

STATE OF IDAHO SUPERINTENDENT CONTRACT FORM

THIS CONTRACT, Made this Eighth day of June year of 2017, by and between Emmett Independent School District No. 221, Emmett, Idaho in Gem and Boise Counties, State of Idaho (hereinafter called the District), and Wayne Lee Rush (hereinafter called the Superintendent),

WITNESSETH:

1. That the District hereby contracts to and does hereby employ said Superintendent as Superintendent of Schools of Emmett Independent School District No. 221, Emmett, Idaho in Gem and Boise Counties, State of Idaho, for a period of three years (twelve months per year), beginning July 1, in the year of 2017, and extending to June 30 in the year of 2020, at a salary of One Hundred Thirteen Thousand Ninety-Eight Dollars (\$ 113,098) the first year, with increases to be determined each year by the Board for each of the succeeding years until this contract has been fulfilled. Said salary shall be paid in equal monthly installments on the 26 day of each month for such services, the first payment to be made on July 26 in the year of 2017.
2. In consideration of the promises and agreement of the District hereinbefore recited, the Superintendent agrees to assume the duties of Superintendent of Schools at Emmett, Idaho on July 1 in the year of 2017, and to faithfully perform and discharge the same to the best of his/her ability as directed by the Board of Trustees, and to comply with the applicable laws of the State of Idaho, the duly adopted rules of the State Board of Education, and such regulations, directives and policies as the Board of Trustees may legally prescribe which are, by reference, incorporated in and made a part of this contract as though fully set forth herein.
3. It is further agreed that the Superintendent will have authorization to attend, at District expense, all meetings of the State Board of Education or the State Superintendent of Public Instruction to which the Superintendent is invited, and that the Board of Trustees will adopt policies pertaining to attendance at other professional meetings and conferences including expenses of travel.
4. It is hereby mutually stipulated and agreed by and between the parties that nothing herein contained shall operate or be construed as a waiver of any of the rights, powers, privileges, or duties of either party hereto, by and under the laws of the State of Idaho, otherwise than is herein expressly stated, and that no property rights attach to this Contract beyond the term of this Contract.
5. The terms of this Contract shall be subject to amendment and adjustment to conform to the terms of any negotiated agreement between the parties as long as those terms do not conflict with the terms of this Contract. The District agrees, as part of this contract, to provide for three weeks (3) paid vacation on a 250-day contract. Any vacation time not used at the time of official departure (not to exceed 15 days) from the Emmett School District will be paid to the party of the Second Part.

IN WITNESS WHEREOF the District has caused this instrument to be executed in its name by its proper officials and the Superintendent has executed the same all on the date first above written.

EMMETT INDEPENDENT SCHOOL DISTRICT NO. 221 EMMETT, IDAHO, AND GEM AND BOISE COUNTIES, STATE OF IDAHO

Attest:

BY



CHAIRMAN, BOARD OF TRUSTEES

DATE


CLERK, BOARD OF TRUSTEES 6/14/17 DATE

 6-9-2017

SUPERINTENDENT

DATE

**INSURANCE RATES
EFFECTIVE SEPTEMBER 1, 2018**

EMMETT SCHOOL DISTRICT

PACIFIC SOURCE - SIGNATURE PLAN

- HSA PLAN

DELTA DENTAL

	PACIFIC SOURCE - SIGNATURE PLAN			HSA PLAN			DELTA DENTAL	
	HEALTH PREMIUM	TOTAL COSTS TO EMPLOYEES DD / WD		HEALTH PREMIUM	TOTAL COSTS TO EMPLOYEES DD / WD		DENTAL	TOTAL COSTS TO EMPLOYEE
	Enrollee	584.23	49.15	52.95	493.53	-	-	37.00
Ee/Spouse	1,284.18	749.10	752.90	1,084.77	549.69	553.49	82.20	45.20
Ee/Child	899.19	364.11	367.91	759.55	224.47	228.27	71.25	34.25
Ee/Children	1,044.95	509.87	513.67	882.58	347.50	351.30	106.00	69.00
Family w/spouse	1,488.32	953.24	957.04	1,257.15	722.07	725.87	141.85	104.85
DBL CPL	1,488.32	418.16	425.76	1,257.15	186.99	194.59	141.85	67.85

RETIREE RATES

	MEDICAL PREMIUM 65 & OVER PLAN			RETIREE DELTA DENTAL PREMIUM	
	65 & OVER PLAN	Medicare		UNDER 65	65 & OVER
Enrollee			Enrollee	Same as above	47.80
EE/Spouse			EE/Spouse	Same as above	95.70
EE/Child			EE/Child	Same as above	92.25
EE/Children			EE/Children	Same as above	137.10
Family w/ spouse			Family w/ s	Same as above	183.55

WILLAMETTE DENTAL RATES

	PREMIUM	COST TO EMPLOYEE	RETIREE RATES			
			DENTAL			
			PREMIUM 65 & OVER		UNDER 65	
Enrollee	40.80	-	Enrollee	40.80	40.80	Same as above
Ee/Spouse	88.27	47.47	Ee/Spouse	88.27	88.27	Same as above
Ee/Child	78.42	37.62				
Ee/Children	116.74	75.94				
Family w/spouse	156.35	115.55				
DBL CPL	156.35	74.75				

LIFE MAP - VISION RATES

	PREMIUM	COST TO EMPLOYEE	RETIREE RATES			
			VISION			
			PREMIUM 65 & OVER		UNDER 65	
Enrollee	7.83	-	Enrollee	Same	Same	
Ee/Spouse	15.69	7.86	Ee/Spouse	Same	Same	
Ee/Child(ren)	16.78	8.95				
Family w/spouse	26.81	18.98				
DBL CPL	26.81	11.15				

LIFEMAP LIFE

Employee	9.45	50,000
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EMPLOYEE ASSISTANCE PROGRAM

Employee	0.64
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DISTRICT WILL PAY \$590.00	
Delta Dental .64, 9.45, 7.83, 37.00	535.08 W-Dental .64, 9.45, 7.83, 40.80, 531.28

If you have the H S A plan as an employee only the district will put \$40.00 into your H S A account (if you have one open) \$41.55 difference 18-19 H S A

Superintendent receives the same benefits as all full time (eligible) employees.