, HR, Room 202

8:50 a.m. – 9:05 a.m. Technology

Director of Technology, 281-5050, Room 306

Lindsey Principe, Technology, 281-5050, principel@billingsschools.org, Room 306

Help Desk Ticket under Quicklinks at bpsinfocentral.com; www.billingsschools.org; 281-5151; help@billingsschools.org

Policies and procedures for Technology; Computer Network Accounts Request Form; AUP; Attendance

9:05 a.m. – 9:25 a.m. Human Resources

Deane Reay, Human Resources Manager, 281-5041, reayd@billingsschools.org, Room 202

- Reminder of any incomplete hiring paperwork, official transcripts, license, ID Badge, and fingerprints; Employee ID numbers; Employee Online; Retirement (Teachers Retirement System); License Renewal;
- Initial salary placement
- "Credit Approval Requests" online submissions for educational step-up on salary schedule
- MT Educator's License must be registered with the County Superintendent's Office, Yellowstone County Courthouse, with a two-sided registered copy to Human Resources by October 22
- BEA Master Labor Agreement and District Policies on website www.billingsschools.org

9:25 a.m. – 10:00 a.m. Human Resources

Laurie Bogers, Human Resources Assistant, 281-5044, bogersl@billingsschools.org, Room 202

- Absence Management System, submitting absences and the process; Leave Process

BREAK – 15 MINUTES

10:15 a.m. – 10:30 a.m. Payroll, Tracy Berry, 281-5013, berryt@billingsschools.org, Room 208

- Direct Deposit; Monthly Paycheck; Employee Online; Contracts–10or12 payments; 12 Discretionary days

10:15 a.m. – 10:25 a.m. Emergency Preparedness/School Safety/MFPE and MFPE Trade Days Cyndi Pearce, 281-5069, pearcec@billingsschools.org, Room 220

10:25 a.m. – 10:30 a.m. Education Foundation, Krista Hertz, 245-4133; hertzka@billingsschools.org

10:30 a.m. – 10:45 a.m. Indian Education, Jennifer Smith, 281-5071; smithj@billingsschools.org

10:45 a.m. – 11:15 a.m. MFPE Labor Relations, President Rachel Schillreff; schillreffr@beabillings.org

- Complete your MFPE Labor Relations paperwork and return to BEA today or right away

11:15 a.m. – 12:00 p.m. Insurance

Jennifer Kennedy, Benefits Manager, 281-5045, kennedyj@billingsschools.org, Room 103

Complete your Insurance paperwork and return today or to Lincoln Center; Room 103, right away

**THE BOARD ROOM IS HALF WAY DOWN THE HALL ON THE 1ST FLOOR. FOLLOW SIGNS TO COURTYARD BOARD ROOM.
HIGH SCHOOL TEACHERS STAY IN BOARD ROOM FOR NEXT TRAINING.**

BEA Labor Agreement

Your BEA Labor Agreement is online on the
Billings Public Schools Website:

www.billingsschools.org

- On the home page click on "Faculty/Staff"
- Click on "Labor Information" in the peach box
- Select your Labor Agreement

BEA EDUCATIONAL SALARY STEP-UP PROCEDURES

Coursework will not be recorded for educational step-up unless prior approval of credit has been recommended by the principal or director and approved by the superintendent or designee (BEA Master Agreement). A "Credit Approval Request" must be done on line by the teacher/specialist and recommended by the Principal or Director and approved by the Superintendent or Designee **prior to the start date of all coursework** (college credit, community education and professional development courses approved through the PDAAC, OPI Renewal Units, or Continuing Education Units, CEU's, for specialists) used for educational step-up. **"Credit Approval Requests" submitted after the start date of any coursework will not be approved.**

Conditions for salary step-up credit:

- a) If the District pays the employee's registration fee, or travel expenses, or allows the employee to take Professional leave, an employee cannot take coursework for salary step-up. An employee must take Discretionary leave and pay for all expenses in order to use college credit, OPI Renewal Units, or CEU's for salary step-up.
- b) **Step-up credit will be awarded for OPI Renewal Units and may be awarded for participation in training on PIR days. No other step-up credit can be awarded on a calendared work day unless Discretionary leave is approved (BEA Master Agreement).**
- c) OPI Renewal Units after school hours, on weekends, or during the summer can be used for salary step-up. However, all expenses for the training will be paid by the employee and not the District.
- d) **Salary step-up will be given for each ten hours of OPI Renewal Units which can be used to maintain certification or licensure.** The Office of Public Instruction (OPI) does not accept any on-line CEU's for license renewal. All renewal units used for your Educator License renewal must be on an official transcript from an accredited college or an original certificate verifying OPI Renewal Units.
- e) Coursework must be educational, pertaining to an employee's area of teaching or endorsed area. Employee's taking coaching/activities coursework for salary step-up must be teaching Health Enhancement or have signed a coaching/extra-pay stipend contract with the District.

CREDIT APPROVAL REQUESTS FOR STEP-UP - ONLINE

To all BEA Employees:

Credit Approval Requests are processed online, similar to leave requests. Please go to this link, www2.billings.k12.mt.us/creditapproval, or the District's website, www.billingsschools.org, Quicklinks/Credit Approval Requests, **for prior approval of all coursework you want to use for educational step-up.**

To enter online Credit Approval Requests it is like checking your email, log in using your District username and password.

To submit a "Credit Approval Request" for Step Up -

- Select Request Type (College/University, OPI Renewal Units, or Continuing Education Units - for specialists only)
- Enter the name of the College/University or who is sponsoring the course, the Course Name, the Location of the Course and the Date of the Course
- If you have any notes you would like to add, enter them in the "Notes" section
- File Upload - click "attach document" if additional information is available regarding coursework; upload document in pdf or Word format. For Masters Degrees, put "Masters" as Course name and then, please attach your "Letter of Acceptance" and "Plan of Study"
- Submit Request - your request will go to your building principal/director before going to Human Resources for processing by the Superintendent's designee
- Once your request has been processed, you will receive an email regarding the status of your request

You can view all of your Credit Requests submitted, processed, and **not** recorded for salary step-up under **"My Requests."** After Human Resources receives verification from you that you have completed a pre-approved course (official transcript, copy of verification of MT OPI Certificate Renewal Units form, or CEU's for specialists) and records the coursework for salary step-up, the course will no longer be listed under "My Requests". You will be emailed an updated "Course History Report" showing the classes have been added to your "Course History Report" for step-up.

Procedures for BEA Educational Salary Step-up are listed under **"Procedures."**

Dates and times you and your principal/director submit and process a request are tracked, so please submit all coursework you want to use for educational step-up **prior** to the start of each class. Requests submitted after the start date of any coursework will not be approved.

Thank you for using the online form for all of your Credit Approval Requests. Please contact Human Resources if you have any questions.

EXAMPLE

Course History Report

00008723

TYPE INSTITUTION
INITIAL PLACEMENT

COURSE DESCRIPTION
INITIAL PLACEMENT BA00

TRANS DATE
T 08/22/2016

COURSE NO

TOTAL UNIT GRADE APPLIED TOTAL
0.00 BA00 08/22/2016 APP

0.00 TOTAL QUARTER CREDITS
0.00 TOTAL CREDITS APPLIED

0.00 AVAILABLE CREDITS

Sem Hrs X 1 1/2 = Qtr Hrs x 10 = OPI renewal unit
T= Official Transcript Receive

Billings Public Schools
07/20/2016 Course History

KXAMPLE

Course History Report

00008677

TYPE	INSTITUTION	COURSE DESCRIPTION	TRANS	DATE	COURSE NO.	TOTAL UNIT	GRADE	APPLIED DATE	TOT AP
INIT	INITIAL PLACEMENT	INITIAL PLACEMENT BA00	T	04/30/2015		0.00	BA00	08/24/2015	0
UL	UNIV LAYERN	CLASSROOM MGMT FOR ELEM TEA	T	05/05/2016		4.50	BA15	08/28/2016	4
UL	UNIV LAYERN	FEMALE STREET GANGS	T	07/07/2016		4.50	BA15	08/28/2016	4
UL	UNIV LAYERN	EFFECTIVE FEEDBACK/STUD ACHIE	T	07/07/2016		0.90	BA15	08/28/2016	0
UL	UNIV LAYERN	UNDERSTANDIGN CHILDHOOD OBE	T	07/07/2016		4.50	BA15	08/28/2016	4
PD	PROFESSIONAL DEVELOPMENT	NUMBER TALKS TRAINING	L	08/06/2015		0.60	BA15	08/28/2016	0
UL	UNIV LAYERN	EFFECTIVE FEEDBACK/STUD ACHIE	T	07/07/2016		3.60	BA30		0
UL	UNIV LAYERN	THE FLIPPED CLASSROOM	T	07/07/2016		4.50	BA30		4

23.10 TOTAL QUARTER CREDIT
15.00 TOTAL CREDITS APPLIED

8.10 AVAILABLE CREDITS

Sem Hrs X 1 1/2 = Qtr Hrs x 10 = OPI renewal unit
T= Official Transcript Receiver

Billings Public Schools
08/03/2016 Course History

BPS CREDIT OPTIONS



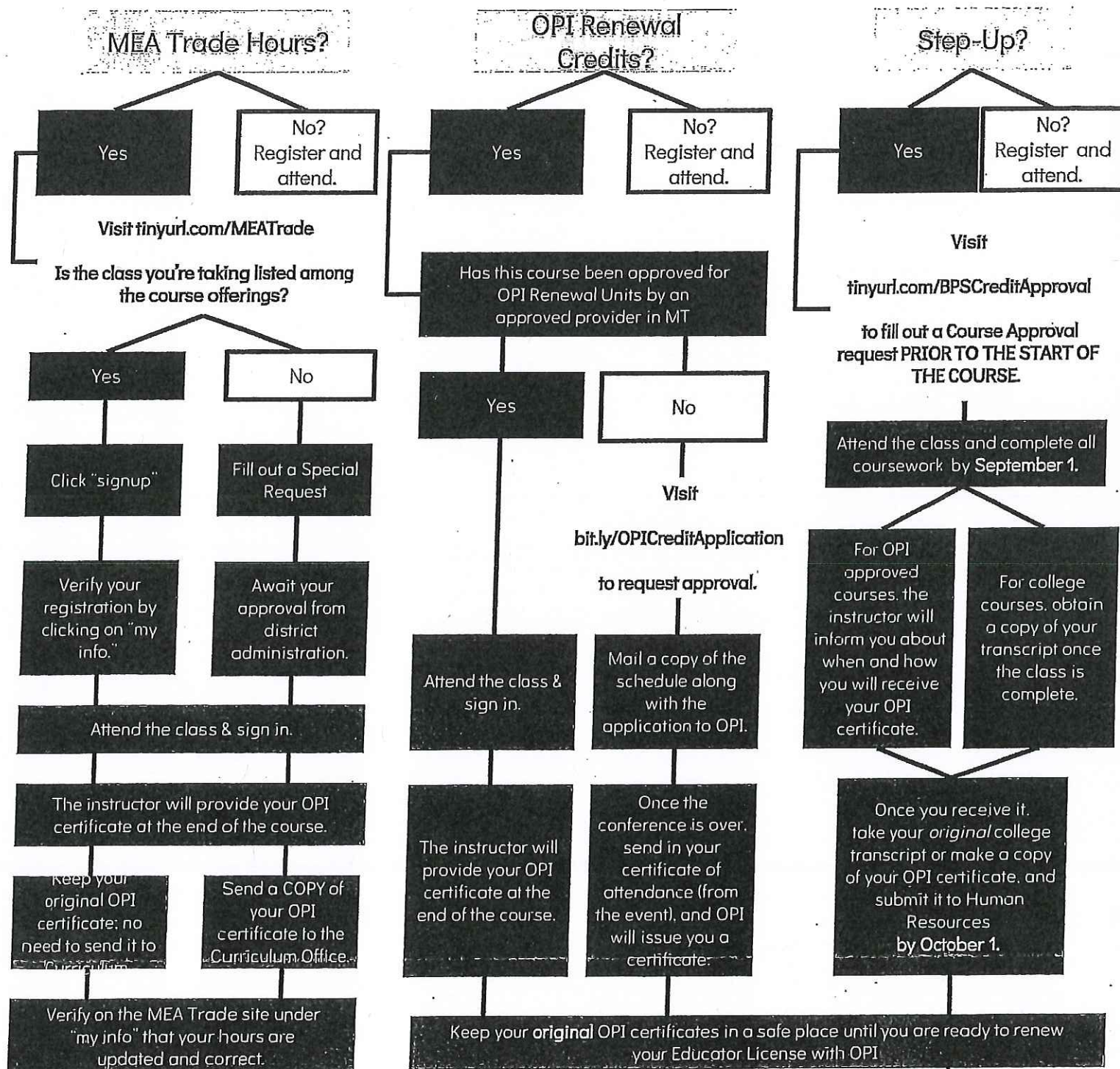
1

Register and pay for the course if necessary.

2

Which type(s) of credit do you need?

**You may simultaneously earn any or all of these. Be sure to follow the described procedures for each type of credit.*



Welcome to PIR Course Options

Welcome :

: | logout

courses

add classes

class rosters

my info

special request form

frequently asked
questions.

logout

MEA Trade Opportunities

By state law, the Billings Public Schools full-time teaching staff needs to complete seven days of PIR.

- two (2) orientation days before students start school
- three (3) district PIR day in January, April, and June

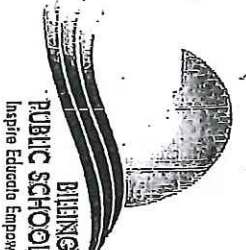
The remaining two(2) PIR days must be selected from the following options which occur on a non-pupil instruction day.

1. MEA-MFT Conference or other Professional Conferences
2. BPS MEA Trade Opportunities (*most will take place before MEA in October*)
3. Special Requests for a Professional Development offering other than the BPS MEA Trade Opportunities (must fill out special request form (*available on the website*) and obtain pre-approval.)

If you have questions regarding MEA / MEA Trade Days, please contact Cyndi Pearce, 251-5069, pearcec@billingssschools.org, or Kim Anthony, anthonyk@billingssschools.org, Room 222, Lincoln Center

STEP UP - You can, also, use MEA/MEA Trade Days for Step Up as long as you submit a prior, online, Credit Approval Request prior to taking MEA/MEA Trade Days. After you complete MEA/MEA Trade Days, if you want to use them for Step Up, please submit a copy of the MT OPI Certificate to HR.

BILLINGS PUBLIC SCHOOLS SALARY SCHEDULE FOR TEACHERS AND LICENSED EMPLOYEES 2019-2020



The 2019-2020 Salary Schedule reflects a 2 percent increase on each cell of the Salary Schedule.

		2019-20													
		2.00% Raise													
A	B	C	D	E	F	G	H	I	J	K	L	M			
BA	BA15	BA30	BA45	BA60	BA75	BA90	BA105	MA	MA15	MA30	MA45	PHD			
0	39,582	40,978	42,305	43,608	44,960	46,355	47,791	49,267	50,782	52,336	53,931	55,567	57,244	58,961	60,718
1	40,709	42,193	43,591	44,960	46,312	47,707	49,143	50,619	52,134	53,688	55,283	56,919	58,596	60,313	62,070
2	41,839	43,410	44,878	46,281	47,668	49,090	50,547	52,040	53,572	55,143	56,754	58,405	60,096	61,827	63,598
3	42,973	44,626	46,159	47,668	49,161	50,690	52,255	53,856	55,493	57,164	58,870	60,611	62,387	64,198	66,045
4	44,100	45,840	47,443	49,021	50,573	52,157	53,771	55,424	57,106	58,817	60,558	62,330	64,132	65,964	67,826
5	45,232	47,053	48,728	50,373	52,047	53,747	55,481	57,249	59,051	60,892	62,673	64,494	66,355	68,256	70,197
6	46,361	48,267	50,011	51,725	53,471	55,251	57,065	58,913	60,795	62,711	64,661	66,645	68,663	70,715	72,800
7	47,488	49,484	51,301	53,081	54,833	56,616	58,430	60,277	62,157	64,070	66,016	68,004	69,994	72,026	74,099
8	48,628	50,697	52,584	54,433	56,257	58,097	59,971	61,879	63,820	65,793	67,798	69,834	71,901	73,999	76,129
9	49,990	52,144	53,867	55,787	57,739	59,724	61,742	63,793	65,876	67,991	70,137	72,314	74,522	76,761	79,031
10	50,320	52,497	54,403	56,343	58,316	60,321	62,357	64,424	66,522	68,651	70,810	72,999	75,218	77,467	79,746
11	50,653	52,843	54,955	57,080	59,231	61,407	63,608	65,834	68,085	70,361	72,662	74,998	77,369	79,775	82,206
12	50,988	53,189	55,306	57,443	59,605	61,792	63,994	66,221	68,472	70,748	73,049	75,385	77,756	80,162	82,593
13	52,007	54,253	56,459	58,694	60,959	63,244	65,549	67,874	70,219	72,594	74,999	77,434	79,899	82,394	84,919
14	54,765	57,132	60,691	63,394	66,149	68,954	71,809	74,714	77,669	80,674	83,729	86,834	89,989	93,194	96,449

\$1,500 additional compensation is added to the MA columns for employees who earned Masters from an approved institution.
 \$2,000 additional compensation is added to the PHD column for employees who earned Doctorates from an approved institution.
 \$2,000 additional compensation shall be added to teacher's salaries who earned National Board Certification from the National Board
 Credits for each step up are 15 quarter credits. (Semester credits x 1.5 = quarter credits)
 (10 renewal units = 1 quarter credit)

Human Resources
 Billings Public Schools
 415 North 30th Street
 Billings, Montana 59101-1298
 Phone: (406) 281-5041 Fax: (406) 28
www.billingspublicschools.org

MT Educators License Renewal Directions through OPI (Every 5 years)



opi.mt.gov

If you have any questions about renewal of your license please go to [Frequently Asked Questions](#)

You may renew your license as early as 6 months prior to its' expiration. Renew early and avoid the last minute crunch!

NOTE: Those renewing licenses that expire in 2016 and subsequent years no longer need college credits; only 60 professional development renewal units are now required, ARM 10.57.215 (1).

1. Montana has gone to an online renewal process! Renewals are now done online (including payment) through our Montana State Educator Information System (MSEIS). The only exception is for those needing to enter out-of-state professional development hours; a paper application must be utilized for these renewals.

If you have not yet created an account in MSEIS, you will need to do this first. Once you have set up your account, the application wizard for renewal will walk you through the simple process of completing your application. You will be required to enter in all of your professional development coursework and renewal units so make sure you have the information available before you start the process.

Step by Step Instructions for the Online Renewal Process

2. You will no longer be required to send in official transcripts and renewal unit certificates at the time of renewal application! Renewal applications will now be randomly audited to verify accuracy. Therefore, even though you no longer need to submit your documents at the time you complete your renewal application, you will need to have them for your records. If your application is chosen for audit you will have 60 days to submit your documents for verification. Your license will **NOT** be issued if you are unable to provide the documents needed to verify your professional development activities.

If you did not have your renewal activities pre-approved or cannot find your renewal unit courses in our system please contact our office at 406-444-3150.

To Access the Montana State Educators Information System and complete your renewal application: **Online Application**

Resources for Renewal Units:

- **Teacher Learning Hub**

Billings Public Schools Username and Password Guide

Look for the icon below on bpsinfocentral.com/quick-links to log in.

Please call Technology at 281-5050 for assistance.



Timecard Online



Employee Online

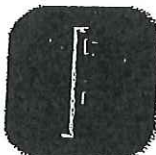
USERNAME: 0000 [EMPLOYEE ID #]

PASSWORD: Last 4 digits of your Social Security number

Upon initial log in, it will prompt you to change your password to your own selected value. Employee IDs will be given to you by HR.



PowerSchool for Administrators



PowerTeacher

USERNAME: Last name first initial @ billingsschools.org

PASSWORD: SAME PASSWORD AS EMAIL

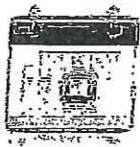


Email

USERNAME: Last name first initial @ billingsschools.org

PASSWORD: SELECTED VALUE UPON FILLING OUT ACCOUNT FORM

You must fill out an Account form first in order to gain access to Email, PowerSchool, Safe Schools, and the Help Desk. If you have a common last name, your email address may change slightly to include your middle initial.



Leave Requests

USERNAME: Last name first initial

PASSWORD: Same password set as your email



Safe Schools

USERNAME: Last name first initial

PASSWORD: Same password set as your email



Help Desk

USERNAME: Last name first initial

PASSWORD: Same password set as your email

EMPLOYEE ONLINE

YOUR EMPLOYEE ID NUMBER: 000_ _ _ _ _

Employee Online is a website that will provide school district employees and substitutes the means to view and modify your payroll/HR records via the School Internet. Items that are available to you are:

- ◆ Check Stubs
 - ⇒ View and print check stub information for past and current pay periods
 - ⇒ Leave Balances
 - ⇒ Direct Deposit (Updateable)
 - ⇒ Deferred Compensation
 - ⇒ Savings Bonds are not offered by the School District. This Option is not available
- ◆ W-4 Information
 - ⇒ Tax Status – State and Federal
 - You can also change the number of dependents declared and indicate additional withholding amounts
- ◆ W-2's
 - ⇒ View and print your W-2's starting with the 2015 tax year
- ◆ "What if" scenarios for future checks
 - ⇒ You may enter your expected future salary and receive an estimate next year's salary
- ◆ Benefits
 - ⇒ View your benefit package
 - ⇒ Dependent Coverage
- ◆ Personal Information
 - ⇒ View and update address and emergency contact information
 - ⇒ View and update phone numbers and e-mail addresses
 - ⇒ View the status of your current position. Status can include position, title, position history, salary schedule and grade, and pay rate(s)

Logging in: Please go to the School District's Website:

- ⇒ www.billingsschools.org
- ⇒ In the tool bar on the right hand side click on "RESOURCES"
- ⇒ In the drop down box click on "Staff Portal"
- ⇒ In the tool bar on the left hand side click on "MENU"
- ⇒ In the tool bar click on "QUICK LINKS"
- ⇒ Click on "Employee Online"

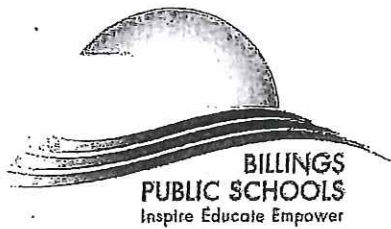
Employee ID: Your eight-digit Employee ID Number (The 0's are required before your Employee ID number)

Password: Last 4 digits of your SSN

Once you have logged in, you must select your own Password up to 16 characters. Changes made to the Password will take effect immediately.

Having trouble logging in or forgot your password?

- ◆ District Employees
 - ⇒ Please do a Help Desk ticket to have your account information reset
- ◆ Substitutes
 - ⇒ Please contact Technology @ (406)281-5058
 - Information Technology will need:
 - Your Employee ID number and Contact information



NEW ACCOUNT ONLY
Billings Public Schools
Computer Network Accounts Request Form

I, _____
First Name Middle Name Last Name
am requesting computer network user accounts.

Home Building

Room Number

Phone Number

Position

Be **SPECIFIC** (i.e. 6th Grade Teacher, Activities Secretary, Custodian, Music Teacher, Lunch Clerk, Nurse, GDA)

****By knowing your specific position we are able to give you the permissions to the accounts that you need.**

Classification - Check One (Check your Labor Agreement if unsure)

☐ BEA ☐ BCEA ☐ MPEA ☐ Contract Support ☐ Administrative ☐ Board ☐ Other _____

*Requested Password _____

***NOTE:** Passwords need to be 8 characters and must contain at least one capital letter and one number and are recommended to be a mixture of letters, numbers or symbols. We do not guarantee we can honor your request, but we will try. Passwords are case sensitive and should contain no spaces.

I will be working in the following buildings (Check all that apply):

- | | | | | |
|---------------------------------------|--|--------------------------------------|--|---|
| <input type="checkbox"/> Alkali Creek | <input type="checkbox"/> Burlington | <input type="checkbox"/> Orchard | <input type="checkbox"/> Lewis & Clark | <input type="checkbox"/> Lincoln Center |
| <input type="checkbox"/> Arrowhead | <input type="checkbox"/> Central Heights | <input type="checkbox"/> Poly Drive | <input type="checkbox"/> Medicine Crow | <input type="checkbox"/> Facilities |
| <input type="checkbox"/> Beartooth | <input type="checkbox"/> Eagle Cliffs | <input type="checkbox"/> Ponderosa | <input type="checkbox"/> Riverside | <input type="checkbox"/> Food Services |
| <input type="checkbox"/> Bench | <input type="checkbox"/> Highland | <input type="checkbox"/> Rose Park | <input type="checkbox"/> Will James | <input type="checkbox"/> Warehouse |
| <input type="checkbox"/> Big Sky | <input type="checkbox"/> McKinley | <input type="checkbox"/> Sandstone | <input type="checkbox"/> Career Center | <input type="checkbox"/> ECI |
| <input type="checkbox"/> Bitterroot | <input type="checkbox"/> Meadowlark | <input type="checkbox"/> Washington | <input type="checkbox"/> Senior | <input type="checkbox"/> Adult Ed |
| <input type="checkbox"/> Boulder | <input type="checkbox"/> Miles Avenue | <input type="checkbox"/> Ben Steele | <input type="checkbox"/> Sky View | |
| <input type="checkbox"/> Broadwater | <input type="checkbox"/> Newman | <input type="checkbox"/> Castle Rock | <input type="checkbox"/> West | |

As an employee of BPS, I agree to set educationally relevant objectives for any use of district technology equipment and will not leave students unattended while using technology under my supervision.

I have read district-provided Access to Electronic Information, Services and Networks Policy 5600 as well as Procedure 5600 and will abide by the terms therein. I understand that violation of the regulations is unethical and may constitute a criminal offense. Should I commit any violation of the regulations, computer privileges may be limited, disciplinary action may be taken and/or appropriate legal action may be pursued.

Signature _____

Date _____

Supervisor Signature (must be signed for processing) _____

Date _____

Please mail this form to: Lincoln Center, Technology Department, or Fax to 281-6199

Rules →

*Acceptable Use Policy for Computer Networks
Billings Public Schools*

Policy

Our goal in providing the availability of access to the Internet is to promote educational excellence in the schools by facilitating resource sharing, innovation, and communication. Utilization of information on the Internet can provide students with access to ideas and information not readily available within a traditional classroom setting. It can improve teaching by providing teacher training, collaboration and dissemination of successful educational practices, methods, and materials.

Compliance Statement: The use of Internet in Billings Public Schools through any provider is considered a privilege, not a right. Users are required to comply with both the letter and spirit of this policy. Users of computer and network resources agree to operate in compliance with international, federal, state, and local laws. Violations will be reviewed on a case-by-case basis and corrective action will be taken according to the following factors: severity of the violation, damage incurred as a result of the violation, and whether previous violations have occurred. In order to maintain this policy and the integrity of the system, the Billings School Board retains the right to review material on their computer networks and to modify this policy at any time.

Liability Limits: Billings Public Schools does not control the content nor assume responsibility for information retrieved from the Internet. Billings Public Schools assumes neither responsibility for costs or damages nor liability for copyright violations caused through inappropriate use of this service.

Students may encounter material that users, parents, teachers, or administrators consider inappropriate or offensive. Use of such material is not condoned and it is the student's responsibility not to initiate access to this type of information.

Users of the computer networks are expected to follow the Usage Guidelines, which accompany this policy. Inappropriate use of the Internet by a student will result in disciplinary measures and possible revocation of access.

Procedure

Usage Guidelines: "Access to the network" refers to utilizing the School District's computers, Local Area Networks, and Internet gateways. Individual account holders will be responsible for information transmitted via that account, regardless of the user.

Responsible use of the network includes activities sanctioned as reasonable and prudent. The following are examples of such activities:

- using the network access as a research tool for classroom projects;
- using direct electronic communication with other users;
- using networks to access other computer systems in the pursuit of educational goals;
- conforming to accepted etiquette practices, referred to as netiquette, on the Internet.

Examples of prohibited activities include, but are not limited to, the following:

- using the network for any illegal activities;
- using the network for non-school, commercial activities or the soliciting of individual account holders for commercial purposes;
- using the network to transmit or access materials that are inappropriate in the educational environment or offensive to community standards including but not limited to material that is obscene, child pornography or deemed harmful to minors (i.e. pornography, vulgar or racist material, etc.);
- the use of vulgar or offensive language;
- sending messages that are racist, inflammatory or demeaning to others, or that encourage illegal activities;
- sending or receiving copyrighted materials without the permission of the copyright holder or reproduction beyond "fair use" as defined by the Fair Use provision in the Copyright Act;
- logging on the network using another user's account without that user's permission;
- disclosing personal home phone numbers and addresses of themselves or other users;
- using any means to defeat security systems on any computer network or knowingly transmitting viruses;
- changing files that belong to another user;
- sending/using encryption technology to conduct activities deemed inappropriate;
- posting images of others without their permission;
- sending messages or other data anonymously;
- participation in flame wars (inappropriate arguments pertaining to posted messages), mail bombs (purposefully tying up another user's mailbox by transmitting large, unnecessary files), pyramids, or chain letters.

Billings Public Schools is pleased to provide this educational service to students and faculty. Should you have questions or concerns, please contact your building administrator for additional information.

Please keep this form for future reference.

Billings School District 2

STAFF

District-Provided Access to Electronic Information, Services, and Networks

General

The District makes Internet access and interconnected computer systems available to District students and faculty. The District provides electronic equipment and networks, including access to the Internet, as part its instructional program and to promote educational excellence by facilitating resource sharing, innovation, and communication. The District will provide training conducive to maximizing effective and appropriate use of these resources.

The District expects all staff to take responsibility for appropriate and lawful use of this access, including good behavior on-line. The District may withdraw staff access to its network and to the Internet when any misuse occurs. District teachers and other staff will make reasonable efforts to supervise use of computers, the network and Internet access.

Curriculum

Use of District electronic equipment and networks will be consistent with the curriculum adopted by the District, as well as with varied instructional needs, learning styles, abilities, and developmental levels of students and will comply with selection criteria for instructional materials and library materials. Staff members may use the Internet throughout the curriculum consistent with the District's educational goals.

Acceptable Uses

1. Educational Purposes Only. All use of the District's electronic network must be: (1) in support of education and/or research, and in furtherance of the District's stated educational goals; or (2) for a legitimate school business purpose. Use is a privilege, not a right. Students and staff members have no expectation of privacy in any materials that are stored, transmitted, or received via the District's electronic network or District computers. The District reserves the right to monitor, inspect, copy, review, and store, at any time and without prior notice, any and all usage of computers, systems, networks and Internet access and any and all information transmitted or received in connection with such usage.
2. Unacceptable Uses of Network.
 - A. Uses that violate the law or encourage others to violate the law
 - B. Uses that cause harm to others or damage to their property

- C. Uses that jeopardize the security of computers, systems, or networks of the District or others
- D. Exposing self or others to the potential of personal harm
- E. Uses that are commercial transactions.

Warranties/Indemnification

The District makes no warranties of any kind, express or implied, in connection with its provision of access to and use of its computer networks and the Internet provided under this policy. The District is not responsible for any information that may be lost, damaged, or unavailable when using the network or for any information that is retrieved or transmitted via the Internet. The District will not be responsible for any unauthorized charges or fees resulting from access to the Internet. Any user is fully responsible to the District and will indemnify and hold the District, its trustees, administrators, teachers, and staff harmless from any and all loss, costs, claims, or damages resulting from such user's access to its computer network and the Internet, including, but not limited to, any fees or charges incurred through purchase of goods or services by a user. The District expects a user or, if a user is a minor, a user's parents or legal guardian to cooperate with the District in the event of its initiating an investigation of a user's use of access to its computer network and the Internet.

Violations

If a user violates this policy, the District will limit a user's access or will withdraw access and may subject a user to additional disciplinary action. An administrator or building principal will make all decisions regarding whether or not a user has violated this policy and any related rules or regulations and may deny, revoke, or suspend access at any time, with that decision being final.

Policy History:

First Reading:	April 18, 2005 -- Board of Trustees
Second Reading:	June 13, 2005 -- School/Community Committee
Third Reading:	June 20, 2005 -- Board of Trustees
Adopted on:	June 20, 2005
Effective on:	July 1, 2005
Revised on:	

3/21/2016

Teacher Evaluations

BILLINGS PUBLIC SCHOOLS
Teacher Evaluation - Licensed Teacher

Name _____ School _____ Date _____

Grade Level _____ Subject Area _____

Observation Date _____ Pre-Conference Date _____

- | | |
|--|-----|
| 1. Lesson plans are current, relevant and easy to follow. | Yes |
| 2. The lesson objectives are consistent with the adopted District wide curriculum. | Yes |
| 3. The daily objectives are clearly communicated to the students. | Yes |
| 4. The teacher demonstrates skills that cause the entire class to participate in the daily lessons. | Yes |
| 5. The students are actively engaged in the learning process throughout the class period. | Yes |
| 6. The teacher checks student understanding regularly throughout the lesson. | Yes |
| 7. The teacher provides for individual learning and differentiated instruction. | Yes |
| 8. The material presented was well organized. | Yes |
| 9. The teacher demonstrates effective classroom management techniques. | Yes |
| 10. The teacher demonstrates knowledge for content. | Yes |
| 11. The teacher monitors student achievement and makes instructional decisions based on their performance. | Yes |
| 12. The teacher follows District Policy, rules and procedures. | Yes |
| 13. The teacher maintains professional relationships with the following people: a. <u>Students</u> b. <u>Parents</u> c. <u>Colleagues</u> d. <u>Administration</u> . | Yes |

The following signatures indicate the evaluation has been read and discussed.

_____ Evaluators Signature	_____ Date	_____ Teacher's Signature	_____ Date
-------------------------------	---------------	------------------------------	---------------

Employee ID

Note: The teacher may submit a written rebuttal within 20 working days.

HR FAX: 281-6196

Theresa	5043	Jacquelyn	5040
Deane	5041	Katie	5039
Shelly	5042	Laurie	5044

Insurance

Jennifer	5045	Brittaney	5987
Stephanie	5046		

PAYROLL FAX: 281-6179

Madonna	5115	Tracy	5013
BRENDA	5012	Teacher Payroll	
Admin / Sub Tchrs		Tessa	5015
DENISE	5014	Support Payroll	
Michelle	5018		

TECH SUPPORT

Burke	5151	Terry	5057
Connie	5060	Malachi	5056
Larry	5085		

Julie Glasson - ext 5073

Brenda Koch	5119	216-A
Judy Povilatis	5027	131-R
Kathy Olson	5120	220
Kim Anthony	5144	222-B
Marta McCallister	5066	214

MPERA

Website - mpera.mt.gov
100 N Park Avenue Suite 200
PO Box 200131
Helena, MT 59620-0131
Phone: (406)444-3154
Toll Free: (844)304-5452

TRS

Website - trs.mt.gov
PO Box 200139
1500 East Sixth Avenue
Helena, MT 59620-0139
Phone: (406)444-3134
Toll Free: (866)-600-4045

MiCare - ext. 5180

Absence Management

(800) 942-3767
Tech Support: 866-504-8222
Opt. 2 (Support) Opt. 1 (Absence)

OPI (Office of Public Instruction)

Website - opi.mt.gov
PO Box 202501
Helena, MT 59620-2501
Phone: (406)444-3095
Toll Free: (888)231-9393

Workers Comp

BPS: [REDACTED] ext. 5044
Shauna Foley
sfoley@mtsba.org
PO Box 7029
Great Northern Blvd, Ste 201
Helena, MT 59601
Phone: (406)457-4411
Toll Free: (877)667-7392

Yellowstone County Treasurer

Yellowstone County Courthouse
Room 203
217 n. 27th Street
Billings, MT 59101

Billings Public Schools

Quick Guide for Applications

- Visit our Web Page: www.billingschools.org
- Click on "Departments"
- Click on "Employment Opportunities" in the peach colored box
- You can choose "Request Technical Help" if you are having any trouble.
- The "Confirmation" section will alert you if any required elements are missing in order to "Submit" your application.
- We rely heavily on e-mail, so be sure to check your e-mail often once you have applied for a position.

YOU WILL NEED TO LOAD/SCAN INTO YOUR APPLICATION:

- 3 Letters of Recommendation
- A current Resume
- A Letter of Introduction

FOR ANY POSITION IN THE CLASSROOM, YOU WILL ALSO NEED TO LOAD/SCAN:

- College Transcripts or Workkeys Test Results
- Current Montana Teaching License for Professional Teaching positions or Substitute Teachers claiming certified status.

Need Computer/Internet Access

Job Service (Must be registered with them)
2121 Rosebud Dr. -- (406)6652-3080

Parmly Billings Library

510 N. Broadway -- (406)657-8257

Human Resources

Billings Public Schools

415 North 30th Street

Billings, Montana 59101-1298

Phone: (406) 281-5041 Fax: (406) 281-6196

www.billingschools.org



Office of Public Instruction: (OPI)

General Information: 406-444-3095

Educator Licensure: 406-444-3150

In-State Toll Free: 1-888-231-9393

Web Page: www.opi.mt.gov

Yellowstone County Treasurer

Yellowstone County Courthouse

Room 108

217 N. 27th St.

Billings, MT 59101



Deane Reay

Human Resources Manager

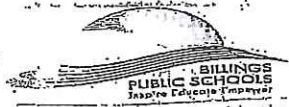
415 N 30th St
Billings, MT 59101

Phone: (406) 281-5041

Fax: (406) 281-6196

reayd@billingschools.org

BILLINGS PUBLIC SCHOOLS; Billings SD #2 Application Guidelines



In order to apply with Billings Public Schools, applicants create an online pre-employment file at www.billingsschools.org, click on Employment, fill out the online application and upload all documents: at least three letters of recommendation, résumé, application letter, and transcripts/WorkKeys Test. If you have a Montana Educators License or other licenses, upload them under licenses. Click on each and every Job ID# you are interested in applying for. Watch for new jobs to be advertised, go back into your online application and click on those Job ID#s, also, as they come available.

1. Visit the HR website for vacancy announcements:

Billings Public Schools posts vacancies on www.billingsschools.org, Job Service, www.opi.mt.gov, MSUB and Rocky Mountain College's websites. To apply go to www.billingsschools.org and click on Employment. Follow instructions carefully!

Type of Posting	Includes
Licensed	Teachers, Special Education, Counselors, School Psychologists
Professional	Social workers, Nurses, Occupational therapists, Physical Therapists, Speech Language Pathologists
Support	Instructional Paraprofessional Assistants, Special Needs Assistants, Secretaries, Custodians, Groundskeepers, Bus Assistants, Lunch Driver/Helper, Licensed Practical Nurses, General Duty Assistants, Crosswalk Guards, ...
Administrative	Principals, Executive Directors
Stipends	Coaches
Substitute Teachers	Substitute teachers
Substitute Support	Substitute support

2. Follow application instructions and plan ahead to meet the deadlines.

Remember, the application gets you an interview, and an interview gets you the job. Every application is evaluated and scored.

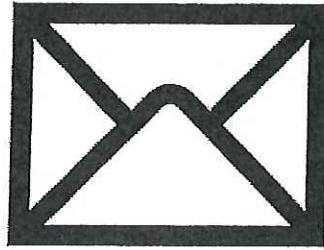
3. Administrators review the applicant files and select the ones to be interviewed.

An interview team made up of administrators, teachers and other staff ask standard questions of all candidates and rank their responses. Since past behavior is the best predictor of future behavior, most questions ask you to talk about a conflict, or "describe a time when..." Demonstrate your enthusiasm and positive attitude!

4. Expand your capabilities and your visibility.

- Sign up to Substitute in all areas at every school in town.
- Get experience in a wide variety of schools and settings because different schools have different clientele. Wide experience makes you more employable.
- Note that unsolicited contact with Billings SD #2 employees other than those in the Department of Human Resources Services may disqualify you from consideration for employment.
- Dress and act professionally at all times because in every school you're being evaluated by a lot of people, many of whom may remember you.
- Secure positive letters of recommendation, especially those from the building principal and those you worked closely with who observed your work ethics.

Also consider applying at other districts in Yellowstone County through their individual websites – Lockwood, Canyon Creek, Elder Grove, Blue Creek, Elvian, Independent, Shepherd, Laurel...



Items you can Inter-School Mail to Human Resources

1. OPI Certificates: HR only needs a copy of your OPI Certificate for your Step-Ups. Please keep your original certificate for OPI.
2. Official Transcripts: Please open your official transcripts first to verify that all classes are complete and do not say "In Progress" and your degree awarded is correct for Step-Up and Initial Hire.
3. Volunteer Background Checks: Make sure all of your volunteers have filled out a Volunteer Background Check form and you have given the form to your secretary. She will send it to HR to have it approved by Jeana Lervick, Executive Director of Human Resources.
4. Contracts: Please verify that you have selected your desired pay period (10-month or 12-month), sign and date, return white copy.
5. Plus more. If you have any questions, you may contact Human Resources.

ID Badges

Your photo ID Badge must be worn when working in Billings Public Schools. If you are needing a replacement ID Badge please call (406) 281-5043. If you have any additional questions please email reayd@billingschools.org



COPY

LINCOLN CENTER Parking Regulations and Vehicle Registration for Parking Permit

I. General

All vehicles using the Lincoln Center parking lots during regular working hours are required to display an appropriate parking authorization tag. **Regular occupants of the Lincoln Center lots are required to register their vehicles in the Human Resources Office, Room 202, and to display their parking tag in the vehicle when it is parked in the lot. Only one tag will be allowed per employee.** Temporary users of the lot will be required to display a temporary permit.

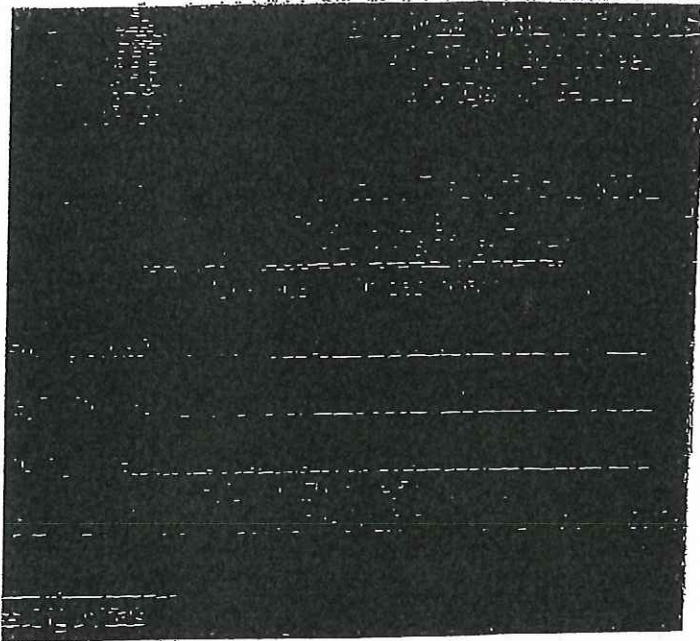
Possession and display of a parking tag or permit will entitle the user to park in School District spaces in the two north parking lots at the Lincoln Center. **The permit does not allow you to park on 29th Street or 30th Street.** If you park on 29th or 30th Street and receive a ticket from the City of Billings, it is your responsibility to pay the fine. Possession of a permit does not guarantee the user a parking space, nor does it imply the assumption of any liability by the District. It merely signifies that the user is authorized to use the lot.

The purpose of these regulations and the permit system is to ensure maximum availability of parking for employees of the Lincoln Center and those attending meetings at the Lincoln Center. It is also designed to exclude unauthorized users, particularly from surrounding office buildings. Authorized persons are asked to report violations, particularly by occupants of neighboring buildings, to the Human Resources office.



Parking at the Lincoln Center:

Parking at the Lincoln Center can be frustrating, to ease this frustration see attached the Parking Regulations and Vehicle Registration for Parking Permit. Note you will need a parking permit for the parking lot, below are two parking permits and an example of the violation.



BPS 902

Lincoln Center Parking Permit

If you come to the Lincoln Center 3-4 times a week, you would qualify for the permanent parking permit.



If you are an Adult/Community Education student and need a temporary parking permit,

EMPLOYEE RIGHTS UNDER THE FAMILY AND MEDICAL LEAVE ACT

THE UNITED STATES DEPARTMENT OF LABOR WAGE AND HOUR DIVISION

LEAVE ENTITLEMENTS



Eligible employees who work for a covered employer can take up to 12 weeks of unpaid, job-protected leave in a 12-month period for the following reasons:

- The birth of a child or placement of a child for adoption or foster care;
- To bond with a child (leave must be taken within one year of the child's birth or placement);
- To care for the employee's spouse, child, or parent who has a qualifying serious health condition;
- For the employee's own qualifying serious health condition that makes the employee unable to perform the employee's job;
- For qualifying exigencies related to the foreign deployment of a military member who is the employee's spouse, child, or parent.

An eligible employee who is a covered servicemember's spouse, child, parent, or next of kin may also take up to 26 weeks of FMLA leave in a single 12-month period to care for the servicemember with a serious injury or illness.

An employee does not need to use leave in one block. When it is medically necessary or otherwise permitted, employees may take leave intermittently or on a reduced schedule.

Employees may choose, or an employer may require, use of accrued paid leave while taking FMLA leave. If an employee substitutes accrued paid leave for FMLA leave, the employee must comply with the employer's normal paid leave policies.

While employees are on FMLA leave, employers must continue health insurance coverage as if the employees were not on leave.

Upon return from FMLA leave, most employees must be restored to the same job or one nearly identical to it with equivalent pay, benefits, and other employment terms and conditions.

An employer may not interfere with an individual's FMLA rights or retaliate against someone for using or trying to use FMLA leave, opposing any practice made unlawful by the FMLA, or being involved in any proceeding under or related to the FMLA.

ELIGIBILITY REQUIREMENTS

An employee who works for a covered employer must meet three criteria in order to be eligible for FMLA leave. The employee must:

- Have worked for the employer for at least 12 months;
- Have at least 1,250 hours of service in the 12 months before taking leave;* and
- Work at a location where the employer has at least 50 employees within 75 miles of the employee's worksite.

*Special "hours of service" requirements apply to airline flight crew employees.

REQUESTING LEAVE

Generally, employees must give 30-days' advance notice of the need for FMLA leave. If it is not possible to give 30-days' notice, an employee must notify the employer as soon as possible and, generally, follow the employer's usual procedures.

Employees do not have to share a medical diagnosis, but must provide enough information to the employer so it can determine if the leave qualifies for FMLA protection. Sufficient information could include informing an employer that the employee is or will be unable to perform his or her job functions, that a family member cannot perform daily activities, or that hospitalization or continuing medical treatment is necessary. Employees must inform the employer if the need for leave is for a reason for which FMLA leave was previously taken or certified.

Employers can require a certification or periodic recertification supporting the need for leave. If the employer determines that the certification is incomplete, it must provide a written notice indicating what additional information is required.

EMPLOYER RESPONSIBILITIES

Once an employer becomes aware that an employee's need for leave is for a reason that may qualify under the FMLA, the employer must notify the employee if he or she is eligible for FMLA leave and, if eligible, must also provide a notice of rights and responsibilities under the FMLA. If the employee is not eligible, the employer must provide a reason for ineligibility.

Employers must notify its employees if leave will be designated as FMLA leave, and if so, how much leave will be designated as FMLA leave.

ENFORCEMENT

Employees may file a complaint with the U.S. Department of Labor, Wage and Hour Division, or may bring a private lawsuit against an employer.

The FMLA does not affect any federal or state law prohibiting discrimination or supersede any state or local law or collective bargaining agreement that provides greater family or medical leave rights.



For additional information or to file a complaint:

1-866-4-USWAGE

(1-866-487-9243) TTY: 1-877-889-5627

www.dol.gov/whd

U.S. Department of Labor | Wage and Hour Division



NEED TIME?

The Employee's Guide to the Family and Medical Leave Act



UNITED STATES DEPARTMENT OF LABOR

An Introduction to the Family and Medical Leave Act

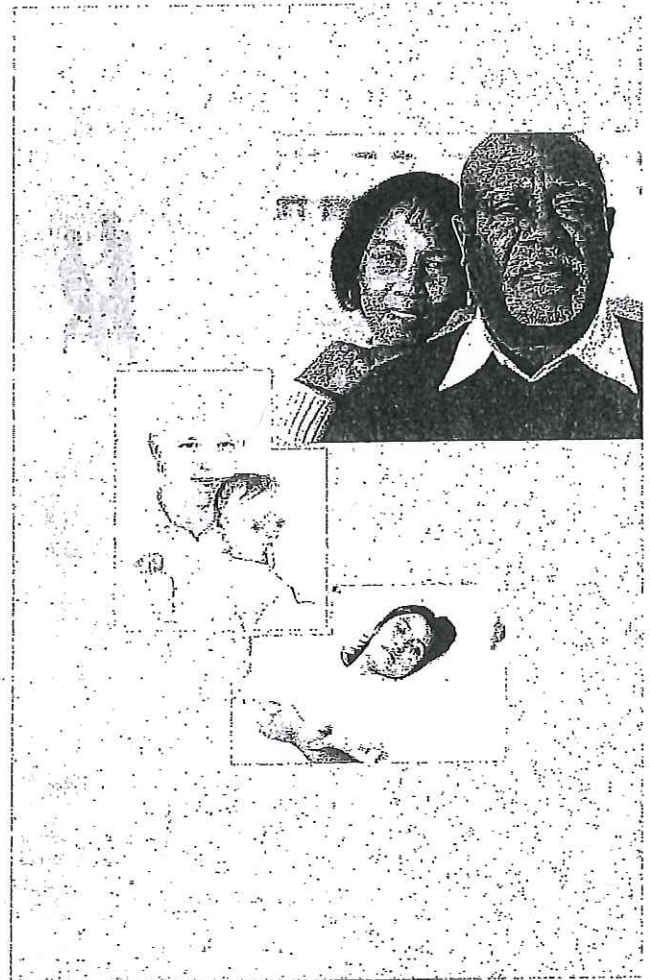
When you or a loved one experiences a serious health condition that requires you to take time off from work, the stress from worrying about keeping your job may add to an already difficult situation.

The Family and Medical Leave Act (FMLA) may be able to help. Whether you are unable to work because of your own serious health condition, or because you need to care for your parent, spouse, or child with a serious health condition, the FMLA provides unpaid, job-protected leave. Leave may be taken all at once, or may be taken intermittently as the medical condition requires.

This guide provides a simple overview of how the FMLA may benefit you. In your time of need, sometimes you just *need time*.

This Guide Explains:

- Who Can Use FMLA Leave?
- When Can I Use FMLA Leave?
- What Can the FMLA Do for Me?
- How Do I Request FMLA Leave?
- Communication with Your Employer
- Medical Certification
- Returning to Work
- How to File a Complaint
- Website Resources



Who Can Use FMLA Leave?

In order to take FMLA leave, you must first work for a covered employer. Generally, private employers with at least 50 employees are covered by the law. Private employers with fewer than 50 employees are not covered by the FMLA, but may be covered by state family and medical leave laws. Government agencies (including local, state and federal employers) and elementary and secondary schools are covered by the FMLA, regardless of the number of employees.

If you work for a covered employer, you need to meet additional criteria to be eligible to take FMLA leave. Not everyone who works for a covered employer is eligible.

First, you must have worked for your employer for at least 12 months. You do not have to have worked for 12 months in a row (so seasonal work counts), but generally if you have a break in service that lasted more than seven years, you cannot count the period of employment prior to the seven-year break.

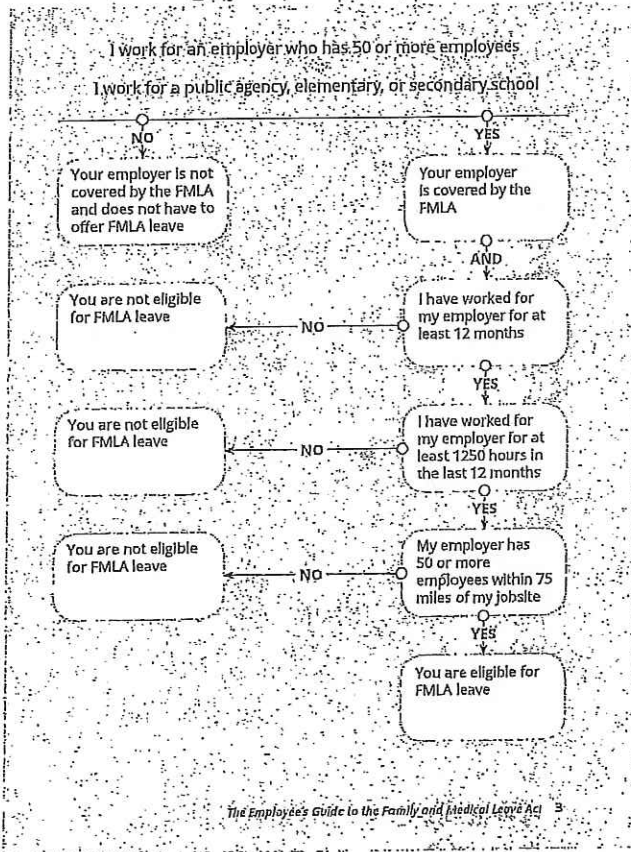
Second, you must have worked for the employer for at least 1250 hours in the 12 months before you take leave. That works out to an average of about 24 hours per week over the course of a year.

Lastly, you must work at a location where the employer has at least 50 employees within 75 miles of your worksite. So even if your employer has more than 50 employees, if they are spread out and there are not 50 employees within 75 miles of where you work, you will not be eligible to take FMLA leave.

Airline Flight Attendants/Flight Crew Employees

Due to non-traditional work schedules, airline flight attendants and flight crew members are subject to special eligibility requirements under the FMLA. You meet the hours of work requirement if, during the 12 months prior to your need for leave, you have worked or been paid for at least 60% of your applicable monthly guarantee, and have worked or been paid for at least 504 hours, not including personal commute time, or time spent on vacation, medical or sick leave.

Am I Eligible for FMLA Leave?



Expanding Your Family

You may take FMLA leave for the birth of a child and to bond with the newborn child, or for the placement of a child for adoption or foster care and to bond with that child. Men and women have the same right to take FMLA leave to bond with their child but it must be taken within one year of the child's birth or placement and must be taken as a continuous block of leave unless the employer agrees to allow intermittent leave (for example, a part-time schedule).

Parent

Parent means a biological, adoptive, step or foster father or mother, or any other individual who stood *in loco parentis* to the employee when the employee was a child. This term does not include parents-in-law.

Son or Daughter

Son or daughter (or child) means a biological, adopted, or foster child, stepchild, legal ward, or child of a person standing *in loco parentis*, who is either under age 18, or age 18 or older and "incapable of self-care because of a mental or physical disability" at the time that FMLA leave is to commence.

Spouse

Spouse means a husband or wife as defined or recognized in the state where the individual was married and includes individuals in a common law marriage or same-sex marriage.

In Loco Parentis

A person stands *in loco parentis* if that person provides day-to-day care or financial support for a child. Employees with no biological or legal relationship to a child can stand *in loco parentis* to that child, and are entitled to FMLA leave (for example, an uncle who cares for his sister's children while she serves on active military duty, or a person who is co-parenting a child with his or her same-sex partner). Also, an eligible employee is entitled to FMLA leave to care for a person who stood *in loco parentis* to that employee when the employee was a child. (See *Administrator's Interpretation No. 2010-3 and Fact Sheets 28B and C*.)

When Can I Use FMLA Leave?

If you work for an employer that is covered by the FMLA, and you are an eligible employee, you can take up to 12 weeks of FMLA leave in any 12-month period for a variety of reasons, including:

Serious Health Condition

You may take FMLA leave to care for your spouse, child or parent who has a serious health condition, or when you are unable to work because of your own serious health condition.

The most common serious health conditions that qualify for FMLA leave are:

- 1) conditions requiring an overnight stay in a hospital or other medical care facility;
- 2) conditions that incapacitate you or your family member (for example, unable to work or attend school) for more than three consecutive days and require ongoing medical treatment (either multiple appointments with a health care provider, or a single appointment and follow-up care such as prescription medication);
- 3) chronic conditions that cause occasional periods when you or your family member are incapacitated and require treatment by a health care provider at least twice a year; and
- 4) pregnancy (including prenatal medical appointments, incapacity due to morning sickness, and medically required bed rest).

Military Family Leave

The FMLA also provides certain military family leave entitlements. You may take FMLA leave for specified reasons related to certain military deployments. Additionally, you may take up to 26 weeks of FMLA leave in a single 12-month period to care for a covered servicemember with a serious injury or illness.

4 The Employee's Guide to the Family and Medical Leave Act

What Can the FMLA Do for Me?

If you are faced with a health condition that causes you to miss work, whether it is because of your own serious health condition or to care for a family member with a serious health condition, you may be able to take up to 12 weeks of job-protected time off under the FMLA.

If you take FMLA leave, your employer must continue your health insurance as if you were not on leave (you may be required to continue to make any normal employee contributions).

As long as you are able to return to work before you exhaust your FMLA leave, you must be returned to the same job (or one nearly identical to it). This job protection is intended to reduce the stress that you may otherwise feel if forced to choose between work and family during a serious medical situation.

Time off under the FMLA may not be held against you in employment actions such as hiring, promotions or discipline.

You can take FMLA leave as either a single block of time (for example, three weeks of leave for surgery and recovery) or in multiple, smaller blocks of time if medically necessary (for example, occasional absences due to diabetes). You can also take leave on a part-time basis if medically necessary (for example, if after surgery you are able to return to work only four hours a day or three days a week for a period of time). If you need multiple periods of leave for planned medical treatment such as physical therapy appointments, you must try to schedule the treatment at a time that minimizes the disruption to your employer.

FMLA leave is unpaid leave. However, if you have sick time, vacation time, personal time, etc., saved up with your employer, you may use that leave time, along with your FMLA leave so that you continue to get paid. In order to use such leave, you must follow your employer's normal leave rules such as submitting a leave form or providing advance notice. Even if you don't want to use your paid leave, your employer can require you to use it during your FMLA leave. For example, if you are out for one week recovering from surgery, and you have two weeks of paid vacation saved up, your employer can require you to use one week of your vacation time for your FMLA leave. When you use paid leave for an FMLA-covered reason (whether at your request or your employer's), your leave time is still protected by the FMLA.

5 The Employee's Guide to the Family and Medical Leave Act

How Do I Request FMLA Leave?

To take FMLA leave, you must provide your employer with appropriate notice. If you know in advance that you will need FMLA leave (for example, if you are planning to have surgery or you are pregnant), you must give your employer at least 30 days advance notice. If you learn of your need for leave less than 30 days in advance, you must give your employer notice as soon as you can (generally either the day you learn of the need or the next work day). When you need FMLA leave unexpectedly (for example, if a family member is injured in an accident), you **MUST** inform your employer as soon as you can. You must follow your employer's usual notice or call-in procedures unless you are unable to do so (for example, if you are receiving emergency medical care).

While you do not have to specifically ask for FMLA leave for your first leave request, you do need to provide enough information so your employer is aware it may be covered by the FMLA. Once a condition has been approved for FMLA leave and you need additional leave for that condition (for example recurring migraines or physical therapy appointments), your request must mention that condition or your need for FMLA leave. If you don't give your employer enough information to know that your leave may be covered by the FMLA, your leave may not be protected.

You do not have to tell your employer your diagnosis, but you do need to provide information indicating that your leave is due to an FMLA-protected condition (for example, stating that you have been to the doctor and have been given antibiotics and told to stay home for four days).

When your employer has the information necessary to determine if your leave is FMLA protected, it must notify you whether the leave will be designated as FMLA leave and, if possible, how much leave will be counted against your FMLA entitlement. If your employer determines that your leave is not covered by FMLA, it must notify you of that determination.

Communication with Your Employer

Ongoing communication between you and your employer will make the FMLA process run much more smoothly. Each of you has to follow guidelines about notifying the other when FMLA leave is being used.

You will need to inform your employer if your need for FMLA leave changes while you are out (for example, if your doctor determines that you can return to work earlier than expected). Your employer may also require you to provide periodic updates on your status and your intent to return to work.

Your employer must notify you if you are eligible for FMLA leave within five business days of your first leave request. If the employer says that you are not eligible, it has to state at least one reason why you are not eligible (for example, you have not worked for the employer for a total of 12 months).

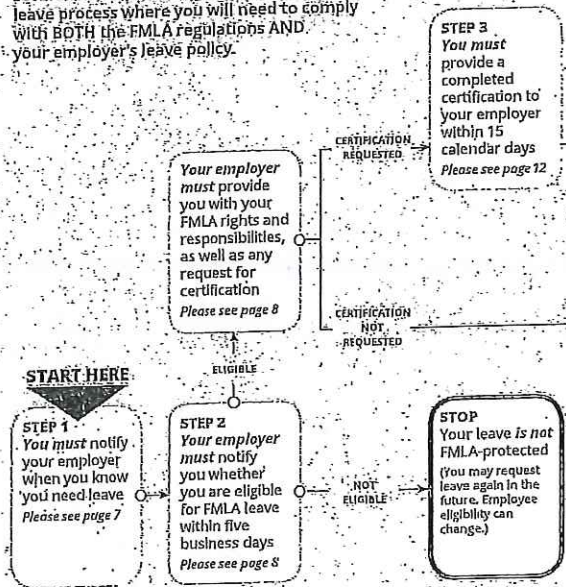
At the same time that your employer gives you an eligibility notice, it must also give you a notice of your rights and responsibilities under the FMLA. This notice must include all of the following:

- A definition of the 12-month period the employer uses to keep track of FMLA usage. It can be a calendar year, 12 months from the first time you take leave, a fixed year such as your anniversary date, or a rolling 12-month period measured backward from the date you use FMLA leave. You need to know which way your employer measures the 12-month window so that you can be sure of how much FMLA leave you have available when you need it.
- Whether you will be required to provide medical certification from a health care provider.
- Your right to use paid leave.
- Whether your employer will require you to use your paid leave.
- Your right to maintain your health benefits and whether you will be required to make premium payments.
- Your right to return to your job at the end of your FMLA leave.

The FMLA Leave Process

This flowchart provides general information to walk you through your initial request for FMLA leave step by step, and help you navigate the sometimes complicated FMLA process.

Please note, it is **ESSENTIAL** for you to be familiar with your employer's leave policy. There are several instances throughout the FMLA leave process where you will need to comply with BOTH the FMLA regulations AND your employer's leave policy.



Medical Certification

If your employer requests medical certification, you only have 15 calendar days to provide it in most circumstances. You are responsible for the cost of getting the certification from a health care provider and for making sure that the certification is provided to your employer. If you fail to provide the requested medical certification, your FMLA leave may be denied.

The medical certification must include some specific information, including:

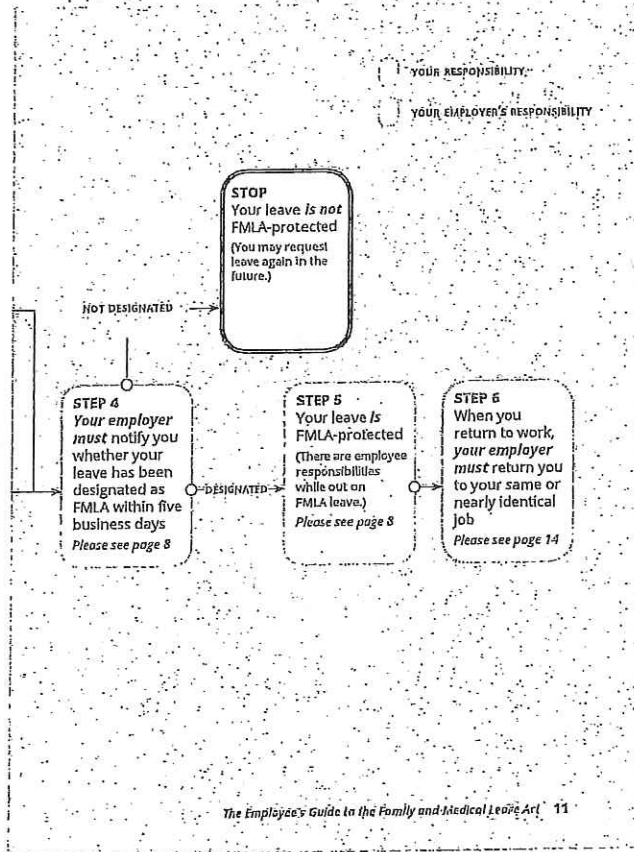
- contact information for the health care provider;
- when the serious health condition began;
- how long the condition is expected to last;
- appropriate medical facts about the condition (which may include information on symptoms, hospitalization, doctors visits, and referrals for treatment);
- whether you are unable to work or your family member is in need of care; and
- whether you need leave continuously or intermittently. (If you need to take leave a little bit at a time, the certification should include an estimate of how much time you will need for each absence, how often you will be absent, and information establishing the medical necessity for taking such intermittent leave.)

If your employer finds that necessary information is missing from your certification, it must notify you in writing of what additional information is needed to make the certification complete. You must provide the missing information within seven calendar days.

If your employer has concerns about the validity of your certification, it may request a second opinion, but it must cover the cost. Your employer may request a third opinion if the first and second opinion differ, but it must cover the cost.

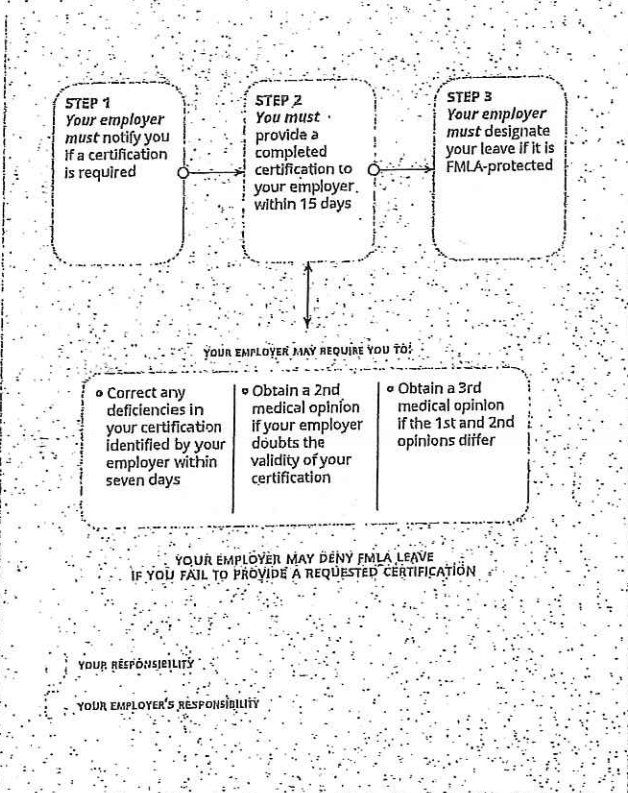
If your need for leave continues for an extended period of time, or if it changes significantly, your employer may require you to provide an updated certification.

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The Employee's Guide to the Family and Medical Leave Act 11

Certification at a Glance



Returning to Work

When you return to work, the FMLA requires that your employer return you to the same job that you left, or one that is nearly identical.

If you are not returned to the exact same job, the new position must:

- involve the same or substantially similar duties, responsibilities, and status;
- include the same general level of skill, effort, responsibility and authority;
- offer identical pay, including equivalent premium pay, overtime and bonus opportunities;
- offer identical benefits (such as life insurance, health insurance, disability insurance, sick leave, vacation, educational benefits, pensions, etc.); and
- offer the same general work schedule and be at the same (or a nearby) location.

Please keep in mind that if you exhaust your FMLA leave entitlement and are unable to return to work, your employer is not required to restore you to your position.

SPECIAL CIRCUMSTANCES:

Key Employees

Certain *key employees* may not be guaranteed reinstatement to their positions following FMLA leave. A *key employee* is defined as a salaried, FMLA-eligible employee who is among the highest paid 10 percent of all the employees working for the employer within 75 miles of the employee's worksite.

Teachers

Special rules apply to employees of local education agencies. Generally, these rules apply when you need intermittent leave or when you need leave near the end of a school term.

Please visit our website for more complete information.

How to File a Complaint

The U.S. Department of Labor's Wage and Hour Division (WHD) is responsible for administering and enforcing the Family and Medical Leave Act for most employees.

If you have questions, or you think that your rights under the FMLA may have been violated, you can contact WHD at 1-866-487-9243. You will be directed to the WHD office nearest you for assistance. There are over 200 WHD offices throughout the country staffed with trained professionals to help you.

The information below is useful when filing a complaint with WHD:

- your name
- your address and phone number (how you can be contacted)
- the name of the company where you work or worked
- location of the company (this may be different than the actual job site where you worked)
- phone number of the company
- manager or owner's name
- the circumstances of your FMLA request and your employer's response

Your employer is prohibited from interfering with, restraining, or denying the exercise of FMLA rights, retaliating against you for filing a complaint and cooperating with the Wage and Hour Division, or bringing a private action to court. You should contact the Wage and Hour Division immediately if your employer retaliates against you for engaging in any of these legally protected activities.

To contact the WHD office nearest you, visit:
www.dol.gov/whd/america2.htm

The Employee's Guide to the Family and Medical Leave Act 15



Please refer to *The Employee's Guide to Military Family Leave under the Family Medical Leave Act (WH1513)* for more specific information about taking FMLA leave under the provisions for military family leave.

Website Resources

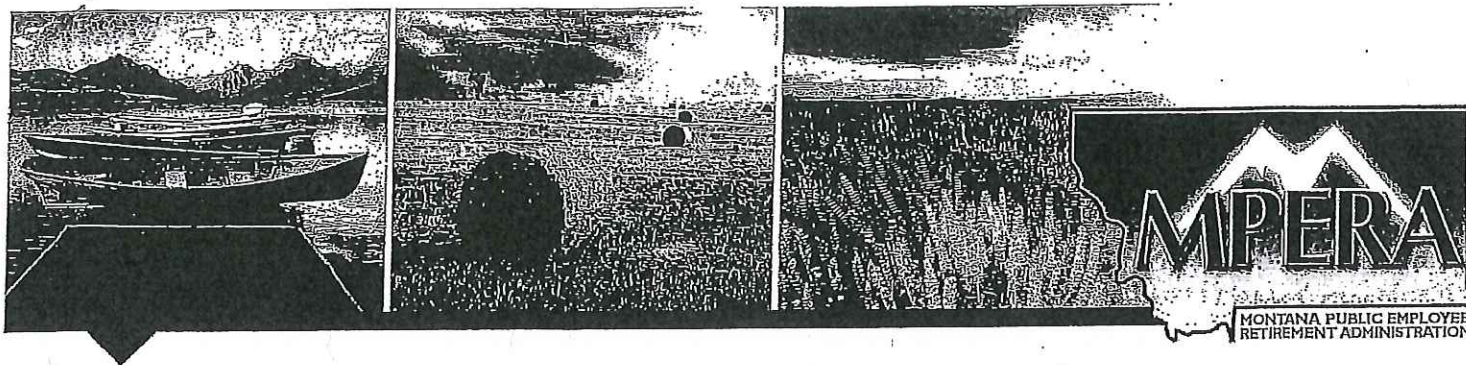
Visit the Wage and Hour Division website at www.dol.gov/whd/fmla for resources containing information about the FMLA, including:

- Key News
- General Guidance
- Fact Sheets
- e-Tools
- Posters
- Forms
- Interpretive Guidance
- Law
- Regulations

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WAGE AND HOUR DIVISION
UNITED STATES DEPARTMENT OF LABOR



State of Montana 457(b) Deferred Compensation Plan Highlights

What is the State of Montana 457(b) Deferred Compensation Plan?

The State of Montana 457(b) Deferred Compensation Plan is designed to help you save money from each paycheck and invest it to build assets for your retirement.

The Plan is sponsored by the Montana Public Employees' Retirement Board and allows you to contribute a portion of your paycheck before taxes are calculated (pretax) and/or on a Roth after-tax basis. The amount invested, plus any earnings, are put into an account to help you save for your retirement. Your pretax contributions will not be taxed until withdrawn at a future date. Roth contributions and any earnings may be withdrawn tax-free if certain criteria are met, as described below.

How does the State of Montana 457(b) Deferred Compensation Plan work?

You can choose how much you want to save from your salary each pay period. The money you save through the Plan is called a *contribution*. You can also choose how to invest the money you save using the Plan's investment options. The amount you save comes out of your paycheck before taxes (for traditional contributions) or after taxes (for Roth contributions).

How are traditional and Roth contributions different?

With traditional contributions, your contribution comes out of your paycheck before income tax is calculated. You pay no income taxes on any contributions or any earnings until you withdraw the money, which is usually at or near retirement.

Roth contributions come out of your paycheck after income taxes are paid. With Roth contributions, you can make a withdrawal tax free as long as the withdrawal occurs after age 59½, disability, or death, and at least five years after your first Roth after-tax contribution.

How much can I save through the State of Montana 457(b) Deferred Compensation Plan?

The minimum contribution is \$10 per month. The annual limit for 2017 is either 100% of your annual salary or \$18,000, whichever is less. If you make both traditional and Roth contributions, your total combined contributions cannot be more than \$18,000 for the year.

When can I join the State of Montana 457(b) Deferred Compensation Plan?

You can join at any time. Your contributions start on the first day of the month after you submit an application and Salary Deferral Agreement (SDA). To enroll in the Plan, contact your local office for the enrollment forms and information packet. Once you are enrolled, you will receive a personal identification number (PIN)¹ in the mail. You need the PIN to use the Plan website and voice response system. You can also call your Local Service Center at (406) 449-2408 or toll-free at (800) 981-2786, or visit 208 N. Montana Ave., Suite 106, Helena, MT 59601.

Can I change my contribution amount?

You can increase, decrease, or stop your contributions at any time. Changes take effect on the first day of the month following the filing of an amended SDA.

What are my investment options under the State of Montana 457(b) Deferred Compensation Plan?

The Plan offers a wide range of investment options in two categories:

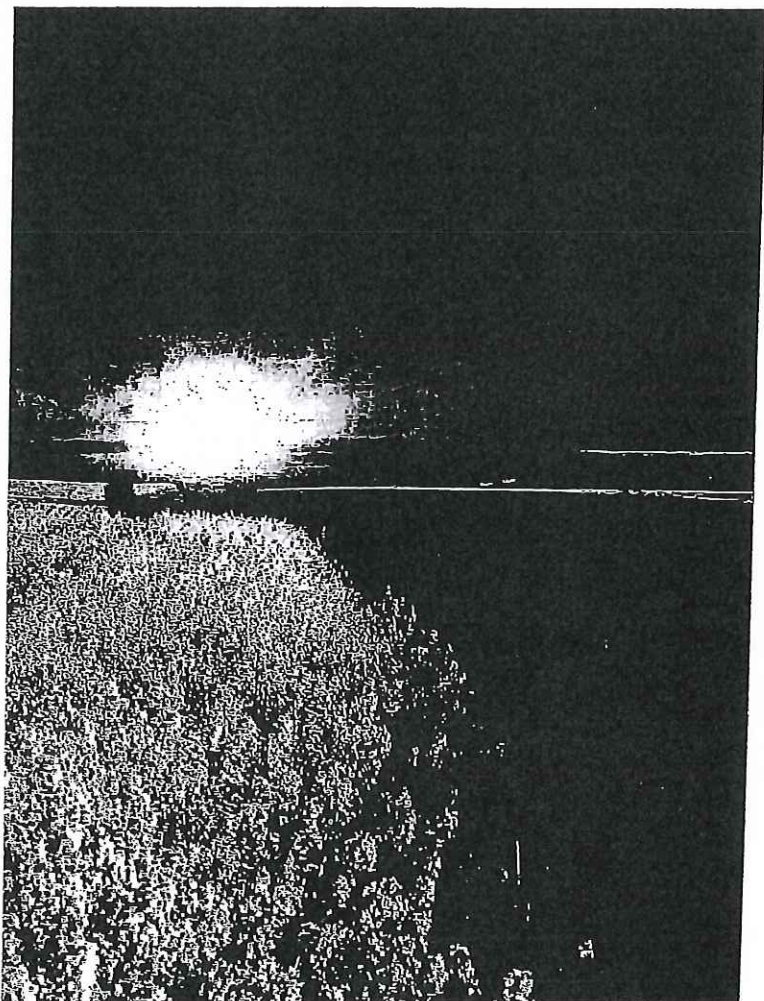
1. **Fixed option:** The Montana Fixed Fund is a more conservative investment that guarantees principal (your contributions) and has a guaranteed interest rate. The guaranteed interest rate is set each calendar quarter and may change each calendar quarter.²

2. **Variable options:** These are an assortment of mutual fund options selected by the Board with the assistance of the Employee Investment Advisory Council (EIAC) according to the criteria established in the Board's adopted Investment Policy Statement. These mutual fund options carry more risk than the fixed option because mutual funds hold different stocks, which fluctuate frequently. Unlike the fixed option, the variable options do not guarantee principal or investment results. Values may increase or decrease based on the performance of the mutual fund(s) you choose.

Please see *Investment Information* under *About Your Plan* tab at www.MPERAdcplans.com for a summary of the mutual funds currently available. Please note that these options may change from time to time based on the Board and EIAC's annual review.

Can I choose both fixed and variable investment options and transfer funds among options?

Yes. You can invest in both the fixed and variable options and transfer funds between options at any time. To start a transfer, use the automated voice response system at (877) 699-4015 or access your account at www.MPERAdcplans.com.³ The automated voice response system also lets you talk directly with a customer service representative during normal business hours.



Can I contribute more than the limit?

Yes. You can contribute more than the specified dollar limit in two cases.

1. **Standard Catch-up provision:** Under the Standard Catch-up provision, you can make contributions you would have made in prior years but did not. The maximum amount you can contribute with the Standard Catch-up is twice the applicable dollar limit. For 2017, the maximum is \$36,000 (applicable dollar limit of \$18,000 x 2). You can use the Standard Catch-up for any, or all, of the last three calendar years ending before the year you reach your selected normal retirement age (as defined by your retirement system) but not later than age 70½.
2. **Additional Age 50+ Catch-up provision:** If you are age 50 or older, you can make additional catch-up contributions, except during years when you use the Standard Catch-up. The additional catch-up amount is \$6,000 in 2017. You cannot use the Standard Catch-up provision and the Age 50+ Catch-up provision in the same year.

What happens if I leave my employment? When am I required to withdraw my money?

You have access to your money when you retire, separate from service with the participating employer, or reach age 70½. If you sever employment, you can:

1. **Keep your money invested** in the Plan and (if you choose) continue to manage your money within the offered investment options.
2. **Withdraw your money** in one of the approved methods, which may subject your funds to income tax.
3. **Roll your money** to another employer's plan that accepts rollovers or to an Individual Retirement Account (IRA). You are encouraged to discuss this option, and any potential fees and/or limitations related to all your available investment options, with your financial advisor/planner.

What if I need some of my funds while still working for my employer?

The IRC and the Plan allow you to withdraw funds while still employed for two reasons. These reasons come with strict requirements, which you must meet:

1. **An unforeseen emergency**, which must meet the IRC definitions and criteria and be approved by the Board.
2. **A de minimis withdrawal**, which allows a withdrawal while you are employed if your balance is \$5,000 or less, you have not contributed for the last 24 months, and you have never before used this option.

Are any withdrawals subject to penalty?

You may have to pay income tax on your State of Montana 457(b) Deferred Compensation Plan withdrawals — whether you are a terminated employee or an active employee qualifying for a withdrawal under the previously described provisions — but there are no penalties for early withdrawal. However, if 401(k), 401(a), or 403(b) plan assets from previous employers or IRAs are rolled over into your State of Montana 457(b) Deferred Compensation Plan, you may pay a 10% penalty for withdrawals of transferred assets if you make the withdrawal before age 59½. Also, your State of Montana 457(b) Deferred Compensation Plan assets that you transfer into another plan may be subject to the early withdrawal penalty when you make a withdrawal from the new non-457 plan.

Does the State of Montana 457(b) Deferred Compensation Plan accept QDROs?

Yes. Qualified Domestic Relations Orders (QDROs) are accepted by the Plan. A QDRO is a judicial order as part of a property division in a divorce or legal separation. Contact the Montana Public Employees' Retirement Administration (MPERA) for the proper procedures and format for filing.

Can I convert my existing account to a Roth account?

No. In-plan conversions from traditional to Roth savings are not allowed. However, you can roll over assets from a previous employer's eligible Roth 457 plan into the Montana Roth 457 Plan. You can also roll over approved assets from eligible IRAs or 401(a), 401(k), 403(b), and 457 plans into your traditional (tax-deferred) State of Montana 457(b) Deferred Compensation Plan. You are encouraged to discuss rolling money from one account to another with your financial advisor/planner and considering any potential fees and/or limitations of investment options.

May I roll my deferred compensation account balance into an IRA or another tax-deferred program?

Yes. You can roll your money — when you retire or terminate service — into another eligible retirement plan or an IRA; however, if you

take a withdrawal from that account before you reach age 59½ or older, you may be subject to a 10% early withdrawal penalty.

How often will I receive a statement?

Within a few weeks of the end of each calendar quarter, you will receive a Statement of Account that includes a complete history of your activity for that quarter. For each investment option, the statement will show your contributions, any earnings or losses, fees, and the beginning and ending account balances. These statements will be mailed to your home address.

What is the cost to participate in the State of Montana 457(b) Deferred Compensation Plan?

The Plan has two types of fees:

1. Administrative asset-based fees

- This fee varies depending on your account balance. The first \$20,000 (in your account) will be charged 0.44%, the next \$30,000 will be charged 0.34%, the next \$50,000 will be charged 0.24%, and anything over \$100,000 will be charged at 0.00%.
- Participants with balances greater than \$100,000 can expect to pay \$77.50/quarter or \$310/year in total administrative fees.
- This fee is prorated across all investment options and shown as a dollar amount on your statement. This fee is assessed quarterly.

2. Investment management fees

- Each fund has its own fund operating expenses that vary depending on the investment options you select. (Refer to *Investment Information* under *About Your Plan* tab at www.mperadcpplans.com.)
- The Montana Fixed Fund also has an investment management fee of approximately 0.40% — the quarterly declared rate is calculated after this fee has been deducted.



What are the advantages of participating in the State of Montana 457(b) Deferred Compensation Plan?

1. **Tax-deferred savings** – With traditional tax-deferred savings, you pay no income taxes on any contributions or any earnings until you withdraw the money, which is usually at or near retirement. As noted earlier, with Roth contributions, you can make a withdrawal tax-free as long as the withdrawal occurs after age 59½, disability, or death, and at least five years after your first Roth after-tax contribution.
2. **Convenient investing** – Automatic payroll deduction makes it easy for you to save and invest regularly through the Plan's choice of investment options covering all asset class categories.
3. **Financial education** – On www.MPERAdcplans.com, you can learn about retirement planning concepts such as mutual funds, asset allocation, and risk tolerance. Financial tools and calculators are also available.
4. **Local representatives** – Empower Retirement has representatives available in Montana to answer questions about retirement planning, the Plan, and your account.⁴

What are the disadvantages of participating in the State of Montana 457(b) Deferred Compensation Plan?

1. **Accessibility** – You may not receive your funds until you sever employment except in the circumstances previously noted.
2. **Defined Plan investment options** – You can invest only in the options within the Plan, and these options may not always meet your preferences and goals.

Selection of investment options

The Board, with the assistance of the EIAC and an outside consultant, reviews all of the State of Montana 457(b) Deferred Compensation Plan's investment options each year. The annual review ensures that the offered investment options meet certain criteria established in the Board's Investment Policy Statement and provide the opportunity to achieve a diversified account.⁵

Please consider the investment objectives, risks, fees, and expenses carefully before investing. For this and other important information, you may obtain prospectuses for mutual funds and disclosure documents from your registered representative. Read them carefully before investing.



For more information, please contact the Plan's contracted recordkeeper:

Empower Retirement • 208 N. Montana Avenue, Suite 106 • Helena, MT 59601

(406) 449-2408 • (800) 981-2786

If there are any discrepancies between this document and the Plan Document, the Plan Document will govern.

¹ The account owner is responsible for keeping the assigned PIN confidential. Please contact Empower Retirement immediately if you suspect any unauthorized use.

² The Montana Fixed Fund is a separate account product offered by Pacific Investment Management Company (PIMCO) and is not backed by the general assets of Great-West Life & Annuity Insurance Company. GWFS Equities, Inc. is not affiliated with PIMCO.

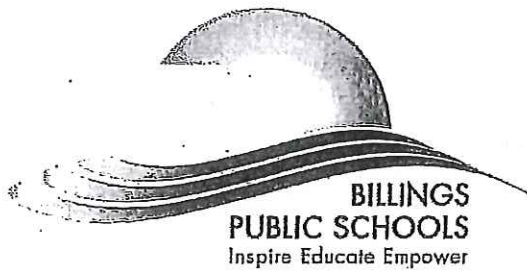
³ Access to the voice response system and/or any website may be limited or unavailable during periods of peak demand, market volatility or systems upgrades/maintenance or for other reasons. Transfer requests received on business days prior to close of the New York Stock Exchange (4 p.m. Eastern time or earlier on some holidays or other special circumstances) will be initiated at the close of business the same day the request was received. The actual effective date of your transaction may vary depending on the investment option selected.

⁴ Representatives of Empower Retirement do not offer or provide investment, fiduciary, financial, legal or tax advice or act in a fiduciary capacity for any client unless explicitly agreed to in writing. Please consult with your investment advisor, attorney and/or tax advisor as needed.

⁵ Diversification does not ensure a profit and does not protect against loss in declining markets.

Core securities, when offered, are offered through GWFS Equities, Inc. and/or other broker-dealers.

GWFS Equities, Inc., Member FINRA/SIPC, is a wholly owned subsidiary of Great-West Life & Annuity Insurance Company (GWL&A). Empower Retirement refers to the products and services offered in the retirement markets by GWL&A and its subsidiaries. The trademarks, logos, service marks and design elements used are owned by their respective owners and are used by permission. Core investment options may be offered through mutual funds, collective trust funds and a fixed fund. GWFS Equities, Inc., or one or more of its affiliates, may receive a fee from the investment option provider for providing certain recordkeeping, distribution and administrative services. ©2016 Great-West Life & Annuity Insurance Company. All rights reserved. Form CB1002PH457b AM75280-1016



Billings Public Schools

415 North 30th Street

Billings, Montana 59101-1298

Phone: (406) 281-5017 Fax: (406) 281-6179

www.billingschools.org

403(b) Eligibility Notice

TO ALL EMPLOYEES OF THE BILLINGS SCHOOL DISTRICT

The Billings School District offers a 403(b) plan for qualified employees of the District. Employees are eligible to participate as described below:

You are eligible to make either pre-tax elective or Roth 403(b) contributions, or a combination of pre-tax and Roth 403(b) contributions, if you wish. However, the District excludes certain categories of employees from making contributions to the 403(b) plan, including:

- Individuals not willing to contribute at least \$200/year
- Individuals who are student workers
- Individuals who are non-resident, non-U.S. citizens.

A 403(b) plan is a tax-deferred retirement program that permits an employee to defer a percentage of his/her pretax compensation (a "deferral") and have the sum deposited into a 403(b) account that the employee maintains with a 403(b) investment vendor. Amounts deferred into a 403(b) account, and any earnings on those deferrals are generally not taxed until the employee makes a withdrawal from his/her 403(b) account following separation from service with the District.

In addition, the District's 403(b) plan also permits an employee to make Roth 403(b) contributions. A Roth 403(b) contribution is an after-tax payroll deduction contribution which is separately tracked from pretax 403(b) deferrals. Unlike pretax 403(b) deferrals, Roth 403(b) contributions grow tax free. Since federal income taxes are paid up front, before the amounts are contributed to a Roth account, distributions from Roth 403(b) accounts are not taxed as long as the account has been open and maintained for at least five years prior to the distribution and the distribution is made only after the occurrence of certain conditions.

Eligible employees may contribute the following to their 403(b) account in 2015: \$18,000 plus an additional \$6,000 for anyone over the age of 50. One may also be eligible for the 15 Years of Service Catch Up, this can be determined by contacting the plan's Third Party Administrator (United Pension Administration 800-888-4068 or upahelp@msn.com).

The District maintains a list of approved 403(b) vendors and appropriate contact information for each vendor. A copy of this list is available from the Payroll Department. Employees should contact each vendor for information about the 403(b) products and services it offers.

ANNUAL 403(b) PLAN ELIGIBILITY NOTICE

Billings Public Schools offers all employees the opportunity to save for retirement by participating in the Billings Public Schools 403(b) Plan ("the 403(b) plan"). You can participate in this plan by making pre-tax contributions and Roth 403(b) after-tax contributions. You are eligible to start participation in this plan at any time.

Not yet contributing to the 403(b) plan?

To start your contributions to the 403(b) plan, you must establish an account with a district-approved investment vendor. The approved 403(b) vendors and contact information can be found on the district website under *Staff/Employee Information Center*. After establishing an account, a Salary Reduction Agreement must be completed and signed by the vendor selected. The Salary Reduction Agreement form is also on the district website in the same location as vendor information.

Already contributing to the 403(b) plan? Great News! You have an opportunity to increase your contributions to the 403(b) plan.

If you are already contributing to the 403(b) plan, you may be able to increase your pre-tax contributions and Roth 403(b) after-tax contributions. To change your contributions, complete and return a salary reduction agreement to the Payroll Department.

Of course, you can keep your contributions at their current level. In the alternative, if your current financial situation means that you need to lower your saving for retirement, you can change your contribution rate by completing and returning a Salary Reduction Agreement as described above.

How much can I contribute?

In general, you may contribute up to \$18,000 in 2016. This amount may be adjusted annually. Also, if you are at least 50 years old and/or you have completed at least 15 years of service with the district, you may also be able to make additional catch-up contributions. Each catch-up has its own limits.

This notice is not intended as tax or legal advice. Neither your employer nor the investment providers offering retirement savings products under the plan can provide you with tax or legal advice. Employees are encouraged to contact their financial representative or tax professional with any questions.

For further information, contact Tracy Berry at (406)281-5013.



Billings Public Schools 403b Vendor Listing

Ameriprise	Tim Christensen	(406) 294-9294	timothy.p.christensen@ampf.com
ING/Iliac	Roy Close	(406) 294-7500	roy.close@raymondjames.com
	Charlie Klimas	(406) 265-9000	cklimas@gwnsecurities.com
	Brian Lethert	(406) 652-7744	blethert@wradvisors.com
	Julie Sullivan	(406) 255-8700	julie.sullivan@morganstanley.com
Security Benefit	Torrey Holmquist	(406) 543-2340	torrey@nwiainvest.com
	Charlie Klimas	(406) 265-9000	cklimas@gwnsecurities.com
	Tarra Grazley	(406) 259-6651	tarra@ttgfinancial.com
Mass Mutual	Ed Aders	(406) 248-7851	eaders@dadco.com
Valic	Ferd Duchesneau	(406) 690-4284	fernand.duchesneau@valic.com
Horace Mann Insurance	Linda Thompson	(406) 702-1337	Linda.Thompson@horacemann.com



MONTANA VOTER REGISTRATION APPLICATION

Fields marked with an asterisk (*) are required. If you do not provide all of the required information, your application to register to vote will not be complete. UNDER FEDERAL AND/OR STATE LAW ALL ELECTORS MUST PRESENT ID WHEN VOTING. Please type or print clearly using black or blue ink. COMPLETE FORM AND SUBMIT TO COUNTY ELECTION OFFICE.

ELIGIBILITY REQUIREMENTS AND IDENTIFYING INFORMATION

NOTE: VOTER REGISTRATION REQUIRES U.S. CITIZENSHIP

1 Check all that apply: ☐ New Registration ☐ Name Change ☐ Address Change ☐ Signature Update ☐ Other

2 Are you a citizen of the United States?* Yes ☐ No ☐
Will you be at least 18 years of age on or before the next election?* Yes ☐ No ☐
Will you be a Montana resident for at least 30 days before the next election?* Yes ☐ No ☐
*If you checked "No" in response to any of these questions, do not complete this form.

3 Last Name* First Name* Middle Name Suffix (Jr., Sr., Etc.)

4 Date of Birth* Contact Phone Number Email Address
month / day / year

5 Select one of the following and provide the required information*

- ☐ I have a Montana Driver's License or Montana ID and that number is _____
☐ I do not have a Montana Driver's License or MT ID card. The last 4 digits of my SSN are _____
☐ I do not have a Montana Driver's License or MT ID card, or a Social Security Number. I have attached a copy of a photo ID that shows my name, or acceptable ID that shows my name and current address (paycheck stub; utility bill; bank statement; or government document).
ID numbers provided above are kept confidential and are not available for public inspection.

6 Montana Residence Address* City* County* Zip Code*

7 Mailing Address (required if differs from residence address) City State Zip Code

8 If applicable, check one of the following:

- ☐ Military Domestic (or military spouse or dependent) – only if on active duty and will be absent from place of registration
☐ Military Overseas (or overseas military spouse or dependent) ☐ U.S. Citizen Overseas

PREVIOUS REGISTRATION INFORMATION – will be used to provide cancellation information to former jurisdiction.
REQUIRED IF NAME CHANGED OR IF PREVIOUSLY REGISTERED TO VOTE IN ANOTHER MT COUNTY OR IN ANOTHER STATE

9 Previous City, County and State Residence Address of Previous Registration Previous Registration Name

RECEIVE YOUR BALLOT IN THE MAIL

☐ Yes, I request an absentee ballot to be mailed to me for all elections in which I am eligible to vote as long as I reside at the address listed on this application. I understand that in order to continue to receive an absentee ballot, I must complete, sign, and return an address confirmation notice mailed to me by the county election office in January of each even-numbered year.

If your mailing address differs during certain times of the year please add the seasonal mailing address information in this space, or contact your county election office. Seasonal mailing address for the period of

through Seasonal Mailing Address:

APPLICANT AFFIRMATION

I affirm under penalty of perjury that the information on this application is true, that I am a citizen of the United States, that I will be at least 18 years old on or before the next election, that I will have been a resident of Montana for at least 30 days prior to the next election, and that I am not serving a felony conviction in a penal institution nor have been found to be of unsound mind by a court. I understand that if I have given false information on this application, I may be subject to a fine or imprisonment, or both, under federal and/or state law.

Signature*

Date*

THE AFFIRMATION ON THIS APPLICATION FOR VOTER REGISTRATION MUST BE SIGNED BY THE APPLICANT – FAILURE TO DO SO WILL PREVENT APPLICATION FROM BEING PROCESSED.

(Fold and tape closed here)



Place
Stamp
Here

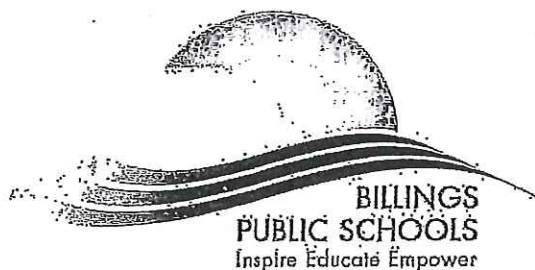
MT

ELECTION ADMINISTRATOR

COUNTY

MT

<u>County</u>	<u>Election Administrator Address</u>		<u>County</u>	<u>Election Administrator Address</u>	
Beaverhead	2 S Pacific St No 3	Dillon MT 59725	McCone	Box 199	Circle MT 59215
Big Horn	PO Box 908	Hardin MT 59034	Meagher	Box 309	White Sulphur Springs MT 59645
Blaine	PO Box 278	Chinook MT 59523	Mineral	Box 550	Superior MT 59872
Broadwater	515 Broadway St	Townsend MT 59644	Missoula	200 W Broadway	Missoula MT 59802
Carbon	PO Box 887	Red Lodge MT 59068	Musselshell	506 Main	Roundup MT 59072
Carter	Box 315	Ekalaka MT 59324	Park	414 E Callender St	Livingston MT 59047
Cascade	Box 2305	Great Falls MT 59403	Petroleum	Box 226	Winnett MT 59087
Chouteau	Box 459	Fort Benton MT 59442	Phillips	Box 360	Malta MT 59538
Custer	1010 Main	Miles City MT 59301	Pondera	20 4th Ave SW	Conrad MT 59425
Daniels	Box 247	Scobey MT 59263	Powder River	Box 200	Broadus MT 59317
Dawson	207 West Bell	Glendive MT 59330	Powell	409 Missouri	Deer Lodge MT 59722
Deer Lodge	800 Main	Anaconda MT 59711	Prairie	Box 125	Terry MT 59349
Fallon	Box 846	Baker MT 59313	Ravalli	215 S 4th St Ste C	Hamilton MT 59840
Fergus	712 W Main	Lewistown MT 59457	Richland	201 W Main	Sidney MT 59270
Flathead	40 11th St W Ste 230	Kalispell MT 59901	Roosevelt	400 2nd Ave S	Wolf Point MT 59201
Gallatin	311 W Main Rm 210	Bozeman MT 59715	Rosebud	Box 47	Forsyth MT 59327
Garfield	Box 7	Jordan MT 59337	Sanders	Box 519	Thompson Falls MT 59873
Glacier	512 E Main	Cut Bank MT 59427	Sheridan	100 W Laurel Ave	Plentywood MT 59254
Golden Valley	PO Box 10	Ryegate MT 59074	Silver Bow	155 W Granite Rm 208	Butte MT 59701
Granite	Box 925	Phillipsburg MT 59858	Stillwater	Box 149	Columbus MT 59019
Hill	315 4th St	Havre MT 59501	Sweet Grass	Box 888	Big Timber MT 59011
Jefferson	Box H	Boulder MT 59632	Teton	Box 610	Choteau MT 59422
Judith Basin	Box 427	Stanford MT 59479	Toole	226 1st St S	Shelby MT 59474
Lake	106 4th Ave E	Polson MT 59860	Treasure	Box 392	Hysham MT 59038
Lewis & Clark	316 N Park Ave Rm 168	Helena MT 59623	Valley	501 Court Sq Box 2	Glasgow MT 59230
Liberty	Box 459	Chester MT 59522	Wheatland	Box 1903	Harlowton MT 59036
Lincoln	542 California	Liberty MT 59092	White Sulphur	Box 400	White Sulphur MT 59252



WELCOME TO THE DISTRICT TEACHER PAYROLL OVERVIEW

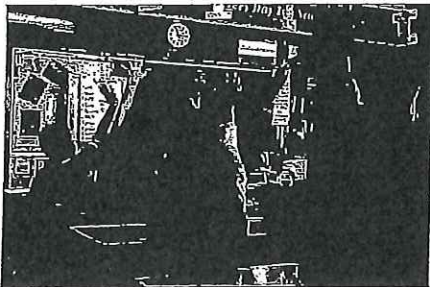
- Payroll Accountant: Tracy Berry
281-5013
- Payday: The 20th of each month.
- Contracts: Once you choose a 10-month or 12-month contract and decide you want to change it, you must contact us before **September 8,** . We will not change it after this date.
- Employee ID: Use your employee ID on all Payroll correspondence. If you do not know your employee ID, please contact HR or payroll.
- Timesheets: Please make sure timesheets are signed by you and your supervisor. They are due the 10th of the month, and paid on the 20th.
- Discretionary: Teachers working 187 days, are given 12 discretionary/sick days. Teachers that work less than the 187 days, receive prorated days. All days off in the current month will reflect on your pay check the following month.
- Direct Deposit: We encourage all employees to use direct deposit. Deposits are in the bank the morning of payday.
- Pay Checks: District employees who do not use direct deposit will have their checks delivered to the schools the day of payday.
- Union Dues: Billings Education Association (BEA) union dues are figured by the BEA, not payroll. If you disagree with the amount of dues, please contact the BEA office at 248-9812.
- TRS: Teachers Retirement is mandatory. The district's contribution is 8.87%. The employee's pre-tax contribution is 8.15%,
- 403b Self-Funded optional retirement plans are available. Please contact a vendor from the attached list for more information.
- Employee Online: To log into Employee Online use your Employee ID: 0000####, and password. Your password will be set up with the last four digits of SSN. You can view and print your pay stubs from Employee Online.

PROMOTING EXCELLENCE IN EDUCATION IN BILLINGS PUBLIC SCHOOLS

Did you know the Education Foundation for Billings Public Schools funds scholarships for students, grants and scholarships for teachers, provides programs to support schools, and makes donations for special projects?

Last year, the Education Foundation granted over \$66,000 in Classroom Grants for teachers, \$35,000 in student and educator scholarships, and provided over \$126,000 in special projects.

These are just a few examples of what the Education Foundation has done, think of what more we can do with your support...



If every Billings Public Schools teacher donated just \$3 per pay period to the Education Foundation for Billings Public Schools, over \$ 67,000 per year would be raised to go directly back into the classrooms!



Educators, please join our family at the Education Foundation and help us support excellence in education!



YES! I want to become a partner in the Education Foundation for Billings Public Schools and support students & teachers. Even the smallest donation makes a big difference because as the funds grow, so do the possibilities!

PAYROLL DEDUCTION:

- ☐ \$3 per pay period
- ☐ \$5 per pay period
- ☐ \$10 per pay period

DIRECT DONATION:

\$ _____ Amount pledged
*make check payable to:
Education Foundation for Billings
Public Schools

Beginning in Fall 2012, payroll deductions will be ongoing. In the future, if you would like to discontinue a monthly contribution, please contact the Education Foundation office or 3PS payroll for immediate stoppage.

100% of your contribution is tax deductible and supports:
Classroom Grants, Student Scholarships, Educator Scholarships,
Partners in Education, & the Endowment Fund

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____
School location: _____
Employee I.D. #: _____

Interschool Mail to:
Education Foundation

For more information call
(406) 245-4133 or visit www.efbps.org





BENEFITS SNAPSHOT

MEDICAL INSURANCE

\$1,000 individual or \$2,000 family deductible

\$3,000 individual or \$6,000 family out-of-pocket max, \$25 copay

miCare-primary care office covered by district at 100%

miRx all generic prescriptions are covered at 100% by district

WellVia telehealth available at no cost to employee or dependents

DENTAL INSURANCE

2 cleanings and preventative care covered 100% per plan year

\$2,000 benefit per plan year

****Full time teachers and administrators, support staff working over 20 hours a week get their medical and dental employee only coverage fully paid by the district.*

VISION INSURANCE-VSP

\$50,000 BASIC LIFE INSURANCE AND \$50,000 AD&D PAID BY DISTRICT
(VOLUME REDUCTION AT AGE 65 AND 70)

LONG TERM DISABILITY POLICY PAID BY DISTRICT
60% COVERAGE OR \$2,500 MAXIMUM BENEFIT

FLEXIBLE SPENDING ACCOUNT

DEPENDENT CARE FLEXIBLE SPENDING ACCOUNT

403B AND 457 OPTIONS

TEACHERS RETIREMENT / MONTANA PUBLIC EMPLOYEES RETIREMENT

EMPLOYEE ASSISTANCE PROGRAM



Summary of Benefits

Health Benefits

The health and well-being of the District's employees is a primary concern. This provides a snapshot of some of the Billings Public Schools employee benefits. Billings Public Schools insurance policy is self insured; Health care and dental claims are processed with EMBS.

Summary Plan B	\$500 Deductible	Higher Premium Cost
Summary Plan C	\$1000 Deductible	Employees Premium cost paid at 100% for those who qualify.
Dental Plan	\$50 Deductible	Employees Premium cost paid at 100% for those who qualify.

Where do I find the Plan document and additional information?

Bpsinfocentral.com click on the Benefits Tab

Plan Year

July 1 of each year and ending June 30 of the following year.

Auto Enrollment

The Medical and dental benefits will continue from the previous plan year. Flexible Spending Accounts are enrolled yearly. Billings Public Schools Group Number is 0000600.

Life Insurance

Life Insurance pays a \$50,000 benefit to your beneficiary, separate from the Accidental Death and Dismemberment Insurance benefit. This coverage is part of the Group Term Life Insurance offered through your employer.

Reminder: Update your Beneficiary if you have experienced any life changes.

Accidental Death and Dismemberment

AD&D Insurance pays a \$50,000 benefit to you or your beneficiary, separate from the life insurance benefit, if you are severely injured or die as the result of a covered accident. This coverage is part of the Group Term Life Insurance offered through your employer.

Disability Long Term

Long Term Disability Benefit Overview

Billings Public Schools has a Long Term Disability Insurance Plan with a 90 day elimination period, 60 percent coverage, \$2,500 maximum benefit and own occupation coverage.

Individual Long Term Care / Hospice

The term "Hospice" means a health care program providing a coordinated set of services rendered at home, in Outpatient settings or in institutional settings for Plan Members suffering from a condition that has a terminal prognosis. A Hospice must have an interdisciplinary group of personnel which includes at least one Physician and one Registered Nurse, and it must maintain standards of the National Hospice Organization (NHO) and applicable state licensing requirements.

Contact Information



EBMS
Dental
Medical
Prescriptions
Hospital pre-certification
Flexible Spending Account
Dependent Care FSA

Medical, dental, claim questions
(866) 248-7204
Prescription claim questions
(866) 894-1504
Hospital pre-certification
(866) 894-1505

mibenefits.ebmstpa.com



Employee Assistance Program

(406) 255-8469
(406) 255-8481
(800) 252-1246

billingsclinic.com/services-specialties/occupational-health



Employee Assistance Program

(866) 877-4325

sclhealth.org/careers/benefits



First Choice Health
(to find out if a doctor is preferred)

(800) 467-5281

fchn.com



Mi-Care Clinic
Services Available
Wellness/Annual Exams
Sick Care
Chronic Illness
Health Education
Lab Tests
Preventative Screening
Sports Physicals
Dermatology
Annual Health Risks Follow-up
Smoking Cessation

Heights Location
926 Main
Suite 5

(406) 281-5190
(866) 888-8035

Clinic Hours:
Mon: 7am - 11am
Tue: 12pm - 4pm
Wed: 9am - 1pm
Thu: 2pm - 6pm
Fri: Closed

Lincoln Center Location
415 N. 30th Street
First Floor

(406) 281-5180
(866) 888-8035

Clinic Hours:
Mon: 7am - 5pm
Tue: 7am - 11am
Wed: 7am - 6pm
Thu: 7am - 11am
Fri: 7am - 5pm

mibenefits.ebms.com



**Mi-Care Pharmacy
Services Available**
Same day Prescription Pick-up
Mail order Prescriptions

Mi-Care Pharmacy
993 S 24th St W
Suite A

(406) 869-6551

mixpharmacy.com



PERS
PERS provides retirement, disability and death benefits to the State of Montana, the university system, local governments and certain school district employees.

(406) 444-3154

100 N Park Ave #200
Helena, MT 59601

mpera.mt.gov



TRS
The TRS Mission is to promote long-term financial security for our members while maintaining the stability of the fund.

(406) 444-3134
1500 E 6th Ave
Helena, MT 59601

trs.mt.gov



Voya
Supplemental life
AD & D
Long Term and Short term disability

(855) ONE-VOYA
(855) 663-8692

Voya.com



Voya-Everest
Everest, the first nationwide funeral planning and concierge service, is an independent consumer advocate who works on your behalf.

(855) ONE-VOYA
(855) 663-8692

everestfuneral.com/voya



VSP-Vision Care
Vision care is personal and so is your relationship with your eye doctor. That's why we provide you with access to care from great eye doctors, quality eyewear, and the affordable care you deserve.

(800) 877-7195

vsp.com



Well*Via
Talk to a Board Certified Physician now!

(855) WellVia
(855) 935-5842

mibenefits.ebms.com

Flexible Spending Account (FSA)

A Flexible Spending Account (FSA) is an employers sponsored program that allows employees to set aside pre-tax dollars (usually at the beginning of a Plan year) to pay for qualifying medical, dental, vision, pharmacy and dependent care expenses. The money employees contribute to an FSA is not subject to taxes, Social Security or Medicare contributions.

Dependent Care FSA (DCA)

A DCA is a flexible spending account that allows you to contribute a portion of your paycheck before taxes are taken out to pay for qualified care expenses so that you can work or look for work.

Qualifying Events

Qualifying Events/Special Enrollments

Special enrollments are allowed upon marriage, divorce, birth or adoption, death of a spouse or child, or change in your or your spouse's employment status resulting in a loss of coverage. You must provide appropriate documentation to the Benefits Manager and make the change within 60 days of the "Special Enrollment." The Dependent "Special Enrollment" is a period of 60 days and begins on the date of the birth, adoption, or placement for adoption. Changes for other reasons are allowed only during open enrollment periods. For complete details, please refer to the Summary Plan Description at bpsinfocentral.com/benefits

Benefits Office & Payroll

For Complete details, please refer to your labor agreement
www.bpsinfocentral.com/labor-information.html

403 B

Billings Public Schools offers all employees the opportunity to save for retirement by participating in the Billings Public Schools 403(b) Plan ("the "403(b) plan"). You can participate in this plan by making pre-tax contributions and Roth 403(b) after-tax contributions. You are eligible to start participation in this plan at any time. For further information, contact Tracy Berry at (406) 281-5013 .

Additional Benefits Provided at no cost (100% Coverage)

Employee Assistance Program (EAP)

Mental health assessment, counseling, education and referral to enhance your total health and well being.

Wellness Program

The health and wellbeing of the District's employees is a primary concern. Annual health fairs will be conducted at various schools and locations which provides a convenient and cost effective means to access many preventive blood screenings. The cost of the biometric screening and basic HealthScreen is PAID IN FULL for all BPS health plan covered employees and health plan covered spouses and dependents.

MiCare Services

miCare is an onsite health center sponsored by your employer. This is paid at 100%. This is at no cost to the employee. The miCare Health Centers allow employees and their dependents (covered by the health plan) to make 20-minute appointments with no waiting, no paperwork, and no hassle - just care, when you need it. The health center is staffed by MDs, PAs or FNPs, and licensed nursing staff. Learn more at miCare Health Center's website.

What types of services can be received at miCare?

You can schedule 20-minute appointments to receive the same primary care services available at other Family Practice clinics including:

- Wellness/Annual Exams
- Sick Care
- Chronic Illness
- Injuries
- Health Education/Consultation
- Lab Tests
- Preventative Screening
- Annual Health Risk Appraisal/Follow Up

miRx Pharmacy

This benefit summary is for informational purposes only. All benefits and general provisions described herein are subject to the terms, limitations, and exclusions of the Summary Plan Descriptions for Billings Public Schools.

miRx Pharmacy is complimentary at 100% for Billings Public Schools staff and dependents. miRx Pharmacy will manage your mail order and in store prescriptions in a fast, easy and convenient way that will help you save time and money. Generic prescriptions are paid at 100% for eligible Billings Public Schools employees and dependents.

What types of services can be received at miRX Pharmacy?

- Enrollment is free and easy.
- Average processing and delivery time is 5-8 days.
- Medications filled for 90 days. (Prescriber must write for 90 days on the Prescription.)
- Exceptional customer service and counseling options available.
- Cost savings to you and your family, as well as an overall savings for your group plan.

WellVia Telehealth

WellVia is a no cost, complimentary telehealth benefit for Billings Public Schools Employees and covered dependents. WellVia is a 24/7 365 days of the year phone care center with board-certified state licensed physicians who consult with patients in regards to common health conditions.

Additional Benefits - Payroll Deduction

Voluntary Benefits-Additional

Supplemental Life Insurance (Group Term Life Insurance)

Optional Insurance that is Offered through Billings Public Schools Pays a benefit to your beneficiary if you pass away during a specific period of time ("term") Your employer offers Basic Life Insurance and Accidental Death and Dismemberment (AD&D) Insurance, which is the amount they provide at no cost to you. You have the option to elect Supplement Life Insurance. The cost for Supplemental Life Insurance is based on your age.

Reminder: Update your Beneficiary if you have experienced any life changes.



New Health Insurance Marketplace Coverage Options and Your Health Coverage

Form Approved
OMB No. 1210-0149
(expires 5-31-2020)

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 or contact _____

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		4. Employer Identification Number (EIN)	
5. Employer address		6. Employer phone number	
7. City	8. State	9. ZIP code	
10. Who can we contact about employee health coverage at this job?			
11. Phone number (if different from above)		12. Email address	

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:

• With respect to dependents:

☐ We do offer coverage. Eligible dependents are:

☐ 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 will guide you through the process. Here's the employer information you'll enter when you visit HealthCare.gov to find out if you can get a tax credit to lower your monthly premiums.

The information below corresponds to the Marketplace Employer Coverage Tool. Completing this section is optional for employers, but will help ensure employees understand their coverage choices.

13. Is the employee currently eligible for coverage offered by this employer, or will the employee be eligible in the next 3 months?

☐ **Yes** (Continue)

13a. If the employee is not eligible today, including as a result of a waiting or probationary period, when is the employee eligible for coverage? _____ (mm/dd/yyyy) (Continue)

☐ **No** (STOP and return this form to employee)

14. Does the employer offer a health plan that meets the minimum value standard*?

☒ **Yes** (Go to question 15) ☐ **No** (STOP and return form to employee)

15. For the lowest-cost plan that meets the minimum value standard* offered only to the employee (don't include family plans). If the employer has wellness programs, provide the premium that the employee would pay if he/she received the maximum discount for any tobacco cessation programs, and didn't receive any other discounts based on wellness programs.

a. How much would the employee have to pay in premiums for this plan? \$ _____

b. How often? ☒ Weekly ☒ Every 2 weeks ☒ Twice a month ☒ Monthly ☒ Quarterly ☐ Yearly

If the plan year will end soon and you know that the health plans offered will change, go to question 16. If you don't know, STOP and return form to employee.

16. What change will the employer make for the new plan year? _____

☐ Employer won't offer health coverage

☐ Employer will start offering health coverage to employees or change the premium for the lowest-cost plan available only to the employee that meets the minimum value standard.* (Premium should reflect the discount for wellness programs. See question 15.)

a. How much would the employee have to pay in premiums for this plan? \$ _____

b. How often? ☐ Weekly ☐ Every 2 weeks ☐ Twice a month ☐ Monthly ☐ Quarterly ☐ Yearly

* 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)

BPS JOB APPLICANTS COPY

Applicant Rights and Consent to Fingerprint

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification by **Billings Public Schools** that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.
- If you have a criminal history record, the officials making a determination of your suitability for employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the criminal history record.

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <http://www.fbi.gov/about-us/cjis/background-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI at the same address as provided above. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency.

If a change, correction, or update needs to be made to a Montana criminal history record, or if you need additional information or assistance, please contact Montana Criminal Records and Identification Services at dojitsdpublicrecords@mt.gov or 406-444-3625.

NCPA/VCA Applicants

The National Child Protection Act of 1993 (NCPA), Public Law (Pub. L.) 103-209, as amended by the Volunteers for Children Act (VCA), Pub. L. 105-251 (Sections 221 and 222 of Crime Identification Technology Act of 1998), codified at 42 United States Code (U.S.C.) Sections 5119a and 5119c, authorizes a state and national criminal history background check to determine the fitness of an employee, or volunteer, or a person with unsupervised access to children, the elderly, or individuals with disabilities.

- ❖ Provide your name, address, and date of birth, as appears on a document made or issued by or under the authority of the United States Government, a State, political subdivision of a State, a foreign government, a political subdivision of a foreign government, an international governmental or an international quasi-governmental organization which, when completed with information concerning a particular individual, is of a type intended or commonly accepted for the purpose of identification of individuals. 18 U.S.C. §1028(D) (2).
- ❖ Provide a certification that you (a) have not been convicted of a crime, (b) are not under indictment for a crime, or (c) have been convicted of a crime. If you are under indictment or have been convicted of a crime, you must describe the crime and the particulars of the conviction, if any.
- ❖ Prior to the completion of the background check, the entity may choose to deny you unsupervised access to a person to whom the entity provides care.

The entity shall access and review State and Federal criminal history records and shall make reasonable efforts to make a determination whether you have been convicted of, or are under pending indictment for, a crime that bears upon your fitness and shall convey that determination to the qualified entity. The entity shall make reasonable efforts to respond to the inquiry within 15 business days.

PRIVACY ACT STATEMENT

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L.92-544, Presidential Executive Orders, and federal. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Social Security Account Number (SSAN). Your SSAN is needed to keep records accurate because other people may have the same name and birth date. Pursuant to the Federal Privacy Act of 1974 (5 USC 552a), the requesting agency is responsible for informing you whether disclosure is mandatory or voluntary, by what statutory or other authority your SSAN is solicited, and what uses will be made of it. Executive Order 9397 also asks Federal agencies to use this number to help identify individuals in agency records.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

Additional Information: The requesting agency and/or the agency conducting the application investigation will provide you additional information pertinent to the specific circumstances of this application, which may include identification of other authorities, purposes, uses, and consequences of not providing requested information. In addition, any such agency in the Federal Executive Branch has also published notice in the Federal Register describing any systems(s) of records in which that agency may also maintain your records, including the authorities, purposes, and routine uses for the system(s).

Updated 06/26/2018

BILLINGS PUBLIC SCHOOLS

2019-2020 School Calendar

Approved 12-17-2018

JUNE 2019						
Su	M	T	W	Th	F	Sa
					31	1
2	P	P	P	6	7	8

AUGUST 2019						
Su	M	T	W	Th	F	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	P	P	P	22	23	24
25	26	27	28	29	30	31

SEPTEMBER 2019						
Su	M	T	W	Th	F	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

OCTOBER 2019						
Su	M	T	W	Th	F	Sa
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6	7	8	9	10	11	12
13	14	15	16	P	P	19
20	21	22	23	24	25	26
27	28	29	30	31		

NOVEMBER 2019						
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3	4	5	PTC	PTC	PTC	9
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17	18	19	20	21	22	23
24	25	26				30

DECEMBER 2019						
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22	*	*	*	*	*	28
29	*	*				

JANUARY 2020						
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26	27	28	29	30	31	

FEBRUARY 2020						
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23	24	25	26	27	28	29

MARCH 2020						
Su	M	T	W	Th	F	Sa
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8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	P	31				

APRIL 2020						
Su	M	T	W	Th	F	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	*	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

MAY 2020						
Su	M	T	W	Th	F	Sa
					*	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	*	26	27	28	29	30
31						

Graduation Date/Times						
Sunday, May 24						
Skyview - 10:00						
Senior - 2:00						
West - 6:00						

○	First and Last Day of School
■	Vacation or Holiday
★	Elementary End of Trimester
✦	Six-Week Grading Period for MS & HS

Note: Wed. Nov. 6 is Parent Teacher Conferences for Elem. and PLC for MS & HS

Last Day of School - May 29th is early release for elementary, middle school and high school.						
W	Wed. Professional Learning Community Meetings - Dismissal 1 hour earlier than normal					
P	PIR Days - Required					
P	PIR/TRADE days - March 30th - no district sponsored training; No school					
SD	Snow Day - This will be a vacation day unless we are required to make up a school day lost due to poor weather earlier in the year. If we are required to make up a day, this vacation day will become a required day of attendance.					
PTC	Elementary Parent Teacher Conferences - Elementary early release					
	High School Semester Testing - HS early release					
	Middle School Parent Teacher Conferences - MS early release					



FRONTLINE Absence Management

Absence Management will be used to request time off and locate a substitute.

You must enter an absence for any time you are out of the classroom, whether you need a substitute or not.

Once an absence is entered, it will start the process for locating a substitute, it does not have to be approved before it starts this process.

An absence can be entered up to 48 hours after the start of an absence. If the cutoff time is missed, contact the secretary.

Absences can be cancelled up to 30 minutes prior to the start time. If an absence is not cancelled, and substitute arrives at the school, the school will still be required to pay for that substitute.

Substitutes are offered jobs on a preferred system using a calculation from when the job is entered and the start time. Jobs are available for web shopping based on the lead time as follows.

- Employee 100%
- Schools 90%
- District 80%

Setting up the Preferred Sub list will open more subs sooner to the jobs. (More Later)

Jobs do not "call" out for a sub until 48 hours prior to the job start time.

ACCESS TO FRONTLINE

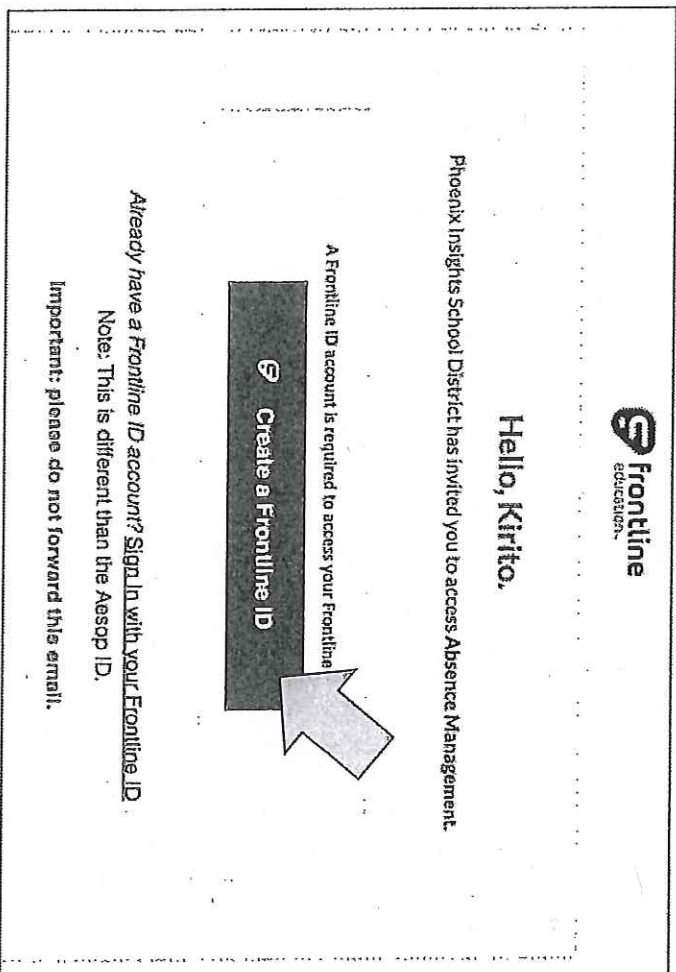
3 Emails will be sent to your Billings Public Schools email account.

- **Welcome To Frontline**
- **My Employee Letter**
- **Invitation to Join**

If you do not know your email account, please contact your school for assistance.

If you do not receive all 3 emails, look in your JUNK/SPAM folders. If the emails are not found there, then contact Laurie Bogers in Human Resources.

You must access Absence Management via the web using the invitation that is sent. Create an access ID using the District standard of last name first initial (just like your email) and password.



WELCOME TO BILLINGS PUBLIC SCHOOLS - DISTRICT #2

At this time please do not submit for any Discretionary time for the 2019/2020 school year. Absence Reason Balances will be loaded in July and you may enter any Discretionary time off requests beginning July 15, 2019. If a request is submitted prior to 07/15/19 it will be denied/deleted and will need to be resubmitted. Thank you for your cooperation.

You MUST use all of your Discretionary before Sick time. Please make sure to check your balance prior to entering your time off. To check your balance - log onto Absence Management > Account (left hand side) > Absence Reason Balance

2019-2020 Black Out Days (for Teachers only!)

2019

2020

TEACHERS - SECRETARIES - ADMINISTRATORS:

When creating jobs please note in the text instructions:
**If the job is not at your home school or if it's at multiple locations so the substitute teacher has appropriate transportation
**If the job is outside so substitute teachers know to dress appropriately
Thanks!

Billings Public Schools

posted on Monday, July 1, 2019

Scheduled Maintenance

Due to scheduled maintenance, Absence Management may experience intermittent connection issues on Saturday, July 13, between 6:00am-10:00am EDT. We apologize for any inconvenience this may cause.

This message will remain posted until July 13, 2019.

Dismiss



Your Name

HELP RESOURCES

CONTACT YOUR ORGANIZATION

Billing & Public Schools

Laura Rogers
Phone: (408) 281-5014, Fax: (408) 281-6198
RogersL@BillingsPublicSchools.Org

Frontline Support:

01 Denied Absences

Advanced Mode

FILE ATTACHMENTS

BRAID AND DROP
FILES HERE

Choose File No file chosen


CANCEL CREDIT ABSENCE

Welcome! How can we help?

Find answers (creating an absence, report writer, employees, etc.)

Search

 Home

 Employee Help

Basics and Tips

> Adding and Managing Absences

☆ Feedback and Preferred Subs

Absence Management Mobile

Insights Platform Overview

Insights Platform Management

Frontline Mobile App

Browser and IT Resources

Popular Questions for Employees

> Getting Started for Employees

> The Employee Home Page

> Employee QuickStart Guide

> Managing Personal Information

> Changing Your PIN

> What Is Teachwise?

> Employee Web Basic Training
[Video]

Employee Web Advanced Training
[Video]

Absence Reason Balances



IN ABSENCE

sences

Feedback

Once you have reviewed the training videos you can submit absences in Absence Management, you can begin entering absences.

Please review the Absence Reason Guidelines to help you enter the correct leave type. This is included in your New Hire Folder

Discretionary Time

- 12 Days/year – These days are for vacations, personal time and “sick” time. Once these days are used, no more time will be granted.
 - If days are not used, the following year, days will roll into a “Sick Bank”
 - This is the only way to accrue “sick” time. Use Discretionary time wisely and only if absolutely needed.
 - NOTE: Once you have accrued sick time, sick leave can only be used after all Discretionary time has been used.
- Maternity Leave – No sooner than 3 months prior to your due date, contact Laurie Bogers in Human Resources for the process of maternity leave.
- Professional Leaves – MUST be approved before taking the time off. Use the guidelines for the appropriate leave type.

Please contact Laurie Bogers in Human Resources if you have any questions about what leave type you should be using or concerns with an absence approval.

LEAVE WITHOUT PAY

Must be approved by the District appointed Administration.

Only granted when all Discretionary and Sick time have been used **AND** under extenuating circumstances.

Leave without pay could effect benefits and retirement.

NEVER take Leave without Pay on the last day of school. You must be in a paid status on the last day of school if you want your paid benefits to continue through the summer break.

Excessive absences and if an employee reaches the stage of leave without pay, classroom productivity becomes a concern. Continuous Education is a priority and the best way to achieve that is to have teachers in their classrooms.

Use your Discretionary days **ONLY** when absolutely needed.

Try and plan vacations during breaks in school and summer months.

Try to schedule medical appointments outside of school hours.

Plan for the future – save your days!

Illness and injuries can happen at anytime and you want to have time available when you need the most.

BLACKOUT DAYS

The District calls 30 "Blackout Days" as needed throughout the school year.

These are days that District feels might have a potential sub shortage due to the amount of staff that will be out.

All Blackout Days will be called no less than 3 days prior to the day.

A District wide email will be sent out to all employees. Dates will also be listed on Absence Management in the Web Alert pop up when you sign into Absence Management.

If a Blackout Day has been called, all Discretionary leaves from that point on will be denied for that day. If you have an emergency, please contact your school administration and they will help you process your absence.

If you already have an absence submitted prior to the day being declared a Blackout Day, it does not mean that it will be denied.

*** Please note *** It is ALWAYS up to administration to approve absences, whether a blackout day has been called or not. Submission of an absence is not a guaranteed approval, please plan accordingly and have absences submitted and approved prior to taking Discretionary time if possible. A confirmation number is not approving the absence, it is confirming you have entered an absence.

If you have any issues or concerns with your absence on a blackout day, please contact Laurie Bogers in Human Resources

FMLA

If you are going to miss 4 days or more from work due to a medical issue, whether it is yourself or family member, please contact Laurie Bogers in Human Resources. This includes maternity leave.

Human Resources will help you manage the time off and send you paperwork for FMLA.

FMLA is job protection that is provided under Federal Law and is in addition to your Labor Agreement protection. Additional information is provided in your new hire folder.

If you are unsure if your extended leave qualifies for FMLA, ALWAYS contact HR. We are here to answer any questions you may have.

WELCOME TO
BILLINGS PUBLIC SCHOOLS
AND
HAVE A GREAT YEAR!!

Tips and Tricks for Absence Management:

- Absences are going to be in real time. If the system will not let you put in Discretionary or Sick time- you may not have the time available. Verify the time that you have available.
- When putting in Discretionary and Sick please make sure you are choosing the right option that coincides with your days off. For example, if you are taking 7 days off for a vacation with your family, you will need to choose Discretionary > 4-12 days. You must use all of your discretionary before any sick time can be entered. If you are out due for medical reason leave a note (vague detail is all we need, for example broke my arm), and HR will contact you and have you fill out FMLA paperwork. All sick absences 4 days or more will be reviewed under FMLA guidelines. FMLA is a Federal program that requires the District to provide to its employees and is addition to the BEA Labor Union Contract.
- FMLA Leave has its own absence reason. Because this time can be a combination of paid and unpaid, we have created this option for absences such as Maternity Leave, your own or a family member's serious health issue. This leave type is only to be used if you are using Discretionary and Sick combo that may or not may not lead into unpaid time. Any FMLA leaves that are completely unpaid need to be entered under Family (unpaid) or Medical (unpaid).
- You will not be able to submit a leave for more than 90 days, so you will have to do separate leaves until you reach the correct amount of days. For example, if you are out for 187 days, you will need to submit 2 leaves for 90 days and one for 7 days. Please make notation in each leave that it is Absence request 1 of 3 or something to link the absence together. There is an enhancement request in to change this, but for now this will be the process.
- You can upload lesson plans into the system, please be aware that not all subs have access to a computer and accept jobs via phone. Please use this option as cautionary and have one printed if you are not familiar with you guest teacher. This option is also nice when the absence is unexpected. The school can view and print the lesson plan and then provide to whomever is covering your classroom.
- You will be able to set preferred substitutes for yourself, however, you will not be able to block substitutes. You must talk with your principal with any concerns you have and they will bring it to Human Resources. There are training videos under the Frontline Support to show you how to set up preferred subs.
- You will have the option to leave feedback about any substitute that has been in your classroom. We encourage you to do this each and every time. This enables us to build training for substitutes by focusing where we are seeing trends in behaviors and/or experience.
- Substitutes are also able to leave feedback, so make sure that you are leaving detailed lesson plans and detailed classroom instructions. For example on detailed instructions, let the guest teacher know that it is Suzy Smith's turn to take attendance to the office and that Johnny Appleseed may need extra help and has a special lesson plan. These feedbacks will help you manage your classroom and know where the guest teacher left off at. Both feedbacks are designed to keep the continuous education flow.
- If you are taking a professional leave, please remember to choose the correct professional leave type. There are several options and if you are not sure please visit with your secretary or refer to the Absence Type Spreadsheet.
- CFI and Bereavement can be entered, but are not guaranteed until approved. If it has been determined that it will not be approved, your request will be changed to sick and deducted as such.

It is HIGHLY recommended to view videos in Absence management under the Employee Help. There is an amazing amount of information in these videos to help this system work for you.

To access the Frontline website, you will go to <https://app.frontlineeducation.com>. Here, you will be able to enter absences, check your absence schedule, update personal information, and exercise other features such as uploading your lesson plans for substitutes to view online.

Mobile App Access

After you have created your Frontline ID, you can then download the Frontline Education Mobile App. Upon opening the app, you will be prompted for a four-digit invitation code of **7354**. Next, you will enter your Frontline ID credentials to sign in. For more information regarding the Mobile App click [here](#).

Note: You are NOT required to create a Frontline Account for Phone access. You automatically have Phone access. However, to gain Web access you must create a Frontline Account via your personal invitation email.

We are confident that you will find the Frontline experience beneficial and enjoyable.

If you have any questions, concerns, or comments; please contact <<District Contact First Name>> <<District Contact Last Name>> by phone or email as listed below.

Thank you,

<<District Contact First Name>> <<District Contact Last Name>>
<<District Contact Title>>
<<District Contact Email>>
<<District Contact Phone>>

EXAMPLE OF EMAIL WITH ACCESS ID INFORMATION

<<District Name>>

<<School>>

TO: <<Last Name>>, <<First Name>>

<<Current Date>>

Dear <<First Name>>,

We have the pleasure of notifying you that <<District Name>> is using a service from Frontline Education that greatly simplifies and streamlines the process of recording and managing absences and finding substitutes. The Frontline Absence Management solution will be available to you 24 hours a day, 7 days a week and can be accessed via internet and phone.

Interacting with Frontline via the Phone

You can call Frontline toll free at **1-800-942-3767**. Simply follow the voice menu to enter and manage absences and access other features. We recommend that you call in to check the computer recording of your name and title. To do this, press Option 5 and follow the prompts.

Your ID and PIN *for the phone* are as follows:

ID Number <<Phone Login>>

PIN <<Phone Pin>>

*When entering an absence, please wait until you receive a confirmation number before you terminate the phone call. **Your transaction is not complete until you receive a confirmation number.**

Interacting with Frontline via the Website


You will receive a personal invitation email with the subject line: <<District Name>> **invites you to Absence Management**. If you have an existing Frontline ID Account, then click "Sign in with your Frontline ID." Otherwise, click "Create a Frontline ID." Enter a Username, Password, email address, and click the "I accept the terms and conditions" box. Click "Create Frontline ID" and you are in! For more information regarding creating your Frontline ID click [here](#).

When you create your access ID, please use your last name first initial. If that name has already been used try last name first initial middle initial. It is recommended that you use the same password that you have chosen for your District password. Once you receive the invitation, please set up your account immediately, do not wait, your invitation will expire and if you have an emergency, the last thing you will want to have to deal with is setting up your access.

Example of Invitation email

You must access Absence Management via the web using this email first. Create an access ID using the District standard of last name first initial (just like your email) and a password.


***It is recommended to use the same password you have chosen for your district email account. **



Hello, Kirito.

Phoenix Insights School District has invited you to access Absence Management.

A Frontline ID account is required to access your Frontline solutions.

 **Create a Frontline ID**

Already have a Frontline ID account? [Sign In with your Frontline ID](#)

Note: This is different than the Aesop ID.

Important: please do not forward this email.

Family Leave	To care for Family members for an extended amount of time and only when all Discretionary/Vacation and sick have been exhausted	FMILA documentation
> 1 contract year	Use for any amount of days less than full contract year	
Full contract year	Use for any amount of days equal to or more than full contract year	
FMILA Leave	To be used for maternity leave, personal medical issues or care of family member due to medical reasons. To be used only when Discretionary/Vacation and/or sick time is used in combo with unpaid time.	FMILA Documentation
General (unpaid)	Tenure teachers may request no less than one semester and no more than two semesters for a general leave. Must be approved by the superintendent	Letter requesting a full year or more must be provided to the Superintendent by employee
Jury Duty	Summons for Jury Duty, if Jury Duty is cancelled, leave must be cancelled.	Jury Duty check must be endorsed and sent to Human Resources immediately up receipt.
Leave Without Pay	To be used when all paid time has been exhausted. All leave without pay is at the discretion of the district. This can also be requested when in "grace period" of new hire date.	At the discretion of the District, additional documentation maybe requested
Legal	To be used when a legal case requires employee to be absent from duty. Must have court order and this request must be made prior to absence.	Court orders must be sent to Human Resources
Medical (unpaid)	To be used when employee is unable to work due to personal illness or injury and has exhausted all paid accruals or has come eligible for long term compensation	FMILA documentation



Absence Management

SIGNING IN

To log in to the absence management application, type aesoponline.com in your web browser's address bar.

The Sign In page will appear. Enter your ID/username and PIN/password and click Sign In.

RECOVERING CREDENTIALS

If you cannot recall your credentials, use the recovery options or click the "Having trouble signing in?" link for more details.

CREATING AN ABSENCE

You can enter a new absence from your absence management home page under the Create Absence tab.

Enter the absence details including the date of the absence, the absence reason, notes to the administrator or substitute, etc., and attach any files, if needed. You can then click Create Absence.



MANAGING YOUR PIN AND PERSONAL INFORMATION

Using the "Account" option, you can manage your personal information, change your PIN number, upload shared attachments (lesson plans, classroom rules, etc.), manage your preferred substitutes, and more.

GETTING HELP AND TRAINING

If you have questions, want to learn more about a certain feature, or need more information about a specific topic, click Help Resources and select Frontline Support. This opens a knowledge base of help of training materials.

ACCESSING ABSENCE MANAGEMENT ON THE PHONE

In addition to web-based, system accessibility, you can also create absences, manage personal information, check absence reason balances, and more, all over the phone.

To call the absence management system, dial 1-800-942-3767. You'll be prompted to enter your ID number (followed by the # sign), then your PIN number (followed by the # sign).

Over the phone you can:

- Create an absence (within the next 30 days) - Press 1
- Review upcoming absences - Press 3
- Review a specific absence - Press 4
- Review or change your personal information - Press 5

If you create an absence over the phone, please note the confirmation number that the system provides the new absence for (future reference).



Absence Type		When to use	Requires additional documentation
<i>Not all leave types are available for all employees. Refer to appropriate Labor Agreement for available leave types.</i>			
Activities	Coaching for sports, music, and other extra curricular activities		Absences will be entered by HR for this leave type. Do NOT use this leave type unless instructed to by HR.
Admin Paid Leave	Placed on paid leave by the district		Only entered by under direction from Human Resources
Admin Work	Subbing for an Admin position such as Principal		
Association	Any Association related meeting		Must be approved by Union Rep
Bereavement	Death of a eligible family member per employee labor agreement.		At the discretion of Human Resources
Comp Time - Contract Support	Earned time as per contract guidelines		Must be approved by HR Executive Director
CFI	To care for an immediate family member who requires emergent care and of whom you are the sole caregiver for.		Medical Documentation to be turned into Human Resources upon request.
Discretionary - BEA Staff	MUST be used BEFORE any Sick Accruals		
	3 days or less		
	4 -12 days	4 - 12 days; please notate if this is being used for illness or injury of self or family member	Additional information maybe requested to ensure leave is processed correctly
Extra Time -Contract Support	Extra time granted per contract, use time according to available balances		

to Kim Anthony	Any professional development in District that requires Kim Anthony to code and/or approve	Documentation may be requested
to Brenda Koch	Any professional development in District that requires Brenda Koch to code and/or approve	Documentation may be requested
to Dave Cobb	Any professional development in District that requires Dave to code and/or approve	Documentation may be requested
to Judy Povillaitis	Any professional development in District that requires Judy Povillaitis to code and/or approve	Documentation may be requested
to Jennifer Smith	Any professional development in District that requires Jennifer Smith to code and/or approve	Documentation may be requested
to Chris Olszewski	Any professional development in District that requires Chris Olszewski to code and/or approve	Documentation may be requested
TILT	Any TILT development course	Documentation may be requested
In-state	Any In-state professional development; please notate where the training will be located. This includes training in Billings, but not In-District	Documentation may be requested
Out-of State	Any Out-of-State professional development; please notate where training will be located	Documentation may be requested
Prof. w/ Sub Reimburse	Any professional development where the school district will be reimbursed for sub by a Third party. In the notes field, information of who will be reimbursing must be entered.	Documentation may be requested
Public Office	To be used to serve in Public Office for any part of the school year	Must be approved by the Superintendent

> 1 contract year	Use for any amount of days less than full contract year	
Full contract year	Use for any amount of days equal to or more than full contract year	
MiCare (BCEA, MPEA and Contract Support only)	6 hours per year shall be allowed to each employee to participate in onsite care clinics. These hours may be taken in no less than 30 minute increments. See labor agreement for additional provisions	Documentation may be requested at the discretion of the district
Military	Military leave will be granted pursuant to Federal and State Law	Military Orders are to be sent Human Resources
29 days or less	Orders are for 29 days or less	
30 days or more	Orders are for 30 days up to 364 days or one day prior to contract ending	Please contact HR for correct leave option if you are not sure which to use
Full year or more	365 days or more or full contract year	
Negotiations	Negotiation of labor agreement	Must be approved by Union Rep
Personal Necessity	Personal time off	
Professional Leaves	To be used for professional development. To include trainings, classes, seminars etc. Cannot be used for when using any courses for step up but can use for renewal.	Documentation may be requested

Sabbatical	To be granted to full time employees in the district for the purpose of professional improvement. See Labor agreement for additional provisions.	Letter must be submitted to the superintendent by March 1st if year before the school year in which the leave is sought.
School Activities	Any school activity that involves students such as art shows, music tours and field trips	
School Activities - IS	Any school activity described above that are In-State, including In-District.	
School Activities- OS	Any school activity described above that are Out of State	
Sick	For personal or family member illness or injury only. BEA can only use AFTER all Discretionary time as been used.	
3 days or less	3 days or less	At the discretion of the district
4 -29 days	4 - 29 days (notation reqired)	FMILA documentation
30 days more	30 days or more (notation required)	FMILA documentation
Sped-In Building	To be used for Special Education In-building work and time is needed away from the classroom to process mandatory paperwork for classroom reporting	Subject to approval from SPED Department
Trade Day	Trade days are granted to employees who work on non-contracted days per labor agreement	
Vacation	Personal time off	
3 days or less	3 days or less	
4 days or more	4 days or more; please notate if this is being used for illness or injury of self or family member	Additional information maybe requested to ensure leave is processed correctly
Workers comp	This is to be used if you are injured at work only. Use this leave type beginning the first date that you missed worked for the injury.	Work Comp Paperwork must be completed. Forms are located in the main office at each school or at the Lincoln Center Room 210

IF YOU ARE INJURED

COMPLETE FIRST REPORT OF INJURY FORM

- <https://www.billingsschools.org/>
 - Faculty/Staff
 - Workers Comp
 - First Report of Injury

COMPLETE **ALL** HIGHLIGHTED AREAS ON THE FORM

EMPLOYEE **MUST** SIGN FORM

SUPERVISOR **MUST** SIGN FORM

ANY MISSING INFORMATION COULD DELAY PROCESSING OF CLAIM

SEND COMPLETED FORM TO:

HUMAN RESOURCES

LINCOLN CENTER ROOM 202

Atten: LAURIE BOGERS

OR

EMAIL:

bogersl@billingsschools.org

OR

FAX:

(406) 281- 6196

FORM IS PROCESSED AND SENT TO HELENA

MTSBA

SHAUNA FOLEY – CLAIMS REP

sfoley@mtsba-org

(406) 457-4411

FIRST REPORT OF Injury or Occupational Disease

Montana Schools Group

WCRRP

Workers' Compensation Risk Retention Program

Send Completed form to:

MTSBA Insurance Services

PO Box 7029

Helena, MT 59604

Toll Free: 1-877-667-7392

Fax: 406-457-4505

Worker

<u>LAST NAME</u>		<u>FIRST NAME</u>		<u>M/I</u>	<u>DATE OF BIRTH (MM/DD/YY)</u>	<u>SOCIAL SECURITY NUMBER</u>	
<u>MAILING ADDRESS</u>				<u>CITY</u>	<u>STATE</u>	<u>POSTAL CODE</u>	
<u>CONTACT NUMBER</u>	EDUCATION <input type="checkbox"/> LESS THAN HIGH SCHOOL <input type="checkbox"/> GED OR HIGH SCHOOL DIPLOMA <input type="checkbox"/> BEYOND HIGH SCHOOL	<u>GENDER</u> <input type="checkbox"/> MALE <input type="checkbox"/> UNKNOWN <input type="checkbox"/> FEMALE	<u>MARITAL STATUS</u> <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> SINGLE <input type="checkbox"/> UNKNOWN		<u>NUMBER OF DEPENDANTS</u>		

Wages					
<u>DATE HIRED</u>	GROSS EARNINGS FOR FOUR PAY PERIODS PRECEDING THE INJURY	<u>DATE/AMOUNT</u>	<u>DATE/AMOUNT</u>	<u>DATE/AMOUNT</u>	<u>DATE/AMOUNT</u>
<u>EMPLOYMENT STATUS</u> <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> SEASONAL <input type="checkbox"/> VOLUNTEER		NUMBER OF DAYS WORKED PER WEEK:	WAGE:	<input type="checkbox"/> HOUR <input type="checkbox"/> WEEK <input type="checkbox"/> MONTH <input type="checkbox"/> OTHER: <input type="checkbox"/> DAY <input type="checkbox"/> BI-WEEKLY <input type="checkbox"/> YEAR	
IN ADDITION TO GROSS EARNINGS CITED ABOVE WORKER RECEIVED: <input type="checkbox"/> OVERTIME <input type="checkbox"/> BONUS <input type="checkbox"/> OTHER ESTIMATED VALUE:					HOURS WORKED PER DAY:
WORKED NEXT SCHEDULED SHIFT <input type="checkbox"/> Yes <input type="checkbox"/> No	OFF WORK MORE THAN 4 WORK DAYS <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NOT SURE	<u>DATE LAST WORKED</u>	<u>DATE OF RETURN TO WORK</u>	FULL WAGES PAID FOR DATE OF INJURY? <input type="checkbox"/> Yes <input type="checkbox"/> No	SALARY CONTINUED? <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>OCCUPATION OF INJURED WORKER</u>	INJURED ASSIGNED TO: <input type="checkbox"/> ELEMENTARY <input type="checkbox"/> MIDDLE <input type="checkbox"/> HIGH SCHOOL <input type="checkbox"/> ADMIN.	<u>SCHOOL SITE/BUILDING WHERE INJ. EMP. WORKS</u>		PAYROLL CLASSIFICATION CODE: <input type="checkbox"/> 8868 <input type="checkbox"/> 9101	

Accident Description

<u>DESCRIPTION OF ACCIDENT:</u>					
<u>CAUSE OF INJURY</u>	<u>CAUSE CODE</u>	<u>PART OF BODY</u>	<u>PART CODE</u>	<u>NATURE OF INJURY</u>	<u>NATURE CODE</u>
<u>DATE DISABILITY BEGAN:</u>		<u>DATE OF DEATH:</u>	<u>NAMES OF WITNESSES:</u>		
			1)	2)	3)
<u>ACCIDENT ON EMPLOYER'S PREMISES?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>ACCIDENT ADDRESS OR LOCATION IF OFF PREMISES:</u>		<u>STATE:</u> <u>POSTAL CODE:</u>		
<u>DATE EMPLOYER NOTIFIED:</u>	<u>ACCIDENT REPORTED TO:</u>	<u>SAFETY EQUIPMENT PROVIDED?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No		<u>SAFETY EQUIPMENT USED?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Medical

<u>ATTENDING PHYSICIAN'S NAME:</u>	<u>ADDRESS:</u>	<u>CITY:</u>	<u>STATE/ZIP:</u>	<u>PHONE NUMBER:</u>
<u>HOSPITAL NAME:</u>	<u>ADDRESS:</u>	<u>CITY:</u>	<u>STATE/ZIP:</u>	<u>PHONE NUMBER:</u>
<u>TYPE OF INITIAL MEDICAL TREATMENT RECEIVED:</u> <input type="checkbox"/> NO TREATMENT <input type="checkbox"/> EMERGENCY ROOM <input type="checkbox"/> TREATMENT ON-SITE BY EMPLOYER OR MEDICAL STAFF <input type="checkbox"/> CLINIC/DR. OFFICE <input type="checkbox"/> HOSPITAL				

Signature

"This is my claim for workers' compensation benefits due to the on-the-job injury, occupational disease, or death of the above named worker. I understand that signing this claim for compensation authorizes the release to the workers' compensation insurer (and its agents) and to the Montana Uninsured Employers' Fund of: Social Security records; rehabilitation records; and all health care information (medical records, pursuant to HIPAA, Public Law 104-191, 42 USC section 1301, et. seq., and section 39-71-604, MCA), that are directly relevant to the claimed injury, disease, or death. I also understand that if I obtain or exert unauthorized control over workers' compensation benefits to which I am not entitled, I may be prosecuted for theft."

Signature of Injured Worker or Beneficiary

DATE

Employer

<u>EMPLOYER NAME:</u> BILLINGS PUBLIC SCHOOLS		<u>DOING BUSINESS AS:</u>		<u>FEDERAL EMPLOYER IDENTIFICATION NUMBER (TAX I.D.):</u> 81-6001088	
<u>MAILING ADDRESS:</u> 415 N 30 th St	<u>CITY:</u> BILLINGS	<u>STATE:</u> MT	<u>POSTAL CODE:</u> 59101	<u>PHONE NUMBER:</u> (406) 281-5044	
<u>LOCATION OF OPERATION, IF DIFFERENT FROM MAILING ADDRESS:</u>			<u>NATURE OF BUSINESS OR SIC CODE:</u> SCHOOL DISTRICT	<u>SELF-INSURED?</u> <input type="checkbox"/> YES <input type="checkbox"/> NO	
<u>DO YOU HAVE ANY REASON TO QUESTION THIS ACCIDENT?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No		<u>IF YES, PLEASE EXPLAIN FULLY. USE SEPARATE SHEET IF YOU NEED ADDITIONAL SPACE.</u>			<u>WAS WORKER INJURED WHILE IN YOUR EMPLOY?</u> <input type="checkbox"/> YES <input type="checkbox"/> NO
<u>PREPARED BY:</u> LAURIE BOGERS		<u>OFFICIAL TITLE:</u> HUMAN RESOURCES ASSISTANT			<u>DATE:</u>
<u>AUTHORIZED EMPLOYER'S SIGNATURE:</u>				<u>DATE:</u>	<u>DATE:</u>

Insurer

<u>CLAIM ADMINISTRATOR'S CLAIM NUMBER:</u>	<u>DATE REPORTED TO CLAIM ADMINISTRATOR:</u>	<u>THE ABOVE INFORMATION IS CORRECT WITH THE FOLLOWING EXCEPTIONS:</u> <input type="checkbox"/> (ATTACH EXTRA SHEETS IF BOX AT RIGHT IS CHECKED)	
<u>CLAIM ADMINISTRATOR'S NAME:</u> MTSBA INSURANCE SERVICES	<u>CLAIM ADMINISTRATOR'S ADDRESS:</u> PO Box 7029, HELENA, MT 59604	<u>FEIN:</u> 81-0460841	
<u>INSURANCE COMPANY NAME:</u> MONTANA SCHOOLS GROUP INSURANCE AUTHORITY/ WCRRP	<u>POLICY NUMBER:</u>	<u>POLICY EFFECTIVE DATE:</u>	<u>POLICY EXPIRATION DATE:</u>

PRINCIPAL/SECRETARY:

- If an employee is injured at work they should receive medical attention immediately if it is a serious injury (preferably at Billings Clinic or St. Vincent Occupational Health) or ER if necessary.
- Employee must complete the First Report of Injury (FROI) as soon as possible
 - All injuries (even minor) must be reported
 - Please make sure as much information is filled out as possible
 - **MUST INCLUDE:**
 - Date, location and details of injury
 - Signed by Employee
 - Signed by Administrator
 - Please make sure this form is turned into Kham Moua at the Business Office **AS SOON AS POSSIBLE. Delay of receiving this form may effect the pay and benefits available to the employee.**
- If employee is going to miss work (for any amount of time due to this injury) they need to fill out a Leave Request - put in as Work Comp.
- Employees may use their sick/vacation or discretionary leave only for the first 32 hours of leave, then it must be unpaid until the wage loss determination is made by MSGIA (Workers Comp)
 - Employees cannot be paid by the district if they are receiving Wage Loss benefits from Worker's Comp
 - If Wage Loss benefits are not awarded, then the Employee may use sick/vacation/discretionary leave
- MSGIA will contact the Employee directly regarding the determination of their claim, the district has no part in the determination of claims
- If an employee receives an early return to work release with restrictions, the Principal/Supervisor must meet with the employee and fill out the Transitional Employment Plan detailing the accommodations and must submit to Kham in the Business Office so it can be approved by MSGIA (Workers Comp) before the employee returns.

WORKERS COMP PROCESS - EMPLOYEE

