

VICTOR VALLEY UNION HIGH SCHOOL DISTRICT

Safety Shoe Reimbursement Form

Position: _____

Date: _____

In accordance with Article 7.10 of the negotiated contract between CSEA (Union) and Victor Valley Union High School District (District), the District shall reimburse bargaining unit members working in the classifications below for safety shoes on an annual basis and not to exceed \$150.00.

Bargaining unit members working in positions that require **steel toe boots** as a condition of employment, will be reimbursed an amount not to exceed \$200.00.

Criteria for a claim made for the reimbursement of Safety Shoes:

1. Claim must have the original itemized receipts attached.
2. Shoes must meet the California Occupational Safety and Health Act Regulations. A receipt with this description or a copy of the box which states CalOSHA must be included.
3. The supervisor or District’s designee must verify and approve the reimbursement by signing below
4. Reimbursement form is delivered to Accounts Payable for payment.

Per CSEA Contract 7.10.1

1. Custodian - \$150.00
2. Grounds Maintenance Worker - \$200.00
3. Maintenance Worker – \$200.00
4. Mechanic – \$200.00
5. Warehouse/Delivery Person - \$200.00
6. Campus Security/Campus Security Assistant \$150.00
7. Food Service Worker - \$150.00

Expenses and Purpose

Description of Item (Original Receipts Required)	Amount
	\$
Total Claim	\$

Budget Code: 01-0000-0-0000-7392-4390-825-0000

Supervisor’s Name

Claimant’s Name

Supervisor’s Signature

Date

Claimant’s Signature

Date

Claimant’s Mailing Address

City State Zip