



JOB SHARE PROGRAM 2019-2020

New _____

Renewal _____

Please return Job Share Agreement, Health & Benefits form to Shannon Bossard at sraymond@sandi.net.

**JOB SHARE AGREEMENT
NAMES OF PARTICIPANTS**

REQUIRED Partner A	REQUIRED Partner B
<i>Initial One</i>	<i>Initial One</i>
Job Share _____ Reduced Workload _____	Job Share _____ Reduced Workload _____
Name: _____	Name: _____
Employee ID # _____	Employee ID # _____
Phone: _____	Phone: _____
Home Address: _____ _____	Home Address: _____ _____
Email: _____	Email: _____
INSTRUCTIONAL SCHEDULE FOR 2018-19	INSTRUCTIONAL SCHEDULE FOR 2018-19
School and Assignment Percentage (%): _____ _____	School and Assignment Percentage (%): _____ _____
Grade Level/Assignment Program: _____	Grade Level/Assignment Program: _____

OUTLINE OF RESPONSIBILITIES

According to Article 21.2.3: A written plan for a job sharing assignment shall be presented to the site administrator for approval by May 1 of each school year and referred to the appropriate circumstances, the May 1 deadline may be exceeded. (See also Appendix J.)

Please provide a written plan that addresses who will be responsible for filling the following requirements:

Administrative Circular 7342:

- Pupil program reporting/grading
- Parental contacts/communications
- Planning and preparations
- Scheduling and grouping
- Performance of responsibilities such as yard duty, supervision of aides, open house and PTA functions
- Departmental/grade-level meetings
- Faculty meetings
- Extracurricular duties
- Intended work schedule for the school year (including calendars to show that both participants will work the the required days)
- Method of covering short-term absences of a job-sharing partner

I acknowledge that upon termination of the job share assignment, the participant with the required credential and greater district seniority will have the right of assignment to the budgeted position. This right may be waived if both partners stipulate to the waiver in their original job share agreement. The other participant will not have a right of seniority over other teachers who are regularly assigned to the cost center.

Both job share partners must initial on the same line.

When there are two job share partners and one partner is coming from another site or program they agree that the right of assignment to the positions will be:

____/____ As stipulated in the above paragraph
 ____/____ Partner A
 ____/____ Partner B

I agree to the requirements of the program as outlined above and as described in Administrative Procedure 7342. Sign below only if you are a job share participant. **Reduced workload participant should not sign.**

Signature Partner A: _____ Date: _____

Signature Partner B: _____ Date: _____

Approvals Page

This page must be signed by both parties to be valid.

Approve: _____

Disapprove: _____

Principal/Administrator Signature _____ Date: _____

HR USE ONLY

Approve: _____

Disapprove: _____

HRO Signature: _____

Date: _____