
SECTION SIX:

PAYROLL

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*** The following terms are used interchangeably when processing payroll —

- a. Wage and Hour Employee
 - b. Classified Employee
 - c. Non-Exempt Employee
-

LCSD PAYROLL OFFICE

DONNA SILAS, LEAD PAYROLL CLERK 244-5012

AMY THREADGILL, PAYROLL CLERK 244-5012
(CONTACT FOR TIMETRUST)

E-MAIL payroll@lowndes.k12.ms.us

FAX NO. 244-5044

CONTACT PAYROLL FOR:

- Integrity leave process and entry instructions including Workers Comp and FMLA (see the following pages of this book **prior** to contacting payroll)
- Changes due to:
 - Insurance Deductions
 - Cafeteria Plan
 - Direct Deposit (Form on web)
 - State And Federal Withholding Taxes
- Time Trust Reports

Contact PERSONNEL (244-5010) for:

- **FMLA & Workers Compensation Claims** All aspects except how to enter the leave into Integrity
- **Retirement (PERS)**
 - Enrollment of new employees
 - Retirement of current employees
 - Retiree re-employment
 - Withdrawal of contributions when an employee separates employment
- **Donated Leave Request/Approval**
- **Name and Address changes including BCBS Health Insurance address changes**
- **BCBS Open Enrollment in October**

PRIVACY ISSUE

SOME REPORTS YOU RUN IN INTEGRITY MAY INCLUDE SOCIAL SECURITY NUMBERS.

- ✓ If you run a report for a specific employee, you must black out the social security number completely before giving this report to the employee.
- ✓ This is VERY IMPORTANT. Do not leave reports lying around in your office with social security numbers so others can view. Place all items with social security numbers or any other confidential information in a very secure place.
- ✓ Copies run that you are not going to keep or use must be burned or shredded.
- ✓ When you send your payroll report, you must place in an envelope and seal the envelope to send through the school mail.
- ✓ Also, all information concerning FMLA and other leave is private. You must file in a secure environment and limit the use to the payroll procedure.
- ✓ If an employee brings a direct deposit, deduction change or address change to you, please have employee place in an envelope, seal and send through the mail himself/herself. **Payroll CANNOT discuss anything on deductions, including garnishments or demographic screens, with anyone other than employee.**
- ✓ Employees working with payroll must understand that information is confidential and some of the information is covered under the Federal Privacy Act.

**LOWNDES COUNTY SCHOOL DISTRICT
2021-2022 ACADEMIC CALENDAR (187 DAYS)**

Board Approved: 3/12/21

	M	T	W	Th	F
AUG 2021	2	3	4	5	6
T-22	9	10	11	12	13
S-19	16	17	18	19	20
	23	24	25	26	27
	30	31			

- Teacher Work Day (student holidays)
- School Holiday
- Aug. 2, 3, 4 - Teacher Work Days/Staff Development
- Aug. 5 - Students' First Day

Grading Periods	
August 5 – October 8 (46)	
October 11 – December 22 (46)	
January 11 – March 25 (46)	
March 28 – May 25 (42)	

SEP 2021			1	2	3
T-21	6	7	8	9	10
S-21	13	14	15	16	17
	20	21	22	23	24
	27	28	29	30	

- Sept. 2 - Progress Reports
- Sept. 6 - Labor Day Holiday

OCT 2021					1
T-20	4	5	6	7	8
S-19	11	12	13	14	15
	18	19	20	21	22
	25	26	27	28	29

- Oct. 8 - End of 1st Nine Weeks/Semester (4x4)
- Oct. 14 - Report Cards issued
- Oct. 15 - Parent Conference Day/Student Holiday
- Oct. 18 - Fall Break

NOV 2021	1	2	3	4	5
T-17	8	9	10	11	12
S-17	15	16	17	18	19
	22	23	24	25	26
	29	30			

- Nov. 10 - Progress Reports
- Nov. 22-26 - Thanksgiving Holidays (All schools)

DEC 2021			1	2	3
T-16	6	7	8	9	10
S-16	13	14	15	16	17
	20	21	22	23	24
	27	28	29	30	31

- Dec. 22 - End of 1st Sem/Course (4x4) 60% day
- Dec. 23 - Christmas Holidays begin

JAN 2022	3	4	5	6	7
T-15	10	11	12	13	14
S-14	17	18	19	20	21
	24	25	26	27	28
	31				

- Jan. 2 - New Year's Day Holiday
- Jan. 10 - Professional Development/Student Holiday
- Jan. 11 - Students Return
- Jan. 13 - Report Cards issued
- Jan. 17 - Martin Luther King Holiday

FEB 2022		1	2	3	4
T-19	7	8	9	10	11
S-19	14	15	16	17	18
	21	22	23	24	25
	28				

- Feb. 10 - Progress Reports
- Feb. 21 - President's Day Holiday

MAR 2022		1	2	3	4
T-18	7	8	9	10	11
S-17	14	15	16	17	18
	21	22	23	24	25
	28	29	30	31	

- Mar. 14-18 - Spring Break
- Mar. 21 - Professional Development/Student Holiday
- Mar. 25 - End of 3rd Nine Weeks/Semester (4x4)
- Mar. 31 - Report Cards issued

APR 2022					1
T-20	4	5	6	7	8
S-20	11	12	13	14	15
	18	19	20	21	22
	25	26	27	28	29

- Apr. 12 - Progress Reports
- Apr. 15 - Good Friday Holiday

MAY 2022	2	3	4	5	6
T-19	9	10	11	12	13
S-18	16	17	18	19	20
	23	24	25	26	27
	30	31			

- May 21 Graduations
- May 25 - Last Day for Students (60% Day) Report Cards
- May 26 - Last Day for Teachers
- May 30 - Memorial Day Holiday

NOTE: Holidays may be used as makeup days for bad weather.

STUDENT DAYS: 1st Semester: 92
 2nd Semester: 88
 180

TEACHER DAYS: 1st Semester: 96
 2nd Semester: 91
 187

"Challenge all students to attain their greatest potential."

**PAYROLL CUT-OFF DATES
2021-2022 SCHOOL YEAR
REGULAR & SUBSTITUTE PERSONNEL**

TIME SHEET/CLOCK SHOULD INCLUDE THESE DATES	PAYROLL REPORTS DUE TO PAYROLL OFFICE	PAYROLL PAY DATE Last work day of the month	# OF WORK DAYS
MONDAY-SUNDAY	TUESDAY		
MAY 31 -JUN 27	6-Jul-21	7/30/2021	19
JUNE 28-JUL 25	3-Aug-21	8/31/2021	19
JUL 26-AUG 29	7-Sep-21	9/30/2021	25
AUG 30-SEPT 26	5-Oct-21	10/29/2021	19
SEPT 27- OCT 24	2-Nov-21	11/30/2021	20
OCT 25 - NOV 28	7-Dec-21	12/22/2021	20
NOV 29-DEC 26	11-Jan-22	1/28/2022	18
DEC 27- JAN 30	8-Feb-22	2/28/2022	15
JAN 31 - FEB 27	8-Mar-22	3/31/2022	20
FEB 28- MAR 27	5-Apr-22	4/29/2022	15
MAR 28-APR 24	3-May-22	5/31/2022	19
APR 25- MAY 29	7-Jun-22	6/30/2022	25
MAY 30 - JUNE 26	WEDNESDAY 6-Jul-22	7/29/2022	20
JUNE 27-JULY 25	2-Aug-22	8/31/2022	19

- **ALL LEAVE MUST BE ENTERED & CHECKED FOR ACCURACY (INCLUDING CORRECT SUBSTITUTE) DAILY.**
- **ALL PAYROLL REPORTS MUST BE CORRECT BEFORE THEY ARE SUBMITTED TO PAYROLL, CHILD NUTRITION, OR THE BUS SHOP.**
- **Make sure all individual time sheets AND leave forms are submitted by the above dates.**
- **IF TIME SHEETS, SUB REPORTS & LEAVE FORMS ARE RECEIVED AFTER THE ABOVE PAYROLL DUE DATES, THE EMPLOYEE WILL NOT BE PAID UNTIL THE NEXT PAYROLL.**
- **ALL LEAVE WILL BE VERIFIED BY CENTRAL OFFICE PAYROLL EACH MONTH AFTER 9:00 AM ON THE DAY AFTER THE ABOVE CUT-OFF DATES.**
- **ALL SUBSTITUTES WILL BE PAID ACCORDING TO THE PAYROLL CUT-OFF DATES LISTED ABOVE.**

PAYROLL CUT-OFF DATES

2021-2022 SCHOOL YEAR BUS DRIVERS - NON CERTIFIED

TIME SHEET/CLOCK SHOULD INCLUDE THESE DATES	DUE DATE TO ASSISTANT PRIN.	PICKED UP BY MR. ALDRIDGE ON	DUE TO CENTRAL OFFICE	PAYROLL DATE	DAYS **
MONDAY-SUNDAY JUN 28 - JULY 25	MONDAY 8/2/2021	WEDNESDAY 4-AUG-21	FRIDAY 08/06/21	8/31/2021	0
JULY 26 - AUG 29	TUESDAY 9/7/2021	8-SEPT-21	09/10/21	9/30/2021	18
AUG 30 - SEPT 26	10/4/2021	6-Oct-21	10/09/21	10/29/2021	19
SEPT 27 - OCT 24	11/1/2021	3-NOV-21	11/05/21	11/30/2021	18
OCT 25 - NOV 28	12/6/2021	8-DEC-21	12/10/22	12/22/2021	20
NOV 29 - DEC 26	1/10/2022	12-Jan-22	01/14/22	1/28/2021	18
DEC 27 - JAN 30	2/1/2022	9-FEB-22	02/10/22	2/28/2022	13
JAN 31 - FEB 27	3/7/2022	9-MAR-22	03/11/22	3/31/2022	19
FEB 28 - MAR 27	4/4/2022	6-APRIL 22	04/08/22	4/29/2022	14
MARCH 28 - APR 24	5/2/2022	4-May-22	05/06/22	5/31/2022	19
<u>At this point all leave should be entered/turned in and all time sheets complete.</u>					
APR 25 - MAY 29	6/6/2022	6-Jun-22	06/10/22	6/30/2022	24

All individual time sheets/time cards MUST be submitted by the above dates.

IF TIME SHEETS, SUB REPORTS & LEAVE FORMS ARE RECEIVED AFTER THE ABOVE PAYROLL DUE DATES, THE EMPLOYEE WILL NOT BE PAID UNTIL THE NEXT PAYROLL.

****AMOUNT PAID FOR HOURS OVER CONTRACT HOURS WILL BE ACCORDING TO THE # OF WORK DAYS IN A PAYROLL PERIOD.**

PAYROLL CUT-OFF DATES

2021-2022 SCHOOL YEAR

TIME SHEETS FOR CHILD NUTRITION, TITLE, TUTORS, HOMELESS AND STIPENDS

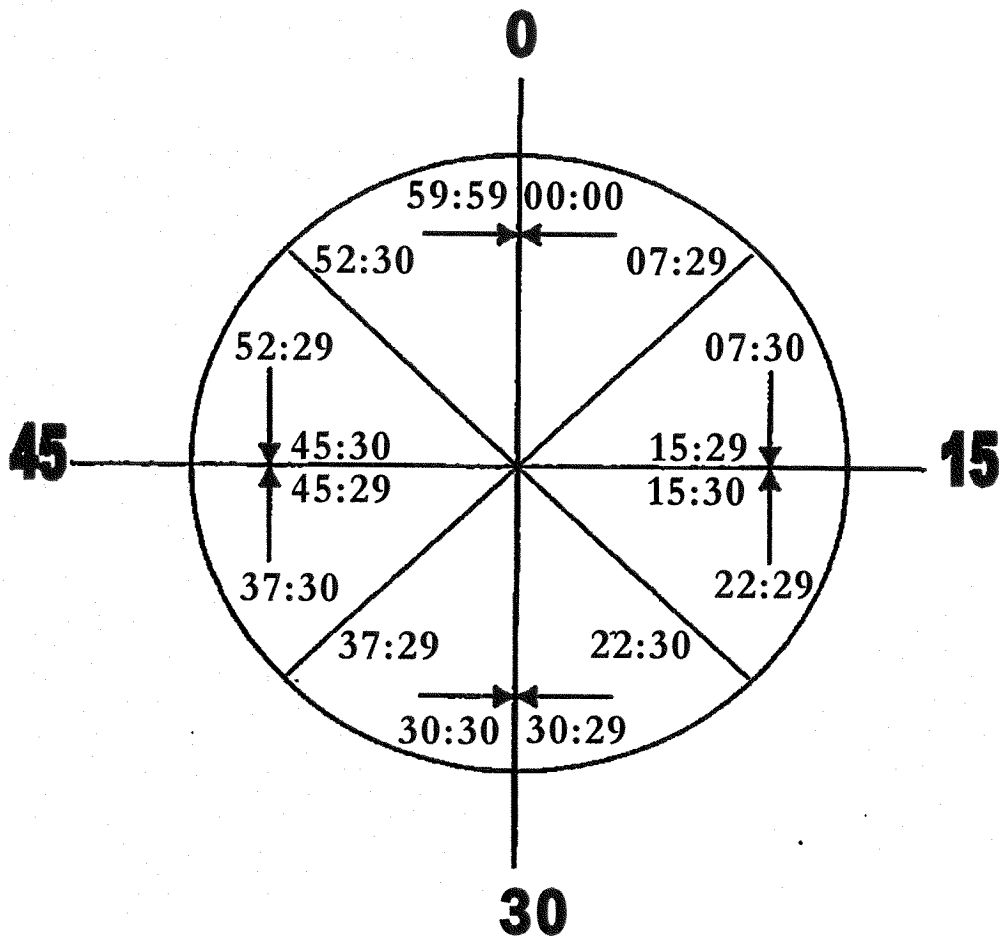
TIME SHEET/CLOCK SHOULD INCLUDE THESE DATES	Date Due to Administrator	Administrator Date Due IN Payroll	Payroll Date	# OF WORK DAYS **
MONDAY-SUNDAY	WEDNESDAY	FRIDAY		
JUN 28 - JULY 25	4-Aug-21	08/6/21	8/31/2021	0
JULY 26 - AUG 29	8-Sep-21	09/10/21	9/30/2021	19
AUG 30 - SEPT 26	6-Oct-21	10/08/21	10/29/2021	19
SETP 27 - OCT 24	3-Nov-21	11/05/21	11/30/2021	18
OCT 25 - NOV 28	8-Dec-21	12/10/21	12/22/2021	20
NOV 29 - DEC 26	12-Jan-22	01/14/22	1/28/2022	18
DEC 27 - JAN 30	9-Feb-22	02/11/22	2/28/2022	13
JAN 31 - FEB 27	29-Mar-22	03/11/22	3/31/2022	19
FEB 28 - MAR 27	6-Apr-22	04/08/22	4/29/2022	14
MARCH 28 - APRI 24	4-May-22	05/06/22	5/31/2022	19
APR 25 - MAY 29	8-Jun-22	06/07/19	6/30/2022	23

All individual time sheets **MUST** be submitted by the above cutoff dates in order for employees to be paid.

Wage and Hour employee time sheets **MUST** be turned in by cutoff dates to avoid Wage and Hour violations.

If reports are received after the date due to payroll, the employee will be paid on the next payroll.

TIME CLOCK ILLUSTRATION (min:sec)



Rounding: The diagram above shows how the time clock rounds your time. An example would be if you clock in at 7:07:29 your start time would be 7:00. If you clocked out at 2:52:30 your end time would be 3:00.

TERMINATED EMPLOYEES
IN THE MIDDLE
OF THE PAYROLL PERIOD/FISCAL YEAR

- ✓ Notify personnel immediately.

✓ Send personnel change form to personnel immediately. **Do not wait.**

- ✓ If you have an employee that will not furnish termination letter, notify personnel.
- ✓ School payroll manager must enter all leave through the termination date. If the employee leaves without notice, you must enter leave record(s) with comments.

✓ If the terminated employee is a Wage and Hour employee, run his/her payroll reports on the last day he/she works. Have the employee and supervisor sign the timesheet before he/she leaves and after he/she clocks out. His/her timesheet and applicable leave reports must be faxed or e-mailed to the Chief Accounting Clerk, Laura Parish, at 662-244-5044 or **Laura.Parish@lowndes.k12.ms.us**.

- ✓ *If employee leaves without notice*, run his/her timesheet and state reason for no signature on the timesheet – principal/administrator must sign. Send to Chief Accounting Clerk as notated above.
- ✓ **DO NOT ENTER ANY LEAVE FOR THE TERMINATED EMPLOYEE DATED AFTER THE TERMINATION DATE LISTED ON THE PERSONNEL CHANGE FORM.** The principal must furnish a copy of the personnel change form to the school payroll manager before submitting it to Personnel to prevent this from happening.
- ✓ ***If employees are overpaid due to improper reporting, the principal/administrator/supervisor could be assessed with the overpayment.***

Note: *The employee's final pay will be processed according to the paperwork, including timesheets & leave reports, received. The final timesheet & leave reports must be accurate before being sent to Payroll.*

SUBSTITUTES

PLEASE FURNISH to ALL school substitutes:

1. A PAYROLL CUT-OFF CALENDAR, AND
 2. A TEACHER SUBSTITUTE PAYROLL SCALE
-

Please explain to all substitutes that the days paid each payroll are paid in accordance with the days in that period on the payroll cut-off calendar.

Exception: A substitute will be paid for days substituted on employees who are absent for FMLA or ineligible for FMLA and are on extended leave periods.

Also, explain to substitutes that if they do not agree with their pay, they must check with the school payroll manager **FIRST** to verify days submitted in payroll report for that period.

Substitutes must be called from the Substitute List provided by Personnel Supervisor NOT from Integrity.

Integrity has inactive subs as well as active subs. Personnel's list is the official board approved current list.

SUBSTITUTE REQUEST FORMS:

- ✓ The Substitute Request Form is available online and a copy is provided in the "Forms" Section of this manual.
- ✓ Please email requests to payroll@lowndes.k12.ms.us with "**SUBSTITUTE REQUEST FORM**" as the subject or fax to Payroll at 662-244-5044
- ✓ Payroll enters all submitted request forms daily after 9:00 a.m. If the form is not received by 9:00 a.m., the sub will be entered the following day.

Substitutes MUST clock in & out!!!

(The time station now **requires** that the sub select a Teacher to be clocked in; if a Teacher is not selected THE SUB IS **NOT** CLOCKED IN!!!!)

PAYROLL CUT-OFF DATES 2021-2022 SCHOOL YEAR REGULAR & SUBSTITUTE PERSONNEL

TIME SHEET/CLOCK SHOULD INCLUDE THESE DATES	PAYROLL REPORTS DUE TO PAYROLL OFFICE	PAYROLL PAY DATE Last work day of the month	# OF WORK DAYS
MONDAY-SUNDAY	TUESDAY		
MAY 31 -JUN 27	6-Jul-21	7/30/2021	19
JUNE 28-JUL 25	3-Aug-21	8/31/2021	19
JUL 26-AUG 29	7-Sep-21	9/30/2021	25
AUG 30-SEPT 26	5-Oct-21	10/29/2021	19
SEPT 27- OCT 24	2-Nov-21	11/30/2021	20
OCT 25 - NOV 28	7-Dec-21	12/22/2021	20
NOV 29-DEC 26	11-Jan-22	1/28/2022	18
DEC 27- JAN 30	8-Feb-22	2/28/2022	15
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FEB 28- MAR 27	5-Apr-22	4/29/2022	15
MAR 28-APR 24	3-May-22	5/31/2022	19
APR 25- MAY 29	7-Jun-22	6/30/2022	25
MAY 30 - JUNE 26	WEDNESDAY 6-Jul-22	7/29/2022	20
JUNE 27-JULY 25	2-Aug-22	8/31/2022	19

- **ALL LEAVE MUST BE ENTERED & CHECKED FOR ACCURACY (INCLUDING CORRECT SUBSTITUTE) DAILY.**
- **ALL PAYROLL REPORTS MUST BE CORRECT BEFORE THEY ARE SUBMITTED TO PAYROLL, CHILD NUTRITION, OR THE BUS SHOP.**
- Make sure all individual time sheets AND leave forms are submitted by the above dates.
- **IF TIME SHEETS, SUB REPORTS & LEAVE FORMS ARE RECEIVED AFTER THE ABOVE PAYROLL DUE DATES, THE EMPLOYEE WILL NOT BE PAID UNTIL THE NEXT PAYROLL.**
- ALL LEAVE WILL BE VERIFIED BY CENTRAL OFFICE PAYROLL EACH MONTH AFTER 9:00 AM ON THE DAY AFTER THE ABOVE CUT-OFF DATES.
- **ALL SUBSTITUTES WILL BE PAID ACCORDING TO THE PAYROLL CUT-OFF DATES LISTED ABOVE.**

LOWNDES COUNTY SCHOOLS
2021 - 2022 WAGE AND HOUR PAY SCALES

NON-DEGREE SUBSTITUTE TEACHER	\$70.00 PER	DAY	8.75 PER HR
DEGREED SUBSTITUTE TEACHER	\$80.00 PER	DAY	10.00 PER HR
LONG TERM SUBSTITUTE TEACHERS	\$112.00 PER	DAY	14.00 PER HR

APPROVED BY BOARD OF EDUCATION

MAY 14 2021

LOWNDES COUNTY SCHOOL DISTRICT
SUBSTITUTE REQUEST FORM

REQUEST TO ENTER SUBSTITUTES INTO INTEGRITY

SUBSTITUTE NAME: _____

**LOCATION/
DEPARTMENT:** _____

SIGNATURE OF REQUESTOR : _____

DATE OF REQUEST: _____

NOTE: Please do not have substitutes call payroll to see whether they are in the system. Substitutes will be entered one time a day (around 9 AM) from requests submitted and received by 9:00 a.m.

Direct Deposit Employee Email Address

Effective August 31, 2020, Direct Deposit Statements will be published on Employee Connect and emailed to each employee. Direct Deposit statements are no longer being printed. If you do not have a LCSD email address, please provide us with your email address below. Any update in employee's email address must be provided to the Payroll Department by the 20th of each month by completing an updated Direct Deposit Employee Email Address form.

Employee Name _____ Employee ID # _____

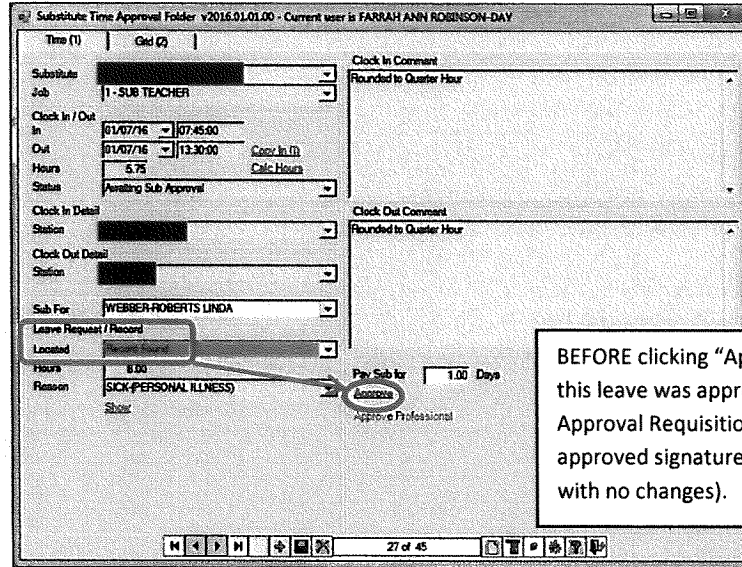
Employee Email Address _____

Signed _____ Date _____

SUBSTITUTE APPROVAL PROCESS

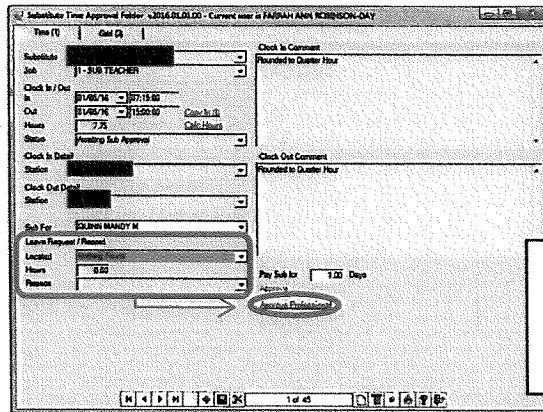
1. Subs will be entered on leave records as the Substitute Approval process is completed —
 - a. **All subs should clock every time they sub in the district.** (NOTE: If the substitute has not worked in the district, he or she will not be able to clock until we have received a substitute request form and entered his or her packet. See page 10.)
 - b. No time edit requests should be entered for subs at the time station (no way to route approval). If a time edit is needed to correct time clocked, the sub must notify the payroll manager in writing.
 - c. Subs **SHOULD NOT be manually entered** on leave records unless directed by the Business Office, the sub approval process does this.
 - d. We recommend completing the sub approval process daily to ease payroll processing time.
 - e. It is imperative that this process is followed. We do not know when subs are subbing or for whom unless you tell us, so you have to be sure the subs you use are appropriately entered in the system **BEFORE** WE GET YOUR PAYROLL.
 - f. During the sub approval process make sure you are changing the "Pay Sub for ____ Days" number as needed:
 - i. **Substitute Teachers** are paid DAILY — 1.00 full day or 0.50 a day depending upon the hours worked that day and what the supervisor approves. (e.g. Sub clocks 5.25 hours, enter 1.00)
 - ii. **Substitute Nurses** are paid HOURLY — depending upon the hours worked that day. (e.g. Sub clocks 5.25 hours, enter 5.25)
 - iii. Subs can't be paid for more than 1.00 day or 24.00 hours of subbing on any given day. THIS SHOULD BE DONE BEFORE YOU APPROVE THE SUB'S TIME RECORD.
 - g. Treat the approval process just as if you were entering these subs on the leave records manually; this is to keep you from having to process subs manually on the leave records. Check and double check the following **BEFORE YOU APPROVE** the sub's time record:
 - i. Amount of time in "Pay Sub for ____ Days" box: 1.00/0.50 day or hours worked
 - ii. Leave Record shown is for the correct job and date
 - iii. "Sub for" field is for the correct teacher
2. If the full time employee is in the district participating in a school district related activity (e.g. professional leave at central office), see the guidelines below:
 - a. Subs clock as normal
 - b. The restriction requiring a leave record prior to approval is removed
 - c. When payroll manager goes to approve the time record, the system verifies the presence of a leave record:

- i. If a leave record is entered already, the system will activate the “Approve” button and add sub to record as normal.



- d. If a leave record is not entered already, the system will activate the “Approve Professional” button:

- i. Click this button if – the employee was participating in a school district related activity & was able to clock in and out at a time station & needed a sub
- ii. A leave form is required, so DO NOT click this button if –
 1. the employee was NOT participating in a school district related activity & needed a sub, OR
 2. the employee was NOT able to clock in and out at a time station & needed a sub, OR
 3. the employee is absent for professional purposes for which the Personnel Handbook specifies a Travel Approval & Requisition Form is required



iii.

Vacant Positions

If an employee has left and a replacement has not been hired, these are the steps to pay the substitute. These steps will also be used for the “odd” times a substitute is required and cannot be tied to a specific employee/position. Vacant Position is listed for each school in Integrity School Connect and should be accessible when entering a leave entry.

See portion of Integrity Manual on the pages inserted at the end of the Manual. You are basically entering a leave record. The employee will still clock and choose the vacant position (i.e. CES, Teacher) in the sub for box.

- Use the initials of your school to search for this position. **Example:** CES, Teacher. **(TAB AFTER EACH SELECTION/ENTRY UNTIL READY TO ADD/SAVE.) TAB**
- Using the arrows on your keyboard, hit the down arrow until the correct job is selected (should only be one). **TAB**
- Type “No” to say no to “Sub Used” (sub will be added through substitute approval process) **TAB**
- Enter the date the sub worked in “Date” box. **TAB**
- Excused = No **TAB**
- **Reason = Vacant Position TAB**
- Status = Unvalidated
- Memo —This is where you will list where the sub worked. **Example:** Name of former teacher and grade taught (E Smith/3rd grade)**TAB — TAB — TAB — TAB (4 times)**
- Leave Reported — Enter conversion hours as Personal (should = Day/HRS approved to pay sub on Sub Approval Screen – 0.50/1.00 day) **TAB**
- Click **Add** button if a *new* record or the **Save** button if *modifying* a leave record

Add



Save



This position will show on your leave verification reports sent to payroll each month. **Check to ensure Days/hrs and substitute name are correct.**

NOTE: *If the substitute does not know/remember for whom he or she is subbing, he or she will select the vacant position as the Teacher he or she is subbing for. **PLEASE DO NOT HAVE THEM LEAVE IT BLANK;** it will not show up in your approval list if they do not select a name.*

Remember: Each location should have a process in place to ensure all substitutes are clocking in and out and selecting the correct teacher for whom they are subbing. All substitutes are added to the appropriate leave records through the Substitute Approval Process (see page 11).

LEAVE — REPORTING AND PROCESSING INTO INTEGRITY

SICK, PERSONAL, JURY DUTY, AND MILITARY LEAVE IS REQUESTED BY THE EMPLOYEE AT THE TIME TRUST STATION. For more detailed instructions, see page 15 for Professional Leave, page 16 for FML, and page 21 for a list of all leave types. (Also, see the current leave policy.)

The Time Trust Station shows the employee's amount of Sick and Personal leave available as they are requesting leave — the amount is **REAL TIME** (includes any requests already submitted) and is in **HOURS** not days.

Please ensure that the amount of time absent on the form(s)/request(s) is the correct time absent on that employee's time sheet.

- Time on form/request must be shown by employee in hours and minutes **if** less than 8 hours.
- Time entered into Integrity is the converted day amount from the conversion chart (page 25 of this manual). (Payroll managers must convert hours and minutes - if less than 8 hours – on the form itself before entry into Integrity. Leave Requests entered at time station are converted by the system.)
- Leave must be entered into Integrity and verified/ checked daily.

Substitutes for these employees will be processed daily through the Substitute Approval Process (see page 11). When payroll verifies these leave days through the column on payroll cut-off calendar "TIME SHEET/CLOCK SHOULD INCLUDE THESE DATES", the subs will be paid that payroll month.

TRAVEL APPROVAL & REQUISITION FORM

Needed **ONLY** if the employee is **OUT** of the district **AND** can't clock in and out.
IF IN DISTRICT PROFESSIONAL DEVELOPMENT - NEED EMAIL/DOCUMENTATION OF
REQUEST TO ATTEND

IN STATE – OUT OF DISTRICT PROFESSIONAL LEAVE

MUST BE SIGNED (as approval)

BY ALL REQUIRED AUTHORIZORS
(Employee, Employee's Supervisor, Business Manager, Superintendent)

BEFORE

THE LEAVE IS TAKEN & ENTERED INTO INTEGRITY

OUT OF STATE PROFESSIONAL LEAVE

MUST BE APPROVED BY THE SCHOOL BOARD

BEFORE

THE LEAVE IS TAKEN & ENTERED INTO INTEGRITY

NOTE:

Leave Dates VS Travel Dates:

- 1) **Leave Dates** are the dates in which you were absent from your normal scheduled work hours
- 2) **Travel Dates** are the actual dates you were traveling.

Purchasing Department:

- A. Supporting documents must be attached to the Travel Approval & Requisition form sent to **PRIOR** to approval.
- B. Travel dates must be correct for employee's travel reimbursement.

PAYROLL Department:

- A. Supporting documents ARE NOT NEEDED.
- B. Leave dates must be correct to verify against timesheet and employee absentee statement.

REVISIONS — must be initialed by the employee and the employee's supervisor

FMLA TRACKING

1. Employees who are out at least 4 consecutive days **may qualify for FML. Payroll Manager should notify supervisor, Personnel Director, Business Manager, and Central Office Payroll in these instances.** Supervisor should contact employee to inquire if they feel they have a serious health condition; if so, the employee should complete a FMLA packet (located at the school or in the Personnel Office). If not a serious medical condition, employee should furnish a certificate of an appropriate physician, dentist, or other medical practitioner as to the illness of the absent employee. See sick leave policy.

2. FMLA leave approval process:
 - a. **REQUESTING FMLA LEAVE** —
 - i. Employee completes FMLA packet
 - ii. After the Personnel Director receives the signed FMLA request form from employee, personnel shall furnish supervisor a copy (unless school had a prior copy). The supervisor shall make copy available to the school payroll manager to monitor leave status.
 - b. **DETERMINING ELIGIBILITY FOR FMLA LEAVE** —
 - i. Personnel Director reviews request and all attached documents
 - ii. Personnel Director sends a Notice of Eligibility and Rights & Responsibilities to payroll, the employee's supervisor, and the employee
 - iii. The employee also receives further instructions to furnish, within a specified number of days, certification to support the request for FMLA leave
 - c. **DESIGNATING LEAVE AS APPROVED FMLA LEAVE** —
 - i. Personnel Director reviews certification from employee's physician
 - ii. Personnel Director sends a Designation Notice to payroll, the employee's supervisor, and the employee
 - iii. The employee also receives a Return to Work certification form to submit to Personnel prior to or upon returning to work, whichever is sooner.

3. If the employee is APPROVED for FML, the payroll manager must, on behalf of the employee, enter all sick leave records coded as FML.

4. If the employee is not eligible for FML but is out on extended leave (> 4 days):
 - a. AND returns before payroll period ends, employee should follow normal leave request procedure.
 - b. AND **does not** return before payroll period ends:
 - i. SUBMITTED Dr. Excuse, enter leave records on behalf of employee.
 - ii. NOT SUBMITTED Dr. Excuse, notate on employee's timesheet that you are aware the employee has not turned in a Dr.'s excuse and will be docked.

5. **If employee is absent with the same FML reason past the ending date on the "Response to FMLA Leave Request" form from personnel, the payroll manager or supervisor must notify Ms. Hill in Personnel:**
 - a. Ms. Hill shall need to take action to extend FML if time is still available.
 - b. If time is not available, these absences must be coded to sick leave, not FMLA.

6. **A confidential file must be kept in a locked filing cabinet of FMLA records.**
This is information that is covered under the privacy act

NOTES:

- ✓ It is imperative that you ensure FML is entered into Integrity correctly (with FMLA as the reason code) due to the employee having to pay the employer share of health and life insurance premiums after he/she has exhausted all of his/her FML.
- ✓ You may have a person out on intermittent FML for back surgery that is absent for a cold or dental appointment, **those absences would not be FML.** Employee would not mark FML; he or she would mark the type of sick leave that applies.

DONATED LEAVE
(SEE THE CURRENT DONATED LEAVE POLICY)

Before Donated Leave can be taken by the recipient employee, the following must be furnished to the Payroll Office:

- ✓ Donor's Request to Donate Unused Accumulated Personal or Sick Leave Form
 - Completed and Signed by Donor Employee
 - Completed and Approved by Donor's Supervisor
 - Completed and Approved by Recipient's Supervisor
 - Completed and Approved by Personnel Director
- ✓ Letter of Approval or Disapproval of Recipient's Request for Donated Leave
 - Completed by Personnel Director
 - Accompanied by Catastrophic Medical Committee's votes regarding the Recipient's Request for Donated Leave; each member of the committee should sign his/her vote.
- ✓ Catastrophic Injury and Illness Licensed Physician Report — completed and signed by attending physician
- ✓ Recipient's Request for Donated Unused Accumulated Personal or Sick Leave Form — completed and signed by the Recipient

Donated Leave for the recipient employee **BEGINS**, if approved, on the 1st payroll following the Personnel Approval Date for the donor. Donated leave cannot be used for leave posted on processed payrolls prior to Personnel Approval Date.

VERONICA HILL — PERSONNEL SUPERVISOR

Handles the following regarding Donated Leave:

- ✓ Forms
- ✓ Organizes approval of Donated Leave
- ✓ Any questions pertaining to Donated Leave Approval Process

LEAVE REPORTING FOR EXEMPT AND NON-EXEMPT (WAGE AND HOUR)
STAFF

1. Leave policies must be followed by all employees DISTRICT WIDE. (See current Personnel Handbook for current Leave Policy)
2. ***Sick, Personal, Jury Duty, and Military Leave is requested by the employee at the time trust station. For more detailed instructions, see page 15 for Professional Leave, page 16 for FML, and page 21 for a list of all leave types.***
3. Applicable documents to support leave taken, must be submitted with payroll reports each month as listed on the Payroll Checklist (see page 34, 35, 37, 38 & 43). **Please ensure that you allow ample time to submit Travel Approval & Requisition forms to the superintendent for approval and to be returned to you for payroll processing — They must be submitted for approval PRIOR to the absence.**

Any employee that does not have an applicable leave form included with the payroll report shall be automatically docked for absences. Each payroll manager must verify that all applicable leave forms are included with the report.

- a. Principal/supervisor must ensure that employees are aware that they must submit leave requests/forms before an absence occurs — in unforeseen circumstances, they should be submitted immediately or the day they return to work.
 - b. If you have an employee out on sick leave that has not returned before the cut-off date AND:
 - i. Dr. Excuse was SUBMITTED; enter leave records on behalf of employee.
 - ii. Dr. Excuse was NOT SUBMITTED, notate on employee's timesheet that you are aware the employee has not turned in a Dr.'s excuse and will be docked.
 - c. **Employees must be informed that no corrections for leave will be made until the next payday. We will not change reason codes or types of leave after payroll is processed.**
4. All absences must be reported in Integrity for all employees. The principal/supervisor must submit in writing to the payroll office with payroll report any unapproved leave that should be unexcused/unpaid and state the reason, date(s), and time missed each day. **These absences should be entered into Integrity.** Payroll will dock using the written documentation. Examples:
- a. If an employee refuses to request leave as needed by his/her principal/supervisor/administrator, his/her absence will be considered unexcused and his/her pay shall be docked.
 - b. If principal **denies leave in accordance with policy** for leave taken during the first week of the school term, the last week of the school term, or the day before or after a holiday, unless it is a verified illness with documented doctor's excuse **and the employee is absent from work** (see current Leave Policy for all

instances of approved/unapproved leave), **follow the guidelines below to notify payroll:**

i. Wage & Hour employees:

1. Document hours absent on the Wage and Hour report
2. Include explanation in the Reason/Comment column to explain (i.e. no dr. excuse provided on day before/after holiday)(employee to Initial on time sheet to acknowledge the dock)

ii. Certified employees:

1. Include written documentation with principal/supervisor/ administrator signature (employee to Initial on time sheet to acknowledge the dock)
2. Place a copy **on top of** your payroll directly behind the checklist

iii. Note: **The leave request must be approved to become a leave record**

and written documentation (as stated above) is still required for Payroll to process these docks.

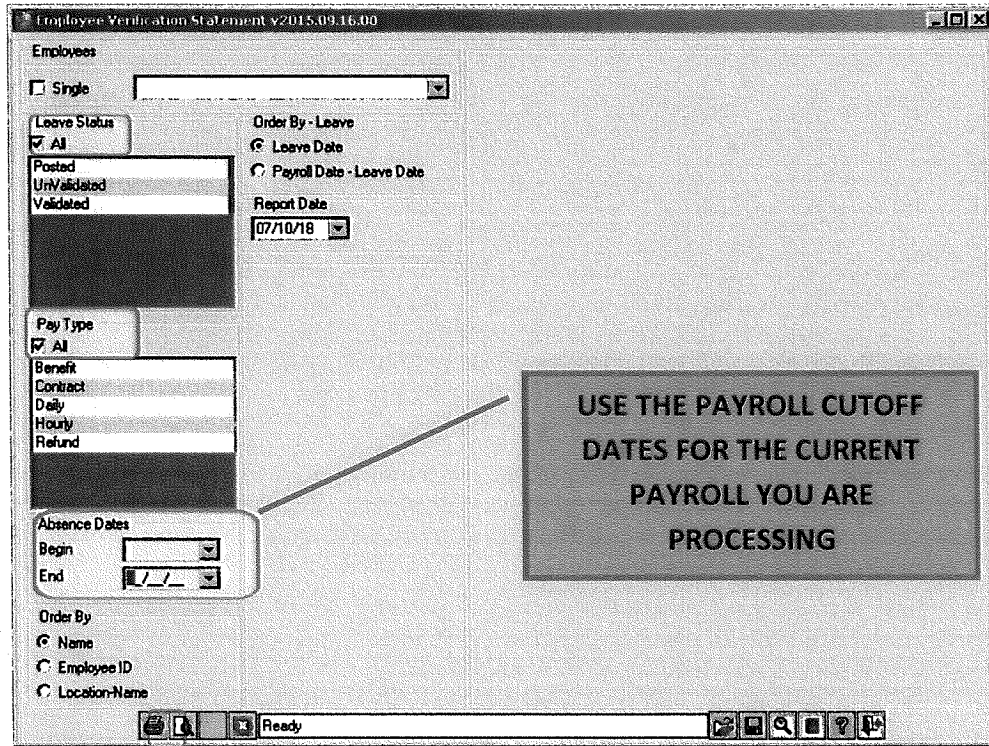
5. **We will not change the leave type** on forms/requested through TimeTrust. Once it is signed/requested by the employee and furnished/routed to the supervisor, the leave type is set and remains. **Each payroll manager must ensure that all leave shown in Integrity matches an employee's forms/requests before he/she sends the payroll report to Central Office. This is done by checking the Employee Absentee Statement for each employee (next page).**

Individual Employee Absentee Statement

Schools shall run individual employee leave statements at the end of each month and furnish reports to employees with his/her direct deposit statement for review.

Click Payroll / Reports / Leave / **Employee Verification Statement**

Setup options for Report-



Click the Preview Button at the bottom of the screen to generate the report.

The report that generates -

Job	Abs Date	Sick	Pera	Vac	Prof	Jury	Ill	Reason
1	02/17/14	0.00	0.00	0.00	1.00	0.00	0.00	PROFESSIONAL
1	02/18/14	0.00	0.00	0.00	1.00	0.00	0.00	PROFESSIONAL

A separate page prints for each employee that has leave in the current payroll period; a line is at the bottom for the employee and supervisor to sign. These can be used as a checkpoint to ensure leave is requested and entered correctly.

PAYROLL

Employees need to be informed to check with the payroll manager on any leave questions before calling Payroll. School records shall be real time – payroll records are one month behind.

ABSENCE REASON CODES

TYPE OF LEAVE REQUESTED	APPLICABLE REASON CODE OPTION:
-------------------------	--------------------------------

SICK LEAVE*	DEATH/FUNERAL	DEATH
	DESTRUCTION OF PERS HOME	PRSHM
	FAMILY MEDICAL LEAVE	FMLA
	ILLNESS OF IMMEDIATE FAMILY	ILLN
	SICK-(PERSONAL ILLNESS)	SICK

PERSONAL LEAVE	PERSONAL REASONS	PER
-----------------------	------------------	-----

JURY DUTY*	JURY DUTY	JURY
-------------------	-----------	------

MILITARY LEAVE*	MILITARY LEAVE	MIL
------------------------	----------------	-----

OTHER*	PROFESSIONAL	PRO
	SUSPENDED W/O PAY	SUSP
	UNEXCUSED NO PAY	UNEX
	VACANT POSITION	VP
	WORK COMP ABSENCES	WC
	SUSPENDED W/ PAY	SUSPW

** (entry and limitations as specified on chart on pages 22-24 and in current personnel leave policy)*

FML IS APPROVED THROUGH PERSONNEL; THE PAYROLL MANAGER MUST BE CAREFUL TO ENTER APPROPRIATELY IN INTEGRITY.

An employee on Intermittent FML could be out due to other sicknesses, such as Dentist appointments, illness of immediate family, or stomach virus; in one of these cases, the other reason codes would be selected.

NOTE: Family Medical Leave (FML) can only be used and classified (when entering leave into Integrity) as FML for the number of days listed in the “**Maximum Length of Leave**” section of the Response to FMLA Leave Request form from Personnel. These days should fall within the period of time that is listed in the “**Type of Leave & Expected Leave Dates**” section of the Response to FMLA Leave Request form from Personnel. See “Notes” below in the table under “Sick Leave — FMLA” for employees

still absent beyond dates approved on the Response to FMLA Leave Request form from Personnel.

PROCEDURES FOR ENTRY OF LEAVE

(SEE COPIES OF ANY NECESSARY FORMS IN THE FORMS SECTIONS OF THE MANUAL)

<u>TYPE OF LEAVE</u> (Leave type charged)	<u>NOTES</u> (additional information)	<u>EXCUSED</u> (yes/no)	<u>REASON</u> (Specific to type)	<u>MEMO</u>	<u>LEAVE REPORTED</u> Enter conversion amount from leave conversion chart
SICK — FMLA	Must have approved FMLA form from Personnel. Attach approved FMLA form to time sheet when sending to Central Office Payroll with monthly Payroll Reports. If you have leave for an employee on FML and the dates approved on the FMLA form from personnel do not cover the absences, contact Veronica Hill in Personnel.	No	Family Medical Leave	If it is for Worker's Comp, note that here.	Sick Time Absent
	If you have leave for an employee on FML and he or she has exceeded the Maximum Length of Leave on the approved FMLA form from Personnel, the reason code should be "SICK" not Family Medical Leave		SICK		
SICK — PERS ILL	NONE	No	SICK- (PERSONAL ILLNESS)	NONE	Sick Time Absent
SICK — ILL IMMED FAM	NONE	No	ILLNESS OF IMMED FAMILY	NONE	Sick Time Absent
SICK — DEATH/FUNERAL RELATIVE	Per the Leave Policy, only 3 DAYS of sick leave can be charged for death/funeral relative	No	DEATH/FUNERAL	NONE	Sick Time Absent
PERSONAL LEAVE — DEATH/FUNERAL RELATIVE	Per the Leave Policy, the 4TH DAY & AFTER of leave for death/funeral relative can be charged to personal leave	No	PERSONAL	NONE Required	Personal Time Absent

PAYROLL

SICK — DEST OF PERS HM <i>FIRST 3 DAYS</i>	Use if employee's home is destroyed & leave is taken for this reason: Fire, Weather, etc.	No	DESTRUCTION OF PERS HOME	NONE	Sick Time Absent
--	---	----	-----------------------------	------	----------------------------

LEAVE CONTINUED TO NEXT PAGE...

<u>TYPE OF LEAVE</u>	<u>NOTES</u>	<u>EXCUSED</u>	<u>REASON</u>	<u>MEMO</u>	<u>LEAVE REPORTED</u>
(Leave type charged)	(additional information)	(yes/no)	(Specific to type)		Enter conversion amount from leave conversion chart
PERSONAL — DEST OF PERS HM <i>4TH DAY & AFTER</i>	Use if employee's home is destroyed & leave is taken for this reason: Fire, Weather, etc.	No	PERSONAL	NONE	Personal Time Absent
SICK — WORK'S COMP (WC)	Employees have the OPTION to use accumulated leave for this type of absence. A form electing to use/not use leave must be attached to the payroll reports.	No	WORK COMP ABSENCES	NONE (See note above for FML & WC absences)	Sick/Personal Time Absent
PERSONAL	NONE	No	PERSONAL REASONS	NONE	Personal Time Absent
JURY DUTY	<p>Must have a copy of the employee's subpoena for witness (district related business only) and/or summons for jury duty with monthly payroll reports when sending to Central Office Payroll. An employee is paid his/her regular salary in addition to the check from the court.</p> <p>The time is not counted against the employee.</p>	No	JURY DUTY	NONE	Jury Duty Time Absent
MILITARY	<p>Must have a copy of the employee's MILITARY ORDERS with monthly payroll reports when sending to Central Office Payroll.</p> <p><u>Any military leave taken on the 16th day and after will automatically roll to Personal Leave.</u></p>	No	MILITARY LEAVE	NONE	Military Time Absent
PROFESSIONAL LEAVE	Pay attention to (1) Leave Dates and (2) Travel Dates (see page 15 for more information)	No	PROFESSIONAL	meeting name or location	Professional Time Absent

PAYROLL

LEAVE CONTINUED TO NEXT PAGE...

<u>TYPE OF LEAVE</u> <small>(Leave type charged)</small>	<u>NOTES</u> <small>(additional information)</small>	<u>EXCUSED</u> <small>(yes/no)</small>	<u>REASON</u> <small>(Specific to type)</small>	<u>MEMO</u>	<u>LEAVE REPORTED</u> <small>Enter conversion amount from leave conversion chart</small>
<p>SUSPENDED WITH PAY</p> <p><u>RECEIVES PAY</u></p>	<p>Superintendent's decision documented on a Notice of Administrative Leave form (A completed form should be obtained from the Superintendent's office and signed by the Superintendent.</p> <p>Must have a copy of the above form attached with monthly payroll reports when sending to Central Office Payroll. Place these on top of your Wage & Hour report to ensure Payroll processes them accurately.</p>	<p>Yes</p>	<p>SUSPENDED W/ PAY</p>	<p>NONE</p>	<p>Personal Time Absent</p>
<p>SUSPENDED WITHOUT PAY</p> <p><u>DOES NOT RECEIVE PAY</u></p>	<p>Superintendent's decision documented on a Notice of Administrative Leave form (A completed form should be obtained from the Superintendent's office and signed by the Superintendent.</p> <p>Must have a copy of the above form attached with monthly payroll reports when sending to Central Office Payroll. Place these on top of your Wage & Hour report to ensure Payroll processes them accurately.</p> <p>Note: Only the Superintendent can suspend employees.</p>	<p>No</p>	<p>SUSPENDED W/O PAY</p>	<p>NONE</p>	<p>Personal Time Absent</p>

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LEAVE CONVERSION CHART CONVERTING TIME WORKED INTO DAYS FOR ENTRY INTO INTEGRITY

Return to Index

TIME OUT	TOTAL MINUTES	8 HR EMPLOYEE CONVERSION	7 HR EMPLOYEE	6.88 HOUR EMPLOYEE (an 86%)	6.5 HOUR EMPLOYEE	6.00 HOUR EMPLOYEE (an 75%)	4 HOUR EMPLOYEE	2 HOUR EMPLOYEE
15 minutes	15	0.03	0.04	0.04	0.04	0.04	0.06	0.13
30 minutes	30	0.06	0.07	0.07	0.08	0.08	0.13	0.25
45 minutes	45	0.09	0.11	0.11	0.12	0.13	0.19	0.38
1 hour	60	0.13	0.14	0.15	0.15	0.17	0.25	0.50
1 hour 15 min	75	0.16	0.18	0.18	0.19	0.21	0.31	0.63
1 hour 30 min	90	0.19	0.21	0.22	0.23	0.25	0.38	0.75
1 hour 45 min	105	0.22	0.25	0.25	0.27	0.29	0.44	0.88
2 hours	120	0.25	0.29	0.29	0.31	0.33	0.50	1.00
2 hour 15 min	135	0.28	0.32	0.33	0.35	0.38	0.56	
2 hour 30 min	150	0.31	0.36	0.36	0.38	0.42	0.63	
2 hour 45 min	165	0.34	0.39	0.40	0.42	0.46	0.69	
3 hours	180	0.38	0.43	0.44	0.46	0.50	0.75	
3 hour 15 min	195	0.41	0.46	0.47	0.50	0.54	0.81	
3 hour 30 min	210	0.44	0.50	0.51	0.54	0.58	0.88	
3 hour 45 min	225	0.47	0.54	0.54	0.58	0.63	0.94	
4 hours	240	0.50	0.57	0.58	0.62	0.67	1.00	
4 hour 15 min	255	0.53	0.61	0.62	0.65	0.71		
4 hour 30 min	270	0.56	0.64	0.65	0.69	0.75		
4 hour 45 min	285	0.59	0.68	0.69	0.73	0.79		
5 hours	300	0.63	0.71	0.73	0.77	0.83		
5 hour 15 min	315	0.66	0.75	0.76	0.81	0.88		
5 hour 30 min	330	0.69	0.79	0.80	0.85	0.92		
5 hour 45 min	345	0.72	0.82	0.84	0.88	0.96		
6 hours	360	0.75	0.86	0.87	0.92	1.00		
6 hour 15 min	375	0.78	0.89	0.91	0.96			
6 hour 30 min	390	0.81	0.93	0.94	1.00			
6 hour 45 min	405	0.84	0.96	0.98				
6 hour 53 min	413	0.86	0.98	1.00				
7 hours	420	0.88	1.00					
7 hour 15 min	435	0.91						
7 hour 30 min	450	0.94						
7 hour 45 min	465	0.97						
8 hours	480	1.00						

Modified 03/26/14

PAYROLL

LOWNDES COUNTY SCHOOL DISTRICT

SCHOOL LOCATION

LOCATIONS: A11
 STATUS : A
 PAY FREQ : A11
 PAY TYPE : A11
 LVE STAT : A11

LEAVE VERIFICATION - Reported

EMP ID	NAME	JOB POSITION	SICK	VAC	PERS	PROFF	JURY	Mi1	FPers
1	TEACHER		-5.72	0.00	0.00	93.50	99.00	99.00	0.00

ABS DATE	EX REASON	DAYS	SICK	VAC	PERS	PROFF	JURY	Mi1	FPers
08/20/12	N PERSONAL REASONS	0.00	0.00	0.00	0.25	0.00	0.00	0.00	0.00
08/22/12	N PERSONAL REASONS	0.00	0.00	0.00	0.25	0.00	0.00	0.00	0.00
09/11/12	N PERSONAL REASONS	0.50	0.00	0.00	0.50	0.00	0.00	0.00	0.00
09/12/12	N PERSONAL REASONS	1.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00
10/04/12	N PROFESSIONAL	1.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00
10/05/12	N PROFESSIONAL	1.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00
10/10/12	N DEATH/FUNERAL	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00
10/11/12	N SICK-(PERSONAL ILLNESS)	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00
10/15/12	N SICK-(PERSONAL ILLNESS)	0.00	0.22	0.00	0.00	0.00	0.00	0.00	0.00
10/26/12	N SICK-(PERSONAL ILLNESS)	0.00	0.50	0.00	0.00	0.00	0.00	0.00	0.00
10/31/12	N PROFESSIONAL	1.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00
12/13/12	N PROFESSIONAL	0.50	0.00	0.00	0.50	0.00	0.00	0.00	0.00
12/18/12	N SICK-(PERSONAL ILLNESS)	0.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00
01/02/13	N SICK-(PERSONAL ILLNESS)	0.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00
01/04/13	N SICK-(PERSONAL ILLNESS)	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00
01/08/13	N SICK-(PERSONAL ILLNESS)	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00
01/09/13	N SICK-(PERSONAL ILLNESS)	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00
01/10/13	N SICK-(PERSONAL ILLNESS)	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00
01/11/13	N SICK-(PERSONAL ILLNESS)	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00
01/14/13	N SICK-(PERSONAL ILLNESS)	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00
01/15/13	N SICK-(PERSONAL ILLNESS)	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00
02/07/13	N PROFESSIONAL	1.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00
02/15/13	N PROFESSIONAL	1.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00
02/20/13	Y SICK-(PERSONAL ILLNESS)	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00
03/07/13	Y SICK-(PERSONAL ILLNESS)	0.50	0.50	0.00	0.00	0.00	0.00	0.00	0.00
03/25/13	N SICK-(PERSONAL ILLNESS)	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00
03/26/13	N SICK-(PERSONAL ILLNESS)	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00
04/29/13	N SICK-(PERSONAL ILLNESS)	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00

PERIOD TOTAL	14.72	0.00	2.00	5.50	0.00	0.00	0.00	0.00	0.00
ENDING	20.44	0.00	2.00	88.00	99.00	99.00	99.00	99.00	0.00

** DEFICIT **

EMP COUNT : 1

TOTAL	:	
SICK	:	14.72
PERSONAL	:	2.00
VACATION	:	0.00
PROFF	:	5.50
JURY	:	0.00
Mi1	:	0.00
FPers	:	0.00
SUB DAYS	:	20.50

NOTE: THE LEAVE REPORTS INCLUDED IN THE MONTHLY PAYROLL TO CENTRAL OFFICE SHOULD LOOK LIKE THIS REPORT - THE EMPLOYEE NAME AND ID HAS BEEN REMOVED FOR PRIVACY.

EXAMPLE

PROCEDURES TO PREPARE REPORTS TO PAYROLL/CENTRAL OFFICE

Do not alter or change any payroll forms.

DO NOT STAPLE TIME SHEETS, LEAVE FORMS, OR REPORTS TO BE SENT TO PAYROLL OFFICE. USE CLIPS FOR EACH REPORT.

1. Separate time sheets/applicable leave forms by **certified** and **non-certified**.
2. Check applicable leave forms:
 - a. For signatures —
 - i. **All** should have **EMPLOYEE and SUPERVISOR** signature.
 - ii. Professional leave should have the Business Manager's and the Superintendent's signature. **Superintendent's signature is his approval.** If travel approval & requisition form is **not** approved, form would have been sent back to school/department stamped "**not approved**".
 - iii. **EXCEPTION:** Employee is out on leave and not available to sign. In this case, notate "Not available to sign" or a reason for no signature. **DO NOT LEAVE BLANK**; the form will be returned.
 - b. For attachments —
 - i. FML — Approved FML form from Personnel
 - ii. Jury Duty — Court Summons/Letter listing each date present
 - iii. Military Leave — Orders
 - iv. **These should be directly behind the corresponding Employee Absentee Statement**
 - c. For correct selection of leave type:
 - i. Only **one** type of leave **must** be marked clearly per form/request.
 - ii. Different types of leave **must** be on separate forms/requested separately.
 - d. For correct dates — amount of leave time and conversion amount (on form and in Integrity/TimeTrust):
 - i. If a Travel Approval & Requisition form is needed:
 1. Schools **must** enter hours under the leave dates.
 2. Each absence **has** to be listed on a separate form **unless the absence is for consecutive days with same time each day and only for the current cut-off period.**
 - ii. Leave requested at the station (**REQUIRED**):
 1. The system converts the amount of time requested.
 2. Each day must be requested separately.
 3. Leave request should match the employee's time sheet.
 4. To **REVISE** a leave request in Time Trust (requested 1.5 hours for Dr. appt & only needed 1 hour):
 - a. Employee must discuss change with his/her supervisor/payroll manager & requesting approval (written approval is recommended).

- b. Please ensure any written request is detailed enough so the Payroll manager can accurately revise the leave record:
 - i. Employee name
 - ii. Date(s) – original and revised
 - iii. Times – original and revised
 - iv. Any other info - wrong reason code selected, etc.
- 3. **Check time sheets against Employee Absentee Statements for All Personnel:**
 - a. Ensure all timesheets are signed by EMPLOYEE and SUPERVISOR. **EXCEPTION:** Employee is out on leave and not available to sign. In this case, notate “Not available to sign” or a reason for no signature. **DO NOT LEAVE BLANK**; the time sheet will be returned.
 - b. Must be in alpha order with Employee Absentee Statement and all applicable documentation for each individual employee behind his/her timesheet
 - c. Timesheets must be checked to the Time – Time Trust Summary Report from Integrity to ensure that there is a timesheet for all personnel. (**Run ACTIVE employees only!!!**)
 - d. Ensure the amount of time on the Employee Absentee Statement is the correct time absent on the employee’s time sheet.
 - e. Each Scheduled work day should show TIME worked or LEAVE.
 - f. **NON-CERTIFIED ONLY (f-i):** If the employee works **over** his/her regular work hours in a workweek **and physically** works more than 40 hours for the same week, time over 40 hours must be entered on the Wage & Hour report under **overtime**. **FLSA states that any person who physically works over 40 hours in a pay period (our workweek) must be paid overtime for the hours over 40.**
 - g. If an employee works **over** his/her regular work hours in a work week **but does not physically** work 40 hours for the same work week, time must be entered on the Wage & Hour report under **straight time**. (Be sure to use conversion on Wage & Hour report.)
 - h. Ensure totals on the Wage & Hour report are accurate and all inclusive.
 - i. **The Wage & Hour Report must be in alphabetical order and a blank line between employees to separate one employee from the next.**
 - j. For examples of calculating straight time and overtime and completing the Wage & Hour Report, see example time calculations and a Wage & Hour Report after this section.
- 4. Enter FML & Professional leave and any substitute time records (rarely) into Integrity:
 - a. If you do not see a time record for a sub you know was at your location, verify with that sub that he/she clocked in/out **BEFORE** entering a time record for him/her.

- i. If the sub failed to select the teacher they subbed for, the system did not recognize the sub as having clocked in; **INFORM** your subs of this & ensure they are selecting the correct teacher (including the Vacant Position Teacher, e.g. CES, Teacher).
- ii. If the sub selected the incorrect teacher in the drop down box, it could cause you not to be able to see the record, even if they clocked at your location. The subs should only be able to see a list of teachers at your location; notify payroll if this is not the case.
- iii. If a sub is certain he/she clocked and you can't see the time record, run a scan results report to see if he/she attempted to clock.
 1. If he/she attempted to clock, but you still can't see the time record, call or email us.
 2. We will need the sub name, teacher name, and date.
 3. We will look up the information to see if the sub clocked but the information is incorrect.
 4. **We will correct, so you can appropriately approve your subs through the system.**
- iv. **Do not assume** a sub failed to clock just because you do not see a time record is in the system for that sub. Make sure you have a process in place to verify who subbed for whom on which days, so you can approve sub time records through the sub approval process.
- v. Subs **SHOULD NOT** be manually entered on leave records unless directed by the Business Office:
 1. the sub approval process does this (see page 11)
 2. **NOTE:** If a manual time record is entered for a substitute, the substitute will have to be **MANUALLY** added to the leave record as well.
- b. Run leave verification report:
 - i. With the following setting —
 1. With current payroll period cut-off dates (see calendar)
 2. "Unvalidated"(In the event an employee is out of leave or on FMLA, you may need to run the report "all" to check those days that have been posted past the cut-off calendar date. **Be sure to send to Central Office Payroll "unvalidated"**)
 3. In **alpha** order
 - c. **Check substitute time sheets against leave verification report to be sure they match.**
 - d. If errors, correct, run another leave verification report, with no markings, to send to payroll office. **Do not** make corrections and insert corrected sheet into old report. **You must run a complete new report.**

PAYROLL

- e. **ONCE REPORTS ARE SENT TO THE PAYROLL OFFICE, DO NOT MAKE ANY ADDITIONS OR CORRECTIONS WITHOUT FIRST CLEARING WITH PAYROLL.**
5. Place time sheets in **alpha order with Employee Absentee Statement and applicable forms directly behind each timesheet** **in date order** to send to payroll office.
 6. **Send all reports to payroll office per checklist — you should have two sets, Certified & Non-Certified**
 7. **IMPORTANT!!** If an employee's work schedule — including days worked in summer — will be modified, Payroll needs the WORK DAYS CHANGES form filled out and turned in with the Payroll packet in the Pay period it applies to. This should match what is submitted and recorded on the Work Days Verification spread sheet, which is also submitted with the affected pay period.

WAGE AND HOUR REGULATIONS

1. Pay all covered nonexempt employees for all hours worked in a workweek.
2. Pay straight time, an employee's regular rate of pay, for any time actually worked over their regular work schedule in a week if total physical hours worked is less than 40 hours.

Example:

<u>Weekday</u>	<u>Hours Physically Worked</u>
Monday	Holiday (0.00)
Tuesday	8.00
Wednesday	8.00
Thursday	9.00
Friday	8.00
<u>TOTAL</u>	<u>33 .00*</u>

***Employee would receive one (1) hour straight time.**

3. Pay one and one-half times the employees' regular rate of pay for all hours physically worked over 40 in the workweek.
 - Overtime after 40 hours in a week = 1 ½ times an employees' regular rate of pay.
 - Dual positions — in LCSD, dual, non-exempt positions are paid a blended rate of overtime; this rate is calculated and can vary each month.

WORK DAYS CHANGES

EMPLOYEE NAME _____

EMPLOYEE POSITION: _____

EMPLOYEE START DATE: _____

EMPLOYEE # OF DAYS TO WORK: _____

DAY IN PAY PERIOD NOT WORKED

DAY TO BE WORKED IN PLACE OF DAY NOT WORKED

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

EMPLOYEE SIGNATURE

DATE

PRINCIPAL SIGNATURE

DATE

SUPERINTENDENT SIGNATURE

DATE

- 40 hours are hours actually worked includes professional leave (not any other leave or holiday pay.)

Example:

<u>Weekday</u>	<u>Hours Physically Worked</u>
Monday	8.00
Tuesday	8.00
Wednesday	8.00
Thursday	9.00
Friday	8.00
<u>TOTAL</u>	<u>41.00*</u>

***Employee would receive one (1) hour over time**

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PAYROLL

Administrative Manual Update 07-10-18 @ Central Office

Examples - Calculation of Time on Wage & Hour Report

	Monday	Tuesday	Wednesday	Thursday	Friday	TOTAL	ST	OT	DT
ANCESTOR, FRED W/E 04/07/13									
Physical Hours Worked	9.00	7.50	6.00	8.00	8.00	38.50			
Leave Taken		0.50	2.00			2.50			
Total Hours	9.00	8.00	8.00	8.00	8.00	41.00	1.00	0.00	0.00
BAKER, BENJAMIN W/E 04/14/13									
Physical Hours Worked	7.50	7.00	8.00	7.75	8.00	38.25			
Leave Taken	0.50	1.00				1.50			
Total Hours	8.00	8.00	8.00	7.75	8.00	39.75	0.00	0.00	0.25
DENVER, JOE W/E 04/14/13									
Physical Hours Worked	7.50	7.00	8.00	8.00	8.00	38.50			
Leave Taken	0.50	1.00				1.50			
Total Hours	8.00	8.00	8.00	8.00	8.00	40.00	0.00	0.00	0.00
GERMANY, GERIATRIC W/E 04/14/13									
Physical Hours Worked	9.00	9.00	9.00	7.00	9.00	43.00			
Leave Taken				1.00		1.00			
Total Hours	9.00	9.00	9.00	8.00	9.00	44.00	1.00	3.00	0.00
MERCURY, MILES W/E 03/24/13									
Physical Hours Worked	6.25	0.00	9.00	7.00	8.00	30.25			
Leave Taken	1.50	8.00		1.00		10.50			
Total Hours	7.75	8.00	9.00	8.00	8.00	40.75	0.75	0.00	0.00

*Note: Examples assume employees' normal working hours are 40 hours per week. See example Wage & Hour report to show how to report on the Wage & Hour form.

	Monday	Tuesday	Wednesday	Thursday	Friday	TOTAL	ST	OT	DT
SMITH, SALLY W/E 03/24/13									
CHILD NUTRITION - 32.5 HOURS PER WEEK									
Physical Hours Worked	6.25	0.00	6.50	5.50	7.00	25.25			
Leave Taken	0.25	6.50		1.00		7.75			
Total Hours	6.50	6.50	6.50	6.50	7.00	33.00	0.50	0.00	0.00

*Note: See example Wage & Hour report to show how to report on the Wage & Hour form.

LEGEND: ST STRAIGHT TIME

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LOWNDES COUNTY SCHOOL DISTRICT

Revised July 2021

P. ROLL

LOWNDES COUNTY SCHOOL DISTRICT
"WAGE AND HOUR" MONTHLY REPORT TO PAYROLL
 PAYROLL PERIOD BEGINNING 3/19/2018 THROUGH 4/15/2018
 SCHOOL NAME OR DEPARTMENT CERTIFIED ELEMENTARY SCHOOL

				BLANK COLUMNS ARE FOR CENTRAL OFFICE PAYROLL ONLY			
LAST NAME	FIRST NAME	BADGE NUMBER	WEEK ENDING	STRAIGHT TIME HOURS	OVERTIME HOURS	DOCK TIME HOURS	REASON OR COMMENT
Anc estor	Fred	156	3/25/2018	0.50	2.00		assisting supervisor
Anc estor	Fred	156	4/1/2018	7.50			finalize project
Anc estor	Fred	156	4/8/2018	1.00			assisted in after school meeting
Anc estor	Fred	156	4/15/2018		7.25		
Baker	Benjamin	2229	3/25/2018	1.00	0.25		
Baker	Benjamin	2229	4/1/2018			2.00	no leave form
Baker	Benjamin	2229	4/8/2018			0.25	clocked out early
Baker	Benjamin	2229	4/15/2018	0.25			clocked out late
Denver	Joe	1116	3/25/2018	5.50			assisted supervisor
Germany	Geriatric	2256	4/8/2018	1.00	3.00		see principal letter attached to TS
Germany	Geriatric	2256	4/15/2018	0.25	5.00		
Mercury	Miles	2005	3/25/2018	0.75			
Mercury	Miles	2005	4/8/2018	0.25	0.50		
Twister	Bob	4862	3/25/2018			0.50	no leave form
Twister	Bob	4862	4/8/2018	0.25			clocked out late
Twister	Bob	4862	4/15/2018	0.25			clocked out late
Zakby	Aimee	9892	4/15/2018	18.50	18.00	8.00	no leave form
TOTAL HOURS FOR THE MONTH (LAST PAGE ONLY):						10.75	scale for reporting time
							15 min = 0.25
							30 min = 0.50
							45 min = 0.75

SIGNATURE OF PERSON PREPARING REPORT: _____ DATE: _____

SIGNATURE OF PRINCIPAL/ADMINISTRATOR/SUPERVISOR: _____ DATE: _____

NOTE: STRAIGHT TIME IS PAID ON HOURS WORKED OVER REGULAR ESTABLISHED WORKWEEK HOURS BUT 40 HOURS OR LESS (THIS IS A STATE LAW).
 OVERTIME IS PAID ON ACTUAL PHYSICAL HOURS WORKED OVER 40 HOURS (NOT HOLIDAY, SICK PERSONAL OR VACATION LEAVE).

Completed form must be in alphabetical order and a blank line between employees when sending to Central Office Payroll.

REVISED 07/06/2018

CERTIFIED EMPLOYEES PAYROLL CHECKLIST
(REQUIRED)

SCHOOL/DEPT:

SEND REPORTS IN THE FOLLOWING ORDER

- 1 | **PRINCIPAL/SUPERVISOR/ADMIN. TIME SHEET** _____
- 2 | **EMPLOYEE ABSENTEE STATEMENT —**
IN DATE ORDER BEHIND RESPECTIVE TIME SHEET IN #1 ABOVE _____
- 3 | **APPLICABLE LEAVE DOCUMENTATION (PROFESSIONAL LEAVE
FORM, WC ELECTION, DR EXCUSES, OBITUARY, ETC.) —**
IN DATE ORDER BEHIND RESPECTIVE EMPLOYEE ABSENTEE STATEMENT _____
- 4 | **OTHER CERTIFIED TIME SHEETS (includes Asst. Principal, if app) —**
IN ALPHA ORDER _____
- 5 | **EMPLOYEE ABSENTEE STATEMENTS —**
IN DATE ORDER BEHIND RESPECTIVE TIME SHEET IN #4 ABOVE _____
- 6 | **APPLICABLE LEAVE DOCUMENTATION (PROFESSIONAL LEAVE
FORM, WC ELECTION, DR EXCUSES, OBITUARY, ETC.) —**
IN DATE ORDER BEHIND RESPECTIVE EMPLOYEE ABSENTEE STATEMENT _____
- 9 | **MAKE SURE THIS CHECKLIST IS COMPLETE**
(SCHOOL/DEPT NAME IS LISTED ABOVE & EACH ITEM IS "√" OR INITIALED) _____

Leave records for vacant positions are entered at the school by using the teacher positions in system by school – e.g. CES, Teacher & NHMS, Teacher

NOTE: This SHOULD be used as a cover sheet each month to separate certified and non-certified payrolls.

**WAGE & HOUR EMPLOYEES PAYROLL CHECKLIST
(REQUIRED)**

SCHOOL/DEPT:

SEND REPORTS IN THE FOLLOWING ORDER

- 1 | **SIGNED WAGE & HOUR MONTHLY REPORT**
(straight time & overtime) _____
- 2 | **TIME TRUST SUMMARY REPORT —**
LIST OF EMPLOYEES WITH TOTAL HOURS FOR MONTH _____
- 3 | **TIMESHEETS —**
IN ALPHA ORDER _____
- 4 | **EMPLOYEE ABSENTEE STATEMENTS —**
IN DATE ORDER BEHIND RESPECTIVE TIME SHEET IN #3 ABOVE _____
- 5 | **APPLICABLE LEAVE DOCUMENTATION (PROFESSIONAL LEAVE
FORM, WC ELECTION, DR EXCUSES, OBITUARY, ETC.) —**
IN DATE ORDER BEHIND RESPECTIVE EMPLOYEE ABSENTEE STATEMENT _____
- 6 | **LEAVE VERIFICATION —**
DETAILED REPORT _____
- 7 | **SUBSTITUTE TIME SHEETS (if applicable) —**
IN ALPHA ORDER _____
- 8 | **EMAIL EXCEL SPREADSHEET OF W&H MONTHLY REPORT TO
PAYROLL AND EMAIL VERIFICATION OF DAYS WORKED
SPREADSHEET TO PAYROLL** _____
- 9 | **MAKE SURE THIS CHECKLIST IS COMPLETE**
(SCHOOL/DEPT NAME IS LISTED ABOVE & EACH ITEM IS "✓" OR INITIALED) _____

Leave records for vacant positions must be keyed in under the School, teacher positions. Example: CES, Teacher

NOTE: This SHOULD be used as a cover sheet each month to separate certified and non-certified payrolls.

PROCESSING CHILD NUTRITION PAYROLL

1. Leave for all child nutrition employees must be processed as detailed on pages 14-26 above **daily**.
2. Leave must be verified for correctness **before** timesheets/leave forms are submitted to the Central Office Payroll Department. (See pages 27-31).
3. Child nutrition time sheets and leave forms with original signatures must be sent to Child Nutrition Payroll Manager at the Central Office — **not to payroll** — at the payroll cut-off period for compilation.

CHILD NUTRITION PAYROLL MANAGER:

1. The Child Nutrition Payroll Manager will print timesheets for all child nutrition employees and send them (via email or pony mail) to the child nutrition manager at each location for review, corrections (if necessary), and signatures.
2. The Child Nutrition Payroll Manager will receive and verify each timesheet by correlating timesheets, employee absentee statements, and appropriate leave documentation to avoid duplicate time paid:
 - a. Check employee absentee statements to timesheets — employee should not have leave reported for actual work time reflected on timesheet.
 - b. If time on timesheets or employee absentee statement is incorrect, communicate with employee to correct.
 - c. Once corrections are made, reprint modified reports and submit to the employee to obtain signature prior to submitting to Central Office Payroll.
3. Once the timesheets have been verified & signed, the weekly time from each employee's time sheet will be keyed into a Wage & Hour report by the Child Nutrition Payroll Manager.
 - a. The Child Nutrition Payroll Manager prepares one wage & hour report for all Child Nutrition employees.
 - b. The Wage & Hour Report should be signed by the preparer & supervisor.
4. The Child Nutrition Payroll Manager will send the final Wage & Hour report to Payroll each month in accordance with the Payroll Cut-off Calendar.
5. Child nutrition substitutes:
 - a. should not be included with full-time child nutrition employee reports to Payroll
 - b. do not go on the wage and hour report

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CHILD NUTRITION WAGE AND HOUR EMPLOYEES

**PAYROLL CHECKLIST
(REQUIRED)**

SEND REPORTS IN THE FOLLOWING ORDER

- 1** | **SUBSTITUTE TIMESHEETS —**
IN ALPHA ORDER _____
- 2** | **SIGNED WAGE & HOUR MONTHLY REPORT**
(straight time & overtime) _____
- 3** | **TIME TRUST SUMMARY REPORT —**
LIST OF EMPLOYEES WITH TOTAL HOURS FOR MONTH
- 4** | **SIGNED TIMESHEETS —**
IN ALPHA ORDER _____
- 5** | **EMPLOYEE ABSENTEE STATEMENTS —**
IN DATE ORDER BEHIND RESPECTIVE TIME SHEET _____
- 6** | **APPLICABLE LEAVE DOCUMENTATION (PROFESSIONAL LEAVE
FORM, WC ELECTION, DR EXCUSES, OBITUARY, ETC.) —**
IN DATE ORDER BEHIND RESPECTIVE EMPLOYEE ABSENTEE STATEMENT _____
- 7** | **INTEGRITY LEAVE VERIFICATION —**
DETAILED REPORT _____
- 8** | **EMAIL EXCEL SPREADSHEET OF W&H MONTHLY REPORT AND
VERIFICATION OF DAYS WORKED SPREADSHEET TO PAYROLL** _____
- 9** | **MAKE SURE THIS CHECKLIST IS COMPLETE**
(MAKE SURE EACH ITEM IS "✓" OR INITIALED) _____

NOTE: This **SHOULD** be used as a cover sheet each month to separate certified and non-certified payrolls.

**CHILD NUTRITION CERTIFIED EMPLOYEES
PAYROLL CHECKLIST
(REQUIRED)**

SEND REPORTS IN THE FOLLOWING ORDER

- 1 | SIGNED TIMESHEETS —**
IN ALPHA ORDER _____
- 2 | EMPLOYEE ABSENTEE STATEMENTS —**
IN DATE ORDER BEHIND RESPECTIVE TIME SHEET _____
- 3 | APPLICABLE LEAVE DOCUMENTATION (PROFESSIONAL LEAVE
FORM, WC ELECTION, DR EXCUSES, OBITUARY, ETC.) —**
IN DATE ORDER BEHIND RESPECTIVE EMPLOYEE ABSENTEE STATEMENT _____
- 4 | MAKE SURE THIS CHECKLIST IS COMPLETE**
(MAKE SURE EACH ITEM IS "✓" OR INITIALED) _____

NOTE: This SHOULD be used as a cover sheet each month to separate certified and non-certified payrolls.

LOWNDES COUNTY SCHOOL DISTRICT
"WAGE AND HOUR" MONTHLY REPORT TO PAYROLL

PAYROLL PERIOD BEGINNING 3/19/2018 THROUGH 4/15/2018

SCHOOL NAME OR DEPARTMENT CHILD NUTRITION

BLANK COLUMNS ARE FOR CENTRAL OFFICE PAYROLL ONLY							
LAST NAME	FIRST NAME	BADGE NUMBER	WEEK ENDING	STRAIGHT TIME HOURS	OVERTIME HOURS	DOCK TIME HOURS	REASON OR COMMENT
Apple	Ethan	156	3/25/2018	2.00			clean up after meeting
Apple	Ethan	156	4/1/2018	0.25			clocked out late
Apple	Ethan	156	4/8/2018	0.25			clocked out late
Apple	Ethan	156	4/15/2018			0.25	clocked out early
Smith	Sally	2239	3/25/2018	0.50			stayed to meet food truck
TOTAL HOURS FOR THE MONTH (LAST PAGE ONLY):				3.00	0.00	0.25	

SIGNATURE OF PERSON PREPARING REPORT: _____ DATE: _____

SIGNATURE OF PRINCIPAL/ADMINISTRATOR/SUPERVISOR: _____ DATE: _____

NOTE: STRAIGHT TIME IS PAID ON HOURS WORKED OVER REGULAR ESTABLISHED WORKWEEK HOURS BUT 40 HOURS OR LESS (THIS IS A STATE LAW).
 OVERTIME IS PAID ON ACTUAL, PHYSICAL HOURS WORKED OVER 40 HOURS (NOT HOLIDAY, SICK, PERSONAL OR VACATION LEAVE).

Completed form must be in alphabetical order and a blank line between employees when sending to Central Office Payroll.
 REVISIONS: 07/09/2018

PROCESSING BUS DRIVER PAYROLL

1. Leave for all bus driver personnel must be processed in Integrity by the assistant principal at the school daily.
2. Leave must be verified as correctly requested/entered. Applicable forms & time sheets must be compared to the Employee Absentee Statements for correctness **before** timesheets/leave forms are submitted to the Transportation Clerk.
3. Original forms and reports must be sent to Transportation Clerk at the Bus Shop — not to payroll — at the payroll cut-off period.

TRANSPORTATION CLERK:

1. Transportation will receive, verify, and total each timesheet/employee absentee statement/applicable leave form/leave report correlating all to avoid duplicate time paid or leave entered. Employee cannot be duplicate paid for duplicate time.
 - a. Transportation will check travel approval and requisition forms and field trips to timesheets. Employee cannot have leave reported for actual time clocked on timesheet. Timesheets, employee absentee statements, and field trips must correlate.
 - b. If time on timesheets/employee absentee statement/applicable leave forms/leave report is incorrect, Transportation Clerk will send it back to Assistant Principal for correction. The Assistant Principal will make corrections, reprint all applicable report(s), and return corrected report(s) to Transportation.
2. Once the timesheets have been verified and totaled, if applicable, the weekly time from each bus driver's time sheet and field trip form will be keyed into the bus driver spreadsheet by Transportation.
 - a. Payroll will send the bus driver spreadsheet to Transportation each month. (On the Friday before the timesheet cut-off date or after Board meeting.)
 - b. The bus driver spreadsheet is set-up with each employee in alphabetical order in three different sections: (1) full-time, (2) bus aide, and (3) Substitutes.
 - c. The spreadsheet is organized so that the different types of routes/services are in the following order:
 - i. Regular Route — includes any hours driven for:
 1. Ability Works

2. Handicap (extra hours if not the employees regular route)
3. Alternative
4. Allied Health
5. Or Other Routes

- ii. Bus Servicing (extra hours board approved to be paid @ \$7.85/hr)
- iii. Field Trips (Dual position, non-exempt Bus Drivers SHOULD not drive field trips)

Item ii. Above (bus servicing) is strictly for those employees who require a separate timesheet for these hours.

TIP: Organizing the timesheets alphabetically and in the above order per employee can shorten the time taken to enter hours into the spreadsheet and needs to be reported to Payroll in this order.

- d. Only enter the following into the spreadsheet:
 - i. The Base Hours for that pay period
 - ii. The hours worked by each employee
 - iii. *Formulas are in the spreadsheet to calculate totals and should not be altered/deleted. Transportation will not be responsible for rates.*

3. Dual Positions –

- a. Transportation will be monitoring wage & hour, dual position employees. Wage & hour dual position employees **must not drive fieldtrips**. If Transportation notices this activity then the Assistant Principal is to be notified by the Transportation Supervisor.
 - b. Payroll will enter the primary job hours for wage & hour, dual positions.
4. Payroll will not check the accuracy of timesheets, BUT will verify entry into the spreadsheet. Payroll will key directly from the spreadsheet into Integrity; therefore, all time entered on the spreadsheet must be double checked to the timesheets before the spreadsheet is submitted to payroll.
 5. Once the spreadsheet is finalized by Transportation Clerk, it should be emailed to the Transportation Supervisor for approval.
 6. If the Transportation Supervisor approves the spreadsheet, he will forward the original message received from the Transportation Clerk to payroll.
 - a. The email will include the following statement:

“I approve the payroll report as entered for the payroll period ending _____.”

- b. The blank should be changed to the ending date of the Time Sheet/Clock that pertains to that current month's payroll report.

NOTE: These emails serve as the electronic signature of the Transportation Clerk as preparer and Transportation Supervisor as approver for these hours.

*Remember this is a person's pay. Accuracy is of utmost importance.
Double check all work!!!!*

- 7. Payroll should receive the following items each month by the cutoff calendar dates:

- a. Email from Transportation Supervisor that was forwarded from the Transportation Clerk as electronic signature approving time reported
- b. Bus Driver Spreadsheet attached to the above email
- c. **All** original timesheets, Employee Verification Statements, and applicable documentation supporting leave taken (all in order as shown on Checklist on page 43)
- d. Leave Verification Report for all bus drivers in alpha order – must be run at the Bus Shop
- e. Checklist below **MUST** be used as a cover sheet.
- f. Timesheets and leave forms shall be submitted by school mail or hand delivered (in case of emergency) to Payroll.

- 8. Payroll will add/delete employees as needed in the spreadsheet.

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**BUS DRIVER & BUS AIDE EMPLOYEES
PAYROLL CHECKLIST
(REQUIRED)**

SEND REPORTS IN THE FOLLOWING ORDER

- 1** LIST OF DRIVERS/SUBS/AIDES TO ADD TO SS, *if any* _____
- 2** SIGNED TIMESHEETS FOR #1 ABOVE _____
- 3** SIGNED TIMESHEETS (all others except subs) — _____
IN ALPHA ORDER _____
- 4** EMPLOYEE ABSENTEE STATEMENTS — _____
IN DATE ORDER BEHIND RESPECTIVE TIME SHEET _____
- 5** APPLICABLE LEAVE DOCUMENTATION (PROFESSIONAL LEAVE
FORM, WC ELECTION, DR EXCUSES, OBITUARY, ETC.) — _____
IN DATE ORDER BEHIND RESPECTIVE EMPLOYEE ABSENTEE STATEMENT _____
- 6** SIGNED SUBSTITUTE TIMESHEETS — _____
IN ALPHA ORDER & CLIPPED TOGETHER _____
- 7** LEAVE VERIFICATION — _____
DETAILED REPORT (all bus drivers in alpha order) _____
- 8** EMAIL BUS DRIVER EXCEL SPREADSHEET TO PAYROLL _____
- 9** MAKE SURE THIS CHECKLIST IS COMPLETE _____
(MAKE SURE EACH ITEM IS "✓" OR INITIALED) _____
- 10** EMAIL VERIFICATION OF DAYS WORED SPREADSHEET TO
PAYROLL _____

NOTE: This SHOULD be used as a cover sheet each month.

SUMMER PROGRAMS

- The Summer Programs Payroll Calendar is created annually and will be sent out prior to the summer programs commencing.
- All employees working a summer program or attending a training session must be individually board approved by submitting a personnel change form to Personnel Department prior to employee working. This is an important step to ensure their position is available in TimeTrust to clock in and out.

Direct Deposit

Employee Email Address

Effective August 31, 2020, Direct Deposit Statements will be published on Employee Connect and emailed to each employee. Direct Deposit statements are no longer being printed. If you do not have a LCSD email address, please provide us with your email address below. Any update in employee's email address must be provided to the Payroll Department by the 20th of each month by completing an updated Direct Deposit Employee Email Address form.

Employee Name _____ Employee ID # _____

Employee Email Address _____

Signed _____ Date _____

LOWNDES COUNTY SCHOOL DISTRICT
SUBSTITUTE REQUEST FORM

REQUEST TO ENTER SUBSTITUTES INTO INTEGRITY

SUBSTITUTE NAME: _____

**LOCATION/
DEPARTMENT:** _____

SIGNATURE OF REQUESTOR : _____

DATE OF REQUEST: _____

NOTE: Please do not have substitutes call payroll to see whether they are in the system. Substitutes will be entered one time a day (around 9 AM) from requests submitted and received by 9:00 a.m.

SUBSTITUTE SIGN-IN SHEET

SCHOOL NAME _____ PAYROLL CUT-OFF DATES _____

DATE	SUBSTITUTE NAME	TEACHER SUBSTITUTING FOR	DAY	1/2 DAY	TIME IN	TIME OUT

Principal/Administrator/Supervisor Signature: _____

NOTE: WRITE 1 UNDER DAY IF SUB IS FOR 1 DAY AND .50 UNDER 1/2 DAY IF FOR HALF A DAY.

Must be in Business Office at least 3 weeks prior to conference date

Must be accompanied with Hotel Reservation, Proposed Agenda and Registration Confirmation

Employee Name: _____ POSITION _____

Destination Location: _____

Place/Conference: _____

Purpose: _____

Leave Dates: From: _____ To: _____

Hours: _____ NOTE: WORK DAYS IN BETWEEN DATES WILL BE FULL DAY

Substitute required? YES NO

Transportation Type

Personal Auto \$35/day OR 0.56 x _____ miles Amount \$ 35.00 *whichever is most cost efficient if not renting car

Air (attach reservation) _____

Commuting with: Employee Name: _____

Transportation Total _____

Meals

High Areas and Out of State See Domestic Per Diem Rates

IN-State: 11 + 18 + 27 = \$56

Board Approval/Date _____

Date:	Breakfast	Lunch	Dinner	=	\$
				=	\$ -
				=	\$ -
				=	\$ -
				=	\$ -
				=	\$ -

Grand Total to Employee \$ -

Enterprise Rental Car \$ /day x days (attach reservation)

Hotel Accomodations (attach reservation)

Address _____

Rooming With _____

Registration Fee

Name _____ Address _____

Total Request Amount \$ -

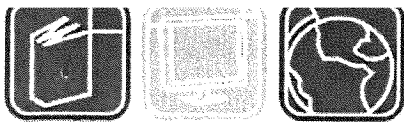
Expenditure Code _____

I am not requesting any reimbursement on this school related travel. _____

Signature & Date

The POs serve as the permission to travel. It is the responsibility of each employee to make sure their travel is approved **BEFORE** they travel.

	Signatures	Date
Requestor	_____	_____
Principal/Supervisor	_____	_____
Funding Source Director	_____	_____
Business Manager	_____	_____
Superintendent	_____	_____



LOWNDES COUNTY

School District

CALDONIA • NEW HOPE • WEST LOWNDES

PERSONNEL DEPARTMENT

1053 Highway 45 South

Columbus, MS 39701

(P) 662-244-5010 / (F) 662-244-5046

www.veronica.hill@lowndes.k12.ms.us

"Challenge all students to attain their greatest potential"

**AVAILABLE PAID LEAVE OPTIONS
WHILE OUT ON WORKERS' COMP**

As Per Policy (GBRI); The employee has the option to continue receiving his/her regular rate of pay as well as Workers' Compensation benefits until he/she returns to work, the physician has declared the employee able to return to work, or until accumulated leave is exhausted- whichever comes first.

EMPLOYEE INFORMATION	
Employee Name:	Phone:
Social Security Number (Only Last Four Digits):	Title:
Supervisor:	Location:
LEAVE OF ABSENCE: Beginning Date:	Ending Date:

OPTIONS
Below is a list of options that are available to you. Please make your election and return this form no later than: _____
I choose to request a medical leave of absence while out on workers' compensation, and:
<input type="checkbox"/> I DO want to use my available paid leave while I am receiving workers' compensation benefits. Check type of leave you would like to use:
_____ Sick
_____ Personal
_____ Vacation
_____ Substitute
<input type="checkbox"/> I DO NOT want to use any of my available paid leave while I am receiving workers' compensation benefits.

INSURANCE BENEFITS
I understand that upon my return to employment, or upon separation, I will be responsible for repayment of the employee's portion of the insurance premiums paid on my behalf. Initial here: _____

SIGNATURE (Required) _____

If you wish to discuss your options or need additional information, you may contact:

Personnel Director: Veronica Hill 662-244-5010

Employee's Signature: _____ Date: _____

(For Personnel Office Use)	
Available Paid Leave as of:	
Sick: _____	Personal: _____
Vacation: _____	Substitute: _____
Director of Personnel Signature: _____	Date: _____

LOWMEDES COUNTY SCHOOL DISTRICT

"WAGE AND HOUR" MONTHLY REPORT TO PAYROLL

PAYROLL PERIOD BEGINNING _____ THROUGH _____

SCHOOL NAME OR DEPARTMENT _____

LAST NAME		FIRST NAME	BADGE NUMBER	WEEK ENDING	BLANK COLUMNS ARE FOR CENTRAL OFFICE PAYROLL ONLY			REASON OR COMMENT
					STRAIGHT TIME HOURS	OVERTIME HOURS	DOCK TIME HOURS	
TOTAL HOURS FOR THE MONTH (LAST PAGE ONLY):					0.00	0.00	0.00	
<div style="display: flex; justify-content: space-between;"> <div>scale for reporting time</div> <div>15 min = 0.25</div> <div>30 min = 0.50</div> <div>45 min = 0.75</div> </div>								

SIGNATURE OF PERSON PREPARING REPORT: _____ DATE: _____

SIGNATURE OF PRINCIPAL/ADMINISTRATOR/SUPERVISOR _____ DATE: _____

NOTE: STRAIGHT TIME IS PAID ON HOURS WORKED OVER REGULAR ESTABLISHED WORK WEEK HOURS BUT 40 HOURS OR LESS (THIS IS A STATE LAW).
OVERTIME IS PAID ON ACTUAL, PHYSICAL HOURS WORKED OVER 40 HOURS (NOT HOLIDAY, SICK, PERSONAL OR VACATION LEAVE).

Completed form must be in alphabetical order and a blank line between employees when sending to Central Office Payroll.

WORK DAYS CHANGES

EMPLOYEE NAME _____

EMPLOYEE POSITION: _____

EMPLOYEE START DATE: _____

EMPLOYEE # OF DAYS TO WORK: _____

DAY IN PAY PERIOD NOT WORKED

DAY TO BE WORKED IN PLACE OF DAY NOT WORKED

EMPLOYEE SIGNATURE

DATE

PRINCIPAL SIGNATURE

DATE

SUPERINTENDENT SIGNATURE

DATE

PAYROLL

**CERTIFIED EMPLOYEES PAYROLL CHECKLIST
(REQUIRED)**

SCHOOL/DEPT:

SEND REPORTS IN THE FOLLOWING ORDER

- 1** | **PRINCIPAL/SUPERVISOR/ADMIN. TIME SHEET** _____
- 2** | **EMPLOYEE ABSENTEE STATEMENT —**
IN DATE ORDER BEHIND RESPECTIVE TIME SHEET IN #1 ABOVE _____
- 3** | **APPLICABLE LEAVE DOCUMENTATION (PROFESSIONAL LEAVE
FORM, WC ELECTION, DR EXCUSES, OBITUARY, ETC.) —**
IN DATE ORDER BEHIND RESPECTIVE EMPLOYEE ABSENTEE STATEMENT _____
- 4** | **OTHER CERTIFIED TIME SHEETS (includes Asst. Principal, if app) —**
IN ALPHA ORDER _____
- 5** | **EMPLOYEE ABSENTEE STATEMENTS —**
IN DATE ORDER BEHIND RESPECTIVE TIME SHEET IN #4 ABOVE _____
- 6** | **APPLICABLE LEAVE DOCUMENTATION (PROFESSIONAL LEAVE
FORM, WC ELECTION, DR EXCUSES, OBITUARY, ETC.) —**
IN DATE ORDER BEHIND RESPECTIVE EMPLOYEE ABSENTEE STATEMENT _____
- 9** | **MAKE SURE THIS CHECKLIST IS COMPLETE**
(SCHOOL/DEPT NAME IS LISTED ABOVE & EACH ITEM IS "✓" OR INITIALED) _____

Leave records for vacant positions are entered at the school by using the teacher positions in system by school – e.g. CES, Teacher & NHMS, Teacher

NOTE: This SHOULD be used as a cover sheet each month to separate certified and non-certified payrolls.

CERTIFIED EMPLOYEES PAYROLL CHECKLIST
(REQUIRED)

SCHOOL/DEPT:

SEND REPORTS IN THE FOLLOWING ORDER

- 1 PRINCIPAL/SUPERVISOR/ADMIN. TIME SHEET _____
- 2 EMPLOYEE ABSENTEE STATEMENT — _____
IN DATE ORDER BEHIND RESPECTIVE TIME SHEET IN #1 ABOVE
- 3 APPLICABLE LEAVE DOCUMENTATION (PROFESSIONAL LEAVE _____
FORM, WC ELECTION, DR EXCUSES, OBITUARY, ETC.) —
IN DATE ORDER BEHIND RESPECTIVE EMPLOYEE ABSENTEE STATEMENT
- 4 OTHER CERTIFIED TIME SHEETS (includes Asst. Principal, if app) — _____
IN ALPHA ORDER
- 5 EMPLOYEE ABSENTEE STATEMENTS — _____
IN DATE ORDER BEHIND RESPECTIVE TIME SHEET IN #4 ABOVE
- 6 APPLICABLE LEAVE DOCUMENTATION (PROFESSIONAL LEAVE _____
FORM, WC ELECTION, DR EXCUSES, OBITUARY, ETC.) —
IN DATE ORDER BEHIND RESPECTIVE EMPLOYEE ABSENTEE STATEMENT
- 9 MAKE SURE THIS CHECKLIST IS COMPLETE _____
(SCHOOL/DEPT NAME IS LISTED ABOVE & EACH ITEM IS "√" OR INITIALED)

Leave records for vacant positions are entered at the school by using the teacher positions in system by school – e.g. CES, Teacher & NHMS, Teacher

NOTE: This SHOULD be used as a cover sheet each month to separate certified and non-certified payrolls.

**WAGE & HOUR EMPLOYEES PAYROLL CHECKLIST
(REQUIRED)**

SCHOOL/DEPT:

SEND REPORTS IN THE FOLLOWING ORDER

- 1 | **SIGNED WAGE & HOUR MONTHLY REPORT**
(straight time & overtime) _____
- 2 | **TIME TRUST SUMMARY REPORT —**
LIST OF EMPLOYEES WITH TOTAL HOURS FOR MONTH _____
- 3 | **TIMESHEETS —**
IN ALPHA ORDER _____
- 4 | **EMPLOYEE ABSENTEE STATEMENTS —**
IN DATE ORDER BEHIND RESPECTIVE TIME SHEET IN #3 ABOVE _____
- 5 | **APPLICABLE LEAVE DOCUMENTATION (PROFESSIONAL LEAVE
FORM, WC ELECTION, DR EXCUSES, OBITUARY, ETC.) —**
IN DATE ORDER BEHIND RESPECTIVE EMPLOYEE ABSENTEE STATEMENT _____
- 6 | **LEAVE VERIFICATION —**
DETAILED REPORT _____
- 7 | **SUBSTITUTE TIME SHEETS (if applicable) —**
IN ALPHA ORDER _____
- 8 | **EMAIL EXCEL SPREADSHEET OF W&H MONTHLY REPORT
AND VERIFICATION OF DAYS WORKED TO PAYROLL** _____
- 9 | **MAKE SURE THIS CHECKLIST IS COMPLETE**
(SCHOOL/DEPT NAME IS LISTED ABOVE & EACH ITEM IS "✓" OR INITIALED) _____

Leave records for vacant positions must be keyed in under the School, teacher positions. Example: CES, Teacher

NOTE: This **SHOULD** be used as a cover sheet each month to separate certified and non-certified payrolls.

CHILD NUTRITION WAGE AND HOUR EMPLOYEES

PAYROLL CHECKLIST

(REQUIRED)

SEND REPORTS IN THE FOLLOWING ORDER

- 1 | **SUBSTITUTE TIMESHEETS —**
IN ALPHA ORDER _____
- 2 | **SIGNED WAGE & HOUR MONTHLY REPORT**
(straight time & overtime) _____
- 3 | **TIME TRUST SUMMARY REPORT —**
LIST OF EMPLOYEES WITH TOTAL HOURS FOR MONTH
- 4 | **SIGNED TIMESHEETS —**
IN ALPHA ORDER _____
- 5 | **EMPLOYEE ABSENTEE STATEMENTS —**
IN DATE ORDER BEHIND RESPECTIVE TIME SHEET
- 6 | **APPLICABLE LEAVE DOCUMENTATION (PROFESSIONAL LEAVE
FORM, WC ELECTION, DR EXCUSES, OBITUARY, ETC.) —**
IN DATE ORDER BEHIND RESPECTIVE EMPLOYEE ABSENTEE STATEMENT
- 7 | **INTEGRITY LEAVE VERIFICATION —**
DETAILED REPORT _____
- 8 | **EMAIL EXCEL SPREADSHEET OF W&H MONTHLY REPORT AND
VERIFICATION OF DAYS WORKED SPREADSHEET TO PAYROLL** _____
- 9 | **MAKE SURE THIS CHECKLIST IS COMPLETE**
(MAKE SURE EACH ITEM IS "✓" OR INITIALED) _____

NOTE: This **SHOULD** be used as a cover sheet each month to separate certified and non-certified payrolls.

**CHILD NUTRITION CERTIFIED EMPLOYEES
PAYROLL CHECKLIST
(REQUIRED)**

SEND REPORTS IN THE FOLLOWING ORDER

- 1 | **SIGNED TIMESHEETS —**
IN ALPHA ORDER _____
- 2 | **EMPLOYEE ABSENTEE STATEMENTS —**
IN DATE ORDER BEHIND RESPECTIVE TIME SHEET _____
- 3 | **APPLICABLE LEAVE DOCUMENTATION (PROFESSIONAL LEAVE
FORM, WC ELECTION, DR EXCUSES, OBITUARY, ETC.) —**
IN DATE ORDER BEHIND RESPECTIVE EMPLOYEE ABSENTEE STATEMENT _____
- 4 | **MAKE SURE THIS CHECKLIST IS COMPLETE**
(MAKE SURE EACH ITEM IS "✓" OR INITIALED) _____

NOTE: This SHOULD be used as a cover sheet each month to separate certified and non-certified payrolls.

**BUS DRIVER & BUS AIDE EMPLOYEES
PAYROLL CHECKLIST
(REQUIRED)**

SEND REPORTS IN THE FOLLOWING ORDER

- 1 LIST OF DRIVERS/SUBS/AIDES TO ADD TO SS, *if any*
- 2 SIGNED TIMESHEETS FOR #1 ABOVE _____
- 3 SIGNED TIMESHEETS (all others except subs) — _____
IN ALPHA ORDER
- 4 EMPLOYEE ABSENTEE STATEMENTS — _____
IN DATE ORDER BEHIND RESPECTIVE TIME SHEET
- 5 APPLICABLE LEAVE DOCUMENTATION (PROFESSIONAL LEAVE
FORM, WC ELECTION, DR EXCUSES, OBITUARY, ETC.) — _____
IN DATE ORDER BEHIND RESPECTIVE EMPLOYEE ABSENTEE STATEMENT
- 6 SIGNED SUBSTITUTE TIMESHEETS — _____
IN ALPHA ORDER & CLIPPED TOGETHER
- 7 LEAVE VERIFICATION — _____
DETAILED REPORT (all bus drivers in alpha order)
- 8 EMAIL BUS DRIVER EXCEL SPREADSHEET TO PAYROLL _____
- 9 MAKE SURE THIS CHECKLIST IS COMPLETE _____
(MAKE SURE EACH ITEM IS "✓" OR INITIALED)
- 10 EMAIL VERIFICATION OF DAYS WORED SPREADSHEET TO
PAYROLL _____



Lowndes County School District

Dr. Robin Ballard
Deputy Superintendent

1053 Hwy 45 South – Columbus, MS 39701
(662) 244-5000 – Fax (662) 244-5043

Andrew Matthews
Child Nutrition Director

Sayonia Garvin
Business Officer/Administrator

Sam Allison
Superintendent

Veronica Hill
Personnel Director

“Challenge all students to attain their greatest potential.”

NOTICE OF ADMINISTRATIVE LEAVE

Date _____

Name _____

You are hereby notified that you are placed on Administrative Leave effective _____ with (without) pay due to the following reason/s:

Return Date: _____

If you would like to discuss this matter with me further, please contact my office to schedule an appointment. Under MS Code Section 37-9-59 you are entitled to a public hearing upon request.

Sincerely,

Sam Allison, Superintendent
Lowndes County School District

LOWNDES COUNTY SCHOOL DISTRICT EMPLOYEE DIRECT DEPOSIT ENROLLMENT/CHANGE FORM

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS (ACH CREDITS)

EMPLOYEE NAME: _____ Last 4 digits of SSN# _____
 PLEASE PRINT

DEPOSITORY
ELECTION NO. 1:

BANK NAME: _____ BRANCH/CITY _____
 ROUTING NUMBER _____ CHECKING RESIDUAL
 ACCOUNT NO. _____ SAVINGS PERCENT
 (SELECT RESIDUAL HERE IF DEPOSITING SPECIFIC 'AMOUNTS' TO OTHER ELECTIONS)

DEPOSITORY
ELECTION NO. 2:

BANK NAME: _____ BRANCH/CITY _____
 ROUTING NUMBER _____ CHECKING AMOUNT
 ACCOUNT NO. _____ SAVINGS PERCENT

DEPOSITORY
ELECTION NO. 3:

BANK NAME: _____ BRANCH/CITY _____
 ROUTING NUMBER _____ CHECKING AMOUNT
 ACCOUNT NO. _____ SAVINGS PERCENT

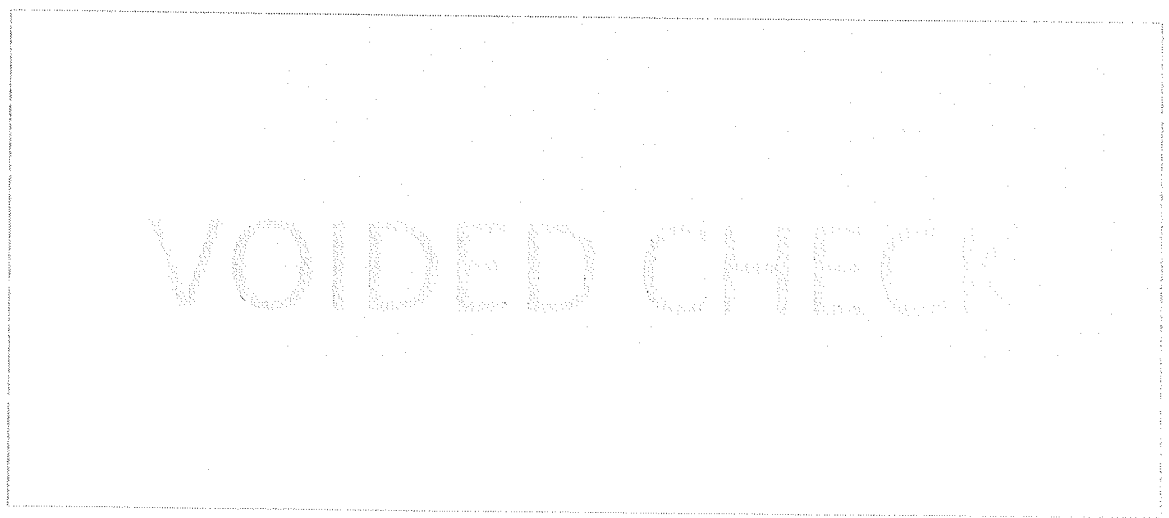
I hereby authorize Lowndes County School District, hereinafter called THE DISTRICT, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to the depository(ies) named above, to credit and/or debit the same to such depository(ies), hereinafter called DEPOSITORY. This authorization is to remain in full force and effect until the DISTRICT has received written notification from me of its termination in such time and in such manner as to afford the DISTRICT and DEPOSITORY a reasonable opportunity to act on it.

SIGNATURE _____ DATE: _____

Changes to DIRECT DEPOSIT elections must be made on a new form with the new elections and with the proper documents attached:

⇒ FOR CHECKING
 ACCOUNT(S): Voided Check

⇒ FOR SAVINGS
 ACCOUNT(S) AND OTHER ACCOUNTS THAT HAVE NO VOIDED CHECK AVAILABLE: A bank, credit union, etc. form routing number, account number, and type of account



NEW FORMS will be processed in accordance with the payroll cut-off calendar. Contact your school office or supervisor for payroll cut-off calendar.

Return the completed form to: Lowndes County Schools, Central Office, ATTN: Payroll, 1053 Hwy 45 South, Columbus, MS 39701