

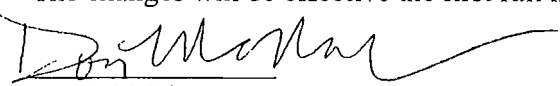
MEMORANDUM OF UNDERSTANDING
BETWEEN
SAN MATEO COUNTY OFFICE OF EDUCATION
AND
CSEA AND ITS CHAPTER 158

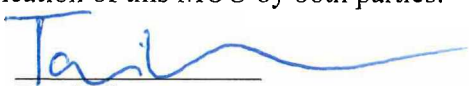
October 6, 2025

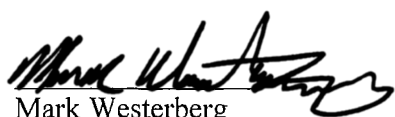
The County Office and CSEA and its Chapter 158 enter into this Memorandum of Understanding as it relates to the classifications of Health Care Specialist, Senior Naturalist, and Naturalist. This MOU updates the parties prior MOU relating to the implementation of the class and comp study.

- The parties agree that the classifications of Health Care Specialist, Senior Naturalist, and Naturalist will maintain their current salary ranges as agreed to in the parties' class and comp study MOU.
- The parties agree to the changes for the above three classifications as follows:
 - Housing: The County Office will not charge employees in those classifications for the cost of housing provided to those employees.
 - Meals: Employees in these classifications will continue to pay for meals they receive in their roles. The current meal prices are:
 - breakfast at \$4/day; lunch at \$5/day; and (3) dinner at \$6/day. Employees will be charged a total of \$15/day for a total of \$60/week (because there is currently the equivalent of four days of meals provided).
 - The parties understand and agree that:
 - The price for the meals may be adjusted periodically and employees will be provided notice of any changes in the prices of the meals.
 - That unit members were not charged for their meals in September 2025 pending the parties entering into this agreement and that the County Office will be obtaining authorizations from those unit members to withhold \$60 per paycheck for a period of four months to cover the cost of meals from September 2025.

The changes will be effective the first full month after ratification of this MOU by both parties.


Don McNab
Chapter 158 President


Tami Moore
Associate Superintendent, HR


Mark Westerberg
CSEA LRR



**SAN MATEO
COUNTY
OFFICE OF
EDUCATION**

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2025-2026 Outdoor Education Off-Site Staff Meal Plan Opt-In/Opt-Out Form

Employee Name (Print): _____ Date: _____

Title: _____

Purpose

Employees who reside off site while working in the Outdoor Education Program may elect to participate in the meal plan provided to staff at the site. This form allows you to indicate your choice to opt in or opt out of the meal plan for the current session or employment term.

Meal Plan Overview

- The meal plan includes breakfast, lunch, and dinner provided on-site during scheduled workdays. Dinner is not included on Fridays.
- The cost of participation will be deducted through payroll, as outlined by the Business Services Office.
- Employees who opt out are responsible for providing their own meals and may not take meals from the dining facilities.

Employee Selection

☐ Opt In – I elect to participate in the Outdoor Education meal plan.

I understand that I will be responsible for the associated cost and agree to the terms outlined above.

☐ Opt Out – I decline participation in the Outdoor Education meal plan.

I understand that I am responsible for providing my own meals and will not take meals from the dining facilities.

Employee Authorization

Employee Signature: _____

Date: _____

Supervisor Authorization

Supervisor Signature: _____

Date: _____