

VICTOR VALLEY UNION HIGH SCHOOL DISTRICT

Safety Shoe and Uniform Reimbursement Form

Name: _____

Date: _____

Position: _____

Site: _____

Members of the negotiated agreement between the California School Employees Association (CSEA) and the Victor Valley Union High School District (District) may receive reimbursement for required uniforms and/or appropriate safety shoes.

Reimbursement Requirements:

1. Claim must have the original itemized receipts attached.
2. Uniforms must meet the District's approved styles, colors and fabrics.
3. Safety shoes must meet Cal/OSHA requirements (receipt or shoe box stating compliance required).
4. The employee's supervisor or the District's designee must verify and approve the reimbursement by signing below.
5. The completed reimbursement form is delivered to Accounts Payable for payment.

Allowances

The District shall provide an annual uniform allowance for employees who are required to wear uniforms in the following classifications:

Uniform Allowance (Article 7.8) - Per MOU signed 8/29/25 and Board Approved 9/11/25

- **\$ 650.00 annually:** Bus Drivers, Campus Security, Custodian, Grounds Maintenance Worker, Maintenance Worker, Mechanic, Warehouse Operator
- **\$325.00 annually (Food Services):** Food Service Assistant, Food Service Assistant II, Food Services Operator, Food Services Lead Operator

Safety Shoe Reimbursement (Article 7.10.1)

- **Up to \$150.00 annually:** Custodian, Food Service, Campus Security / Campus Security Assistant
- **Up to \$200.00 annually (steel-toe required):** Grounds Maintenance Worker, Maintenance Worker, Mechanic, Warehouse Operator

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

Claimant's Name

Claimant's Signature

Date

Claimant's Mailing Address

City

State

Zip Code

Supervisor's Name

Supervisor's Signature

Date

For Fiscal Use Only (Use Budget Code: 01-0000-0-0000-7392-4390-825-0000)

Processed By: _____ Date: _____