

## COMPENSATED LEAVE FOR PROFESSIONAL DEVELOPMENT



### STANDARDS FOR REPORTING

#### Radnor Township School District • Office of Human Resources

School code section 1166.1 governs the types of activities and minimal standards that may be approved during a compensated leave for professional development. A copy is attached for your information.

In accordance with the district's rights under section 1166.1 and under Article VIII. F. of our agreement, and to assure consistency of the process that evaluates compliance with the requirements of the code, standards have been developed to govern the approval process. The standards are as follows:

#### **Required Documentation in Support of a Compensated Leave for Professional Development**

##### 1. Graduate or Undergraduate Credit

An employee requesting a compensated leave for professional development, and proposing to take graduate or undergraduate credits, shall identify the university granting the credits and the semester in which the courses will be taken. The employee must provide the following specific information for each course he or she proposes to take during the leave: specific course title, specific course number, type of credits (graduate or undergraduate), number of credits, course description, and a statement citing the regulatory requirement that will be met or the professional competency that will be improved as a result of having taken the course. This statement must include a description of the benefit to be derived by the employee and by the district as a result of the completion of the course by the employee.

This detailed plan will be provided at the time the request for leave is made. The superintendent will review plans that are submitted timely. Plans that comply with the requirements of the school code, as describe in section 1166.1 and as determined by the superintendent, will receive support from the superintendent. Supported plans will be submitted to the board and a recommendation will be made for approval of a compensated leave for professional development to accomplish the plan.

Six weeks prior to the start of the sabbatical leave, the employee will provide evidence of enrollment in the courses that have been approved. If the approved courses have not been offered as anticipated by the employee, alternate courses must be submitted for approval. Requests for approval of alternate courses will be accompanied with the same documentation required for the approval of the original plan. Alternate courses will be reviewed by superintendent and evaluated under the same criteria as required for the original plan.

Within one month following completion of the compensated leave for professional development, the employee will submit an official transcript demonstrating attainment of passing grades in the approved courses. Should a transcript be unavailable within one month of completion of the leave, the employee will submit a letter requesting an extension of the reporting deadline. The letter must identify the reason the transcript is unavailable, indicate a projected time in which the transcript will be available, and attest to completion of the courses and attainment of passing grades. The superintendent will review the request for extension of a deadline and recommend approval as appropriate.

##### 2. Professional Development Activities

An employee requesting a compensated leave for professional development, and proposing to engage in professional development activities during the leave, shall provide the following documentation: a list of the proposed activities to be undertaken during the leave, the number of hours to be devoted to each activity, a statement citing the regulatory requirement that will be met or the professional competency that will be improved as a result completing each activity. This statement must include a description of the benefit to be derived by the employee as a result of having completed each activity, and the benefit to be derived by the district as a result of the employee having completed each activity.

This detailed plan will be provided at the time the request for leave is made. The superintendent will review plans that are submitted timely. Plans that comply with the requirements of the school code, as describe in section 1166.1 and as determined by the superintendent, will receive support from the superintendent. Supported plans will be submitted to the board and a recommendation will be made for approval of a compensated leave for professional development to accomplish the plan.

Within one month following completion of the compensated leave for professional development, the employee will submit a detailed chronology of the activities performed during the leave with duration noted throughout. This report will identify the skills or knowledge that the employee had attained or improved as a result of participating in the activities, and will relate a detailed account of how the activities performed during the leave will impact his or her practice in the district.

**COMPENSATED LEAVE FOR PROFESSIONAL DEVELOPMENT**

CREDITS TO BE ATTAINED



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The following specific information must be provided by the employee for each course he/she proposes to take during the leave:

**Employee Section (Please print clearly)**

Name:	Dept/Bldg:
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Position:
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**1. COURSE INFORMATION** *(Course work must take place during the semester dates of your leave.)*

University Name**	Course Dates	Specific Course #	Course Title	Course Description	# of Credits	Type of Credits (grad or undergrad)
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						

**\*\* List University issuing transcript not on-line provider (i.e. Learners Edge is not the University)**

Please complete questions 2a or 2b, 3 and 4 on the backside.

(Over)

**2a. The regulatory requirement that will be met:**


**OR**

**2b. The professional competency that will be improved:**


**3. Benefit to the employee:**


**4. Benefit to the district:**


**Agreement and Signature**

I attest that I have read the Compensated Leave for Professional Development Standard for Reporting and that the information I have provided on this form is complete, true and accurate. By signing below, I understand and agree that I must provide all required documents for the requested leave.

Signature:	Date:
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# Request for Leave of Absence

ADVANCE NOTICE REQUIRED



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Employee Section (Please print clearly)		
Name:	Position:	Dept/Bldg:
Address:		
Telephone:	Email:	
Duration and Purpose of Leave (If more space is needed, please attach an additional sheet of paper to this form)		
Leave Start Date:	Return to Work Date:	
<input type="checkbox"/> Compensated Professional Development Leave ( <b>Professional Employees Only</b> ) Attach <b>Compensated Leave for Professional Development form</b>		
<input type="checkbox"/> Sabbatical – restoration of your health* ( <b>Professional Employees Only</b> )		
<input type="checkbox"/> FMLA: Must meet eligibility requirements – minimum 1250 hours worked in the 12 months immediately preceding commencement of the leave. If eligible, you will be provided FMLA forms to be completed by the treating physician. <input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent Request is for <input type="checkbox"/> My serious health condition <input type="checkbox"/> Family member’s serious health condition		
<input type="checkbox"/> Medical – restoration of your health*	<input type="checkbox"/> Childrearing*	<input type="checkbox"/> To care for a family member* Specify relationship:
<input type="checkbox"/> Other (specify below)	<input type="checkbox"/> Military (attach orders)	
Employee’s Supporting Statement:		
*Requires supporting statement and recommendation from your physician or, in the case of a family member, a like statement from their physician. Additionally, Sabbaticals require a physician’s statement at the mid-point of the leave and at least 30 days prior to the conclusion of the leave, evaluating the employee’s status relative to his/her ability to return to employment.		
Compensable Leave Time to be used**		
<input type="checkbox"/> Sick	<input type="checkbox"/> Personal	<input type="checkbox"/> Vacation
**Leaves for restoration of your health (exclusive of Sabbatical) require use of all available sick leave. Use of sick leave for childrearing or to care for a family member is subject to the limitations of your respective Collective Bargaining Agreement. Use of sick leave for non-medical purposes will not be approved.		
You may be required to exhaust available leave time prior to commencement of an unpaid leave, subject to School Board Policy and/or Collective Bargaining Unit language. Your leave determination notice will include this information.		
Agreement and Signature		
I attest that the information I have provided on this form is complete, true and accurate. By signing below, I understand and agree that I must provide all required documents for the requested leave.		
Signature:		Date:
For Human Resources Office Use Only		
Date received:	Date presented to the Board:	
Status: <input type="checkbox"/> Approved <input type="checkbox"/> Denied Comments:		
Authorized Signature:		Date:

# Compensated Leave for Professional Development

## Checklist



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Follow the checklist below for timeline to present necessary documentation to the Human Resources Office.

- Complete and submit the following forms to HR no later than **January 15<sup>th</sup>** for the following year:
  - Request for Leave of Absence form
  - Compensated Leave for Professional Development form
- If you later need to request alternate courses you must resubmit the Compensated Leave for Professional Development form to Human Resources

### **Six weeks prior to leave:**

- **Evidence of enrollment** – send to Human Resources (**Course work must take place during the semester dates of your leave. Course work completed outside of those dates may result in failure to fulfill leave requirements or result in additional course work.**)
  - Fall Semester = first day of school through the end of the first semester
  - Spring Semester = first day of the 2<sup>nd</sup> semester through the end of the school year

### Upon completion:

- Official transcripts within 1 month of conclusion of leave submitted to Human Resources:

**Fall:** February 28

**Spring:** July 31

A request to rescind a sabbatical leave must be received by:

**May 15** for a fall semester leave or by

**November 1** for a spring semester leave.

*Failure to follow these guidelines or to submit required transcripts on time shall result in the requirement for repayment by the employee of the salary and benefits costs paid by the district during the leave.*

**Note:** Tuition assistance is a separate process. Please follow the guidelines contained in your CBA and the Tuition Assistance Plan.