



EMPLOYEE HANDBOOK

DAVISON COMMUNITY SCHOOLS

**2023/2024**

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Visit our website at [www.davisonschools.org](http://www.davisonschools.org) for lots of additional information about our district and virtual tours of our schools.

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# GENERAL GUIDELINES FOR ALL EMPLOYEES

## TERMS OF EMPLOYMENT

This handbook is applicable to all employees. If the terms or a policy, procedures or benefit vary according to the classification that an employee holds, the terms that apply to employees in that classification will be specifically described in the applicable bargaining agreement.

## BARGAINING UNITS

Davison Community Schools recognizes the following collective bargaining units: Davison Education Association (DEA), Custodian, Food Service, Maintenance, Transportation (CFMT), Davison Paraprofessional Association (DPA), and Davison Education Secretarial Association (DESA).

## PROBATIONARY PERIOD

Your first 90 actual work days, or different length of time as specified in the individual master agreements, is considered to be a period of training and adjustment. You should not be hesitant about asking questions to help you better understand your job, policies, procedures, and most importantly, the goals of the organization. You may become eligible for benefits following the satisfactory completion of the training period. Refer to the applicable master agreement or check with the Personnel Office to determine if and/or when you might be eligible for benefits.

## EMPLOYMENT STATUS

*Regular* – An employee who is hired to work on a regular, rather than a temporary basis may be eligible to receive fringe benefits subject to applicable eligibility requirements and limitations placed on new employees. These terms are defined on job postings or within bargaining unit master agreements. The definition of full-time and part-time can be found in each unit's collective bargaining agreements.

*Temporary or Seasonal* – An employee who is hired to work only on a project basis or for a specified period of time is considered to be temporary or seasonal. Temporary or seasonal employees are not eligible to receive benefits.

## NON-DISCRIMINATION POLICY STATEMENT/EQUAL EMPLOYMENT OPPORTUNITY

The Davison Community School District is an equal opportunity employer that supports and subscribes to a policy of nondiscrimination in all aspects of employment.

The Board of Education does not discriminate on the basis of race, color, national origin, sex, (including sexual orientation and gender identity), disability, age, religion, height, weight, marital or family status, military status, ancestry, genetic information or any other legally protected category, (collectively, "Protected Classes"), in its programs and activities, including employment opportunities.

Under Michigan law, an employee may not be discriminated against in employment because of a handicap that can be reasonably accommodated to enable that employee to perform the job. Handicapped employees who feel accommodations are needed to perform their job must notify the Personnel office in writing of the need for accommodation within 182 days after the date the employee knew or reasonably should have known that accommodation was needed. The person designed to handle any complaints or requests for accommodations and/or answer any questions concerning the non-discrimination policy of the Davison Community Schools and/or is:

Christine Kuzinski  
Director of Human Resources & Operations  
Davison Community Schools  
1490 N. Oak Road  
Davison, Michigan 48423

Telephone: 810-591-0808

## **GRIEVANCE PROCEDURE**

FOR

TITLE VI OF THE CIVIL RIGHTS ACT OF 1964

TITLE IX OF THE EDUCATION AMENDMENT ACT OF 1972

SECTION 504 OF THE REHABILITATION ACT OF 1973

TITLE II OF THE AMERICANS WITH DISABILITIES ACT OF 1990

### **Section 1**

Any person believing that the Davison Community School District or any part of the school organization has inadequately applied the principles and/or regulations of (1) Title VI of the Civil Rights Act of 1964, (2) Title IX of the Education Amendment Act of 1972, (3) Section 504 of the Rehabilitation Act of 1973, or (4) Title II of the Americans with Disabilities Act of 1990 may bring forward a complaint, which shall be referred to as a grievance to:

Civil Rights Coordinator  
Christine Kuzinski, Director of Human Resources & Operations  
Davison Community Schools  
1490 N Oak Rd  
Davison, MI 48423  
(810) 591-0808

### **Section II**

The person who believes a valid basis for grievance exists shall discuss the grievance informally and on a verbal basis with the Civil Rights Coordinator, who shall in turn investigate the complaint and reply with an answer within five (5) business days.

The Board is committed to promptly and equitably resolving student and employee complaints alleging Sexual Harassment. The District's response to allegations of Sexual Harassment will treat Complainants and Respondents equitably, including providing supportive measures to the Complainant and Respondent, as appropriate, and following this Grievance Process before imposition of any disciplinary sanctions or other actions, other than supportive measures, against the Respondent.

The Title IX Coordinator(s), along with any investigator(s), decision-maker(s), or any person(s) designated to facilitate an informal resolution process, shall not have a conflict of interest or bias for or against Complainants or Respondents generally or an individual Complainant or Respondent.

If a determination of responsibility for Sexual Harassment is made against the Respondent, the Board will provide remedies to the Complainant. The remedies will be designed to restore or preserve equal access to the District's education program or activity. Potential remedies include, but are not limited to, individualized services that constitute supportive measures. Remedies may also be disciplinary or punitive in nature and may burden the Respondent.

### **Section III**

If the complaint is against the Superintendent, it should be reported to:  
Vice-President of the Board of Education  
Davison Community Schools  
1490 N Oak Rd  
Davison, MI 48423      810-591-0801

COMPLAINT RECORD FORM

*See Board Policy 2266 (found on Davison Schools' website: [www.davisonschools.org](http://www.davisonschools.org))*

**Please remit this form to:**

Christine Kuzinski  
Title IX Coordinator- Staff  
Davison Community Schools  
1490 N Oak Rd  
Davison, MI 48423  
[ckuzinski@davisonschools.org](mailto:ckuzinski@davisonschools.org)  
810-591-0808

Amy Chorley  
Title IX Coordinator - Students  
Davison Community Schools  
1490 N. Oak Rd.  
Davison, MI, 48423  
[achorley@davisonschools.org](mailto:achorley@davisonschools.org)  
810-591-0913

A person alleging discrimination by the District on the basis of sex may file a complaint through the District's grievance procedure. A complaint may also be filed at any time with the Office for Civil Rights (OCR), U.S. Department of Education, 1350 Euclid Avenue, Suite 325, Cleveland, OH 44115. Filing a complaint with the District is not a prerequisite to filing with OCR. For additional information about the District's grievance procedure, please contact the Title IX Coordinator identified above.

## ANTI-HARASSMENT POLICY

The Board will vigorously enforce its prohibition against discriminatory harassment based on race, color, national origin, sex (including sexual orientation and transgender identity), disability, age (except as authorized by law), religion, height, weight, marital or family status, military status, ancestry, or genetic information (collectively, "Protected Classes") that are protected by Federal civil rights laws (hereinafter referred to as unlawful harassment), and encourages those within the School District community as well as third parties, who feel aggrieved to seek assistance to rectify such problems. The Board will investigate all allegations of unlawful harassment and in those cases where unlawful harassment is substantiated, the Board will take immediate steps to end the harassment, prevent its recurrence, and remedy its effects. Individuals who are found to have engaged in unlawful harassment will be subject to appropriate disciplinary action. The person designated to handle any questions and/or complaints concerning the Prohibition Against Discrimination Based on Disability Policy of Davison Community Schools is Executive Director of Student Services, Amy Chorley, 1490 N Oak Rd, Davison, MI 48423 -- (810-591-0912).

## AMENDMENT OF POLICIES, BENEFITS AND COMPENSATION

The Davison Community School District believes wholeheartedly in the policies and procedures described in this handbook. Nevertheless, the district must retain the discretion to react to various economic and business circumstances. Thus, the district reserves the right and the discretion to alter, modify, amend or terminate policies, benefits and compensation with or without notice. All such changes will be in writing. Verbal changes shall have no force or effect. Changes will be effective as of the date of their occurrence and they will supersede the original policies, benefits, and compensation. If the employee is covered under a formal bargaining agreement, the agreement may govern changes and/or amendments.

## AT-WILL EMPLOYEE

In accepting a non-certified position in the Davison Community School District, an employee will be defined as an "at-will employee" unless otherwise designated. As a non-certified employee, there is no guarantee or implied right to regular employment under any bargaining unit contract, except those positions covered under the Master Contracts of the Custodial, Food Service, Maintenance, and Transportation (CFMT) group, the Davison Education Secretarial Association (DESA), and the Davison Paraprofessional Association (DPA). An "at-will employee" may be terminated for any or no reason. No employee of the district has the authority to make any representation contrary to the above statement.

## CONFIDENTIALITY

In the course of your employment, you may have access to information about the district, students, their parents and other employees. This information must be kept confidential. If you are uncertain about whether information is confidential, check with your principal or supervisor before discussing it with anyone. Any violation of this policy may result in discipline.

## PUBLIC RELATIONS

Our community is very important to us. When dealing with the public, always be courteous, polite and patient. Occasionally, a situation may arise that is unique. In such cases, inform the individual that you will contact your principal or supervisor and get back to them promptly.

### NEWS RELEASES

The Superintendent shall prepare copies of school news releases approved by his/her office for any member of the Board upon request.

Staff members shall observe the following procedure when releasing information to the news media, except concerning athletic events, recreation or community education activities, and school social events:

1. If a staff member is approached by the news media, that staff member should direct the media to the building principal, who shall inform the District Communications Office.
2. If a staff member wishes to initiate a feature story for the news media, he/she must have the approval of the building principal, who shall inform the District Communications Office.
3. Staff members shall not contact the media directly without the approval of the District Communications Office.

### SPORTS AND SPECIAL EVENTS COVERAGE

The Athletic Director shall be responsible for determining eligibility and issuing press passes to members of the working press wishing to cover school events.

### BROADCASTING AND TAPING

Members of the broadcast media must notify the Athletic Director prior to the event they wish to cover in order that arrangements may be made for their equipment.

### GARNISHMENTS

The Davison Community School District must comply with all writs of garnishment it receives. You will be notified before any deductions are taken from your paychecks if we receive a writ of garnishment requiring us to withhold and pay a portion of your wages to a court. Information about the garnishment will be held in confidence.

### PERSONNEL FILES

You have a right to examine your personnel file or to obtain a copy of your file upon a written request to the Assistant Superintendent for Personnel. If you wish to examine your file, you may do so during normal office hours provided it does not interfere with your assigned duties. Arrangements to view your file may be made by contacting the Personnel Office to make an appointment.

### EVALUATIONS

During the course of your employment, you may receive periodic performance evaluations. Typically, your supervisor will conduct your evaluation and discuss it with you. After reviewing your evaluation, your supervisor will ask you to sign the evaluation to acknowledge that it has been discussed with you and that you have had an opportunity to review it. Performance evaluations are intended to measure the quality and quantity of the work you perform, your effort and attitude, and your ability to work with others. Your evaluation should let you know

areas where improvement is needed and should help you to set goals for your future performance.

#### DRESS CODE

All employees are expected to dress appropriately for work. Your supervisor may assist you in determining what attire is appropriate. Some jobs may have additional restrictions for safety reasons.

#### CELL PHONE USAGE

Personal cell phones should only be used during non-work time. When not in use, cell phones should be either turned off or placed on vibrate so as not to disrupt instruction for students. In case of emergencies, see your immediate supervisor.

#### EMPLOYEE IDENTIFICATION BADGE

As a regular employee, whether full-time or part-time, you will be given an employee identification badge with your picture on it. You are to wear this badge at all times while on your work site. This badge lets all other employees, students, parents, and the public know that you are a staff member. If you need a replacement badge, contact the Communications Office.

This badge can also be used for free admission for yourself and one other person at all home athletic events, except hockey.

When you leave employment with the Davison Community Schools, you are required to surrender this badge to your supervisor as part of the exit interview.

#### ATTENDANCE

Regularity of attendance and punctuality is essential to the orderly performance of our work. As an employee, you are expected to be punctual and regular in your attendance. You are expected to report to work on time and be prepared to start work at your regularly scheduled starting time. You are also expected to remain at work through the end of your schedule except for regularly scheduled breaks or authorized leaves.

Excessive absenteeism whether excused or not is not acceptable. Each situation of excessive absenteeism or tardiness will be evaluated on a case-by-case basis. Failure to call in an absence (no call, no show) is also unacceptable. Excessive absenteeism or a pattern of not calling in an absence will result in discipline up to and including dismissal.

#### STAFF-STUDENT RELATIONS

All district employees are expected to maintain relationships with members of the student body which are conducive to an effective learning environment. All district employees are responsible for the regulation of student conduct.

#### PEANUT (TREE NUT) ALLERGIES

Peanut (tree nut) allergies can be very serious and even fatal. It is **imperative** that you follow the established District guidelines.

Due to increased peanut/tree nut allergies of students and staff, we do not allow peanuts, tree nuts or other nut products in any classroom K-12.

Copies of the Food/Peanut/Tree Nut Allergy Guidelines are posted on the District's website. Please familiarize yourself with these guidelines in order to implement them fully.

#### SENSITIVITIES TO FRAGRANCES

Students, staff, teachers and guests have different sensitivities and/or allergies to scents like perfumes, colognes and diffusers.

Employees should refrain from wearing, spraying or diffusing strong scents and the excess use of fragrances.

## PROCEDURES FOR DEALING WITH THREATS OF STUDENT SUICIDE

When a school employee becomes aware of a student's suicidal tendencies or threats, either directly or through a third party, immediate action is essential. **"Threats" include any indications of possible or contemplated suicide even if not made in the form of a threat.**

### VERBAL

### **WARNING SIGNS**

- + A student is overheard expressing a suicidal wish to another student with comments like: "What's the sense of living?" OR "I just feel like I could die," OR "I'd rather die than...(go to school, to Dad's, etc.)," OR as one young child said, "I'd like to fall off the face of the world."
- + A direct report is made to you by the student that he/she wants to die.
- + Another person reports that he/she is concerned because a student is talking about or writing about committing suicide.

### WRITTEN

- + A suicidal ideation is discovered.
- + Notes or other writings are interrupted that express a desire to die.
- + Drawings or words on folders, books covers, etc. that could exemplify suicide

### OTHER

- + Signs, self-mutilation—slashes, markings, carvings on a student's body—many times on the arm or wrist area.
- + Giving away important possessions, marked changes in mood, academic performance, and social interactions.
- + School crisis (such as death or suicide of student)
- + Signs of depression and overwhelming stress.
- + Isolation/withdraw from peers and activities.
- + Use of alcohol and/or other drugs
- + Previous suicide attempts
- + Low self-esteem which is atypical for age/gender.

## **STEPS TO TAKE:**

1. If a staff member knows that a student is "threatening" suicide, **immediate** notification by phone to the building principal and/or school counselor is required. (Both principal and counselor should know.)
2. The principal and/or counselor will immediately meet with the student to assess the situation.
3. Before and after parents are contacted about a valid suicide threat or attempt, the student should be supervised at all times by a school administrator or a designee with appropriate training. The student should not be left alone after making a suicide threat which appears to be imminent in nature. If the threat is deemed as credible/imminent, the student should be released to the parents or guardians after the school official has had an opportunity to brief them on the threat(s) and the school's actions.
4. Valid suicide threats are to be reported to Director of Student Services by principal and/or counselor.
5. The principal or counselor will then promptly notify parents or guardians. (See warning signs in the box above)
6. School officials will follow up the verbal exchange with a written notice to the parents, and retain a copy for school records. (Counselor's confidential student file)
7. A copy of the Suicide Notice is to be sent to the Director of Student Services.
8. Finally, the family is to receive information from appropriately trained school personnel regarding community resources, such as Genesee Health Systems Crisis Center at (810) 257-3740.



## **Davison Community Schools**

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### **Suicide Threat and Threats to Harm Self or Others Staff Procedures**

- Time is critical in these situations. If you receive any communication from a student or his/her parent/guardian, or staff regarding the potential threat of suicide or harm to self or others, please CALL your building counselor IMMEDIATELY.
- If you're unable to reach the building counselor, you are to call your building administrator. If you are unable to reach them, call Amy Chorley, Director of Student Services on her cell phone: (810) 955-9071. Be sure to CALL; please do not text or email.
- If you believe the threat is immediate, CALL 911, then call your counselor?
  - When calling 911 you will need to be prepared to provide the following information:
    - Your name, position and phone number
    - The student's name, age, address (All found in Synergy) or staff member
    - The parent's name, phone number (In Synergy)
    - The name of the person who reported the threat to you
- Building Administrators: if a staff member reports a potential threat of suicide/harm to self or others, CALL Amy Chorley, Director of Student Services on her cell phone (810) 955-9071|
  - If you believe the threat is immediate, CALL 911, then call Amy Chorley.
- Building Administrator and Amy Chorley will create a plan of action. The following will be part of the action plan:
  - Counselor will contact parent/guardian of student or staff member's family
  - Building counselor will contact building administrator and Amy Chorley
  - Amy Chorley will contact police
  - Amy Chorley will contact Superintendent Brown and/or Asst. Superintendent Lobban

#### **ALL STAFF - PLEASE BE AWARE**

- **VERY IMPORTANT:** Please understand that we are all mandated reporters and waiting to report potentially dangerous situations is not an option.
  - For example: if you open an email at 10:00PM from a parent/guardian or student or staff member and someone is in danger, the act of opening the email has now made you responsible. Threats CANNOT wait until the morning.

FOR STAFF: This continues to be a very difficult time for everyone and self care is also important. We will all encounter different levels of stress and we will all process the events we are faced with personally and individually.

If you have any thoughts of self harm, please call the **National Suicide Hotline, 1-800-273-8255** or reach out to your building supervisor or administrators.

### THREATS TO STUDENTS

Any district employee who threatens to inflict, inflicts, or causes to be inflicted, deliberate physical pain by any means to any student, may be disciplined according to provisions which may be found in the current negotiated master contract or as prescribed by the board.

Employees found to be in violation of this policy by the board may be subject to: a letter of reprimand, probation, suspension, and/or termination of employment.

### SCHOOL SAFETY LAW REQUIREMENTS FROM EMPLOYEES

School employees are to self-report to the school district and the Michigan Department of Education if charged/arraigned with any felony and/or certain misdemeanors. This must be reported within three business days of arraignment or the employee will be guilty of an additional crime and may be subject to termination of employment.

### REASONABLE ASSURANCE

The school district has regularly scheduled breaks, including the summer break, during its normal year. These breaks occur when school is not in session or in recess. During these breaks, the district provides you the assurance, in good faith, that you will return to work in the same or similar position at the completion of that break or recess. When you return to work at the completion of that break or recess, the district has validated your continuing employment.

An employee who is paid unemployment compensation benefits, chargeable to the district during the summer and who is subsequently recalled to a position during the next school year, within ten working days of the beginning of the next school year, shall have his/her compensation adjusted by the gross dollar amount of the unemployment compensation benefits received for all periods and/or days during the summer recess.

### PAYROLL CALENDAR

Each year the Payroll Department provides a list of the anticipated pay dates for the school year.

### SCHOOL CALENDAR

Each year the district defines a school calendar that is made available to all employees. Consult the district website at [www.davisonschools.org](http://www.davisonschools.org) for updates.

## CANCELLATION OF SCHEDULED WORK DAY

✓ *Employees Covered by a Collective Bargaining Agreement:* When an employee's scheduled work day is cancelled due to inclement weather or other conditions beyond the Employer's control, the employee will not be required to report except as required by the Employer or the employee's Master Agreement. If you are a member of a bargaining unit, consult your master agreement for the specifics on payment/non-payment on these days.

✓ *Employees Not Covered by a Collective Bargaining Agreement:* Consult your supervisor for the proper procedure to follow when your scheduled work day is cancelled.

✓ If the district has to make up any scheduled work day that was cancelled, the necessary staff will be required to work and will be compensated at that time.

## EMPLOYMENT DOCUMENTS

### ➤ APPLICATION

A completed application must be on file. You must enter all previous employers separately and may add additional hand-written or typed pages (attaching a resume in lieu of completion of the information is not acceptable).

### ➤ TAX FORMS – STATE & FEDERAL INCOME TAX WITHHOLDING

If your tax status changes as a result of marriage, divorce, or dependent status at any time, please advise the Business Office so that new forms may be provided for completion.

### ➤ IMMIGRATION FORM (I-9)

The United States Department of Justice requires every employee to complete an I-9 form to verify employment eligibility. Supporting documents are required, customarily a photocopy of your driver's license and a social security card.

### ➤ RETIREMENT BENEFICIARY NOMINATION

As a public school employee, you are automatically a member of the Michigan Public School Employees Retirement System (MPERS).

### ➤ AUTHORIZATION & RELEASE OF PERSONNEL RECORD INFORMATION

Pursuant to MCL 380-1230(b) and MCL 423,506, all employees must provide authorization for release of personnel record information from prior employer(s) regarding misconduct, acts of immorality, moral turpitude or inappropriate behavior.

### ➤ CRIMINAL CONVICTION HISTORY & FINGERPRINTS

All school staff will be required to have their fingerprints scanned electronically and submitted to the Michigan State Police. Fingerprinting is done at the Genesee Intermediate School District, 2413 West Maple Avenue, Flint, MI 48507, or at the Genesee Township Police Department, 7244 N Genesee Rd, Genesee Township, MI 48437. The employee is responsible for the fingerprinting fee. Once an employee's fingerprints are taken, a criminal history record check will be performed by the Michigan State Police and Federal Bureau of Investigation. A report of the findings will be sent to the Michigan Department of Education, identifying all school employees with a recorded criminal conviction. The Department of Education will, in turn, provide the names of individuals convicted of a crime to the district superintendent and school board of the employing district. The report will include convictions for any crime, misdemeanor or felony. If an employee has been convicted of a "listed offense" (generally sexual misconduct or crimes against children), employment will be terminated. If an employee has been convicted of a non-listed felony, the district superintendent and school board are required by law to agree in writing to continue employment. Student employees not required to be fingerprinted must authorize an I-CHAT search which allows the district to do a criminal records search online through the Michigan State Police Department.

### ➤ DIRECT DEPOSIT FORM

All employees of Davison Community Schools are required to participate in Direct Deposit.



## DAVISON COMMUNITY SCHOOLS

### FMLA LEAVE REQUEST FORM

(The following request is to be completed and returned to the Personnel Office.)

#### EMPLOYEE REQUEST

Employee's Name \_\_\_\_\_

Employee's Position \_\_\_\_\_

Date \_\_\_\_\_

- ☐ Yes      ☐ No      Counting any periods of time you worked for Davison Community Schools (whether they were consecutive or not), have you worked for Davison Schools for a total of 12 months or more? (If "yes," continue to next question. If "no," stop here.)
- ☐ Yes      ☐ No      During the past 12 months, have you worked at least 1,250 hours (approximately 8 months of 40-hour weeks or one year of 25-hour weeks)? If "yes," continue. If "no," stop here.

#### Request for Full-Time Leave

I am requesting a leave of absence from \_\_\_\_\_ (date) to \_\_\_\_\_ (date) for the following reason:

*Please mark one of the boxes below:*

- ☐ The birth of a child and/or to care for the newborn child.
- ☐ For placement of a child with you for adoption or foster care.
- ☐ Your own serious health condition.
- ☐ Because you are needed to care for your (*circle one*): spouse, child or parent with a serious health condition.
- ☐ Because of a qualifying exigency arising out of the fact that your (*circle one*) spouse, son or daughter, parent is on military active duty or call to active duty status.
- ☐ Because you are the (*circle one*) spouse, son or daughter, parent, next of kin of a covered servicemember with a serious injury or illness.

#### Request for Intermittent Leave

- ☐ I request intermittent leave at the following times:

Schedule: \_\_\_\_\_

Reason: \_\_\_\_\_

#### Leave Designation

I request to use (check all that apply):

- ☐ Paid Sick Time      ☐ Unpaid FMLA Leave Time      ☐ Combination of Paid and Unpaid Time

I can be reached at the following address and phone number during my leave:

\_\_\_\_\_

Employee Signature: \_\_\_\_\_

## **COPY OF DAVISON COMMUNITY SCHOOL DISTRICT BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN**

In accordance with the OSHA Bloodborne Pathogens standard, a copy of the Davison Community School District Bloodborne Pathogens Exposure Control Plan is available for all staff to review in the District Personnel Office.

At the time of employment, you are given instructions on how to view bloodborne pathogen information online through the Vector Solutions Online Training website.

## EMPLOYEE'S RESPONSIBILITIES REGARDING EMPLOYEE INJURY/ACCIDENT

1. You are to report the injury/accident to your supervisor immediately. If the supervisor is not on duty, you are to report the injury/accident to the Personnel Office.
2. An EMPLOYEE INJURY/ACCIDENT REPORT form is to be filled out in its entirety, and requires your signature in your own writing. Following completion, the form is to be submitted to your supervisor within 24 hours of the injury/accident whenever practicable.
3. If you feel that medical treatment is needed, you are to obtain an AUTHORIZATION FOR MEDICAL SERVICES form from your building/department's main office. You must then report to an authorized district medical clinic-HURLEY URGENT CARE (at these locations):

### **Grand Blanc**

5494 S. Dort Hwy

810.262.7731

HOURS: M-F 10-8; Sat & Sun: 10-6

### **Durand (no x-ray)**

8759 Monroe Rd.

810.262.2710

HOURS: M-F 10-8; Sat & Sun: 10-6

### **Burton (no x-ray)**

G-2065 S. Center Rd.

810.262.2360

HOURS: M-F 10-10; Sat & Sun: 10-6

### **Hurley Medical Center–Urgent Care**

One Hurley Plaza

8<sup>th</sup> Ave/Patrick St. Entrance

810.262.6744

HOURS: M-F 10-10;

You are REQUIRED to obtain your initial treatment and follow-up exams at the authorized district medical clinic for the first ten (10) days following the injury/accident.

4. All billings related to the injury/accident are to be sent directly to:

Davison Community Schools

Attn: Benefits Coordinator

1490 N. Oak Road

Davison, Michigan 48423

5. You must make sure that you have a doctor's note indicating the diagnosis, current treatment, follow-up treatment, and the length of time you are expected to be off work. It is to your advantage that all items of concern related to your injury/ accident are in writing. Medical documentation is to be forwarded to the Benefits Coordinator in the Personnel Office.

6. Worker's Compensation will be paid according to the State of Michigan Worker's Disability Compensation Act and the master agreement between your bargaining unit and the Davison Community School District Board of Education.

*Employee injuries are to be treated in a serious manner regardless of observable severity. The above procedure is to be followed in a prompt manner following the injury/accident.*

## RIGHT TO KNOW HAZARD COMMUNICATION STANDARD

The Michigan Occupational Safety and Health Act (MIOSHA) was amended in 1986 to include adoption of the Federal Occupational Safety and Health Act (OSHA) Hazard Communication Standard (29 CFR 1910.1200 (e) (L) (ii)), also known as the Michigan Right to Know Law. Right to Know requires any employee who may be exposed to hazardous chemicals when working be provided information and training prior to assignment with working with a hazardous chemical.

Appendix E to § 1910.1200 states:

Employees have both a need and a right to know the hazards and identities of what chemicals they are exposed to when working. They also need to know what protective measures are available to prevent adverse effects from occurring.

You will receive the instruction materials for the online training when you complete your payroll paperwork. You will have 10 days to complete this training module. There are computers available in each building in the media center. You may complete this training on paid work time. You may opt to use your home computer if you wish, but it will be unpaid time.

As the employer, we are required to maintain Material Safety Data Sheets (MSDS) on all chemicals used in your workplace. You may view the MSDS at any time by contacting your Building Principal or Custodial Supervisor. You are given a copy of the Davison Community Schools Written Hazard Communication Program when you complete your payroll paperwork.

## TAX-SHELTERED ANNUITY PROGRAMS

All employees, with the exception of private contractors, appointed/elected trustees and/or school board members and student workers, are eligible to participate in the 403(b) plan (tax sheltered annuity) immediately upon employment. Employees may make voluntary elective deferrals to the 403(b) plan. Participants are fully vested in their contributions and earnings at all times.

Information regarding this can be found on the website under the employee benefits link on the staff page.

## MICHIGAN PUBLIC SCHOOL EMPLOYEES RETIREMENT SYSTEM

As an employee of a public school system in the State of Michigan, by law you are a member of the Michigan Public School Employees Retirement System.

Information can be obtained on the website of the ORS, Office of Retirement Services, at [www.michigan.gov/ors](http://www.michigan.gov/ors).

## NOTICE OF COBRA CONTINUATION COVERAGE RIGHTS

### Introduction

You're getting this notice because you recently gained coverage under a group health plan (the Plan). This notice has important information about your right to COBRA continuation coverage, which is a temporary extension of coverage under the Plan. **This notice explains COBRA continuation coverage, when it may become available to you and your family, and what you need to do to protect your right to get it.** When you become eligible for COBRA, you may also become eligible for other coverage options that may cost less than COBRA continuation coverage.

The right to COBRA continuation coverage was created by a federal law, the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA). COBRA continuation coverage can become available to you and other members of your family when group health coverage would otherwise end. For more information about your rights and obligations under the Plan and under federal law, you should review the Plan's Summary Plan Description or contact the Plan Administrator.

**You may have other options available to you when you lose group health coverage.** For example, you may be eligible to buy an individual plan through the Health Insurance Marketplace. By enrolling in coverage through the Marketplace, you may qualify for lower costs on your monthly premiums and lower out-of-pocket costs. Additionally, you may qualify for a 30-day special enrollment period for another group health plan for which you are eligible (such as a spouse's plan), even if that plan generally doesn't accept late enrollees.

### What is COBRA continuation coverage?

COBRA continuation coverage is a continuation of Plan coverage when it would otherwise end because of a life event. This is also called a "qualifying event." Specific qualifying events are listed later in this notice. After a qualifying event, COBRA continuation coverage must be offered to each person who is a "qualified beneficiary." You, your spouse, and your dependent children could become qualified beneficiaries if coverage under the Plan is lost because of the qualifying event. Under the Plan, qualified beneficiaries who elect COBRA continuation coverage must pay for COBRA continuation coverage.

If you're an employee, you'll become a qualified beneficiary if you lose your coverage under the Plan because of the following qualifying events:

- Your hours of employment are reduced, or
- Your employment ends for any reason other than your gross misconduct.

If you're the spouse of an employee, you'll become a qualified beneficiary if you lose your coverage under the Plan because of the following qualifying events:

- Your spouse dies;
- Your spouse's hours of employment are reduced;
- Your spouse's employment ends for any reason other than his or her gross misconduct;
- Your spouse becomes entitled to Medicare benefits (under Part A, Part B, or both); or
- You become divorced or legally separated from your spouse.

Your dependent children will become qualified beneficiaries if they lose coverage under the Plan because of the following qualifying events:

- The parent-employee dies;
- The parent-employee's hours of employment are reduced;
- The parent-employee's employment ends for any reason other than his or her gross misconduct;
- The parent-employee becomes entitled to Medicare benefits (Part A, Part B, or both);
- The parents become divorced or legally separated; or
- The child stops being eligible for coverage under the Plan as a "dependent child."

### **When is COBRA continuation coverage available?**

The Plan will offer COBRA continuation coverage to qualified beneficiaries only after the Plan Administrator has been notified that a qualifying event has occurred. The employer must notify the Plan Administrator of the following qualifying events:

- The end of employment or reduction of hours of employment;
  - Death of the employee;
- or
- The employee's becoming entitled to Medicare benefits (under Part A, Part B, or both).

**For all other qualifying events (divorce or legal separation of the employee and spouse or a dependent child's losing eligibility for coverage as a dependent child), you must notify the Plan Administrator within 60 days after the qualifying event occurs. Notice must be provided to Davison Community Schools, Employee Benefits, 1490 N. Oak Road, Davison, MI 48423.**

Keeping an individual covered by the health plan beyond what is allowed by the plan will be considered insurance fraud on the part of the employee.

### **How is COBRA continuation coverage provided?**

Once the Plan Administrator receives notice that a qualifying event has occurred, COBRA continuation coverage will be offered to each of the qualified beneficiaries. Each qualified beneficiary will have an independent right to elect COBRA continuation coverage. Covered employees may elect COBRA continuation coverage on behalf of their spouses, and parents may elect COBRA continuation coverage on behalf of their children. If a qualified beneficiary elects continuation coverage, they will be required to pay the entire cost for the group health insurance, plus a 2% administration fee. Should coverage change or be modified for non-COBRA participants, then the change and/or modification will be made to your coverage as well.

COBRA continuation coverage is a temporary continuation of coverage that generally lasts for 18 months due to employment termination or reduction of hours of work. Certain qualifying events, or a second qualifying event during the initial period of coverage, may permit a beneficiary to receive a maximum of 36 months of coverage.

There are also ways in which this 18-month period of COBRA continuation coverage can be extended:

***Disability extension of 18-month period of COBRA continuation coverage***

If you or anyone in your family covered under the Plan is determined by Social Security to be disabled and you notify the Plan Administrator in a timely fashion, you and your entire family may be entitled to get up to an additional 11 months of COBRA continuation coverage, for a maximum of 29 months. The disability would have to have started at some time before the 60th day of COBRA continuation coverage and must last at least until the end of the 18-month period of COBRA continuation coverage. It is the qualified beneficiary's responsibility to obtain this disability determination from the Social Security Administration and provide a copy of the determination according to the below listed notification procedures within 60 days after the date of determination and before the original 18 months expire. Notice must be provided to Davison Community Schools, Employee Benefits, 1490 N. Oak Road, Davison, MI 48423.

***Second qualifying event extension of 18-month period of continuation coverage***

If your family experiences another qualifying event during the 18 months of COBRA continuation coverage, the spouse and dependent children in your family can get up to 18 additional months of COBRA continuation coverage, for a maximum of 36 months, if the Plan is properly notified about the second qualifying event. This extension may be available to the spouse and any dependent children getting COBRA continuation coverage if the employee or former employee dies; becomes entitled to Medicare benefits (under Part A, Part B, or both); gets divorced or legally separated; or if the dependent child stops being eligible under the Plan as a dependent child. This extension is only available if the second qualifying event would have caused the spouse or dependent child to lose coverage under the Plan had the first qualifying event not occurred.

**Are there other coverage options besides COBRA Continuation Coverage?**

Yes. Instead of enrolling in COBRA continuation coverage, there may be other coverage options for you and your family through the Health Insurance Marketplace, Medicaid, or other group health plan coverage options (such as a spouse's plan) through what is called a "special enrollment period." Some of these options may cost less than COBRA continuation coverage. You can learn more about many of these options at [www.healthcare.gov](http://www.healthcare.gov).

**If you have questions**

Questions concerning your Plan or your COBRA continuation coverage rights should be addressed to the contact or contacts identified below. For more information about your rights under the Employee Retirement Income Security Act (ERISA), including COBRA, the Patient Protection and Affordable Care Act, and other laws affecting group health plans, contact the nearest Regional or District Office of the U.S. Department of Labor's Employee Benefits Security Administration (EBSA) in your area or visit [www.dol.gov/ebsa](http://www.dol.gov/ebsa). (Addresses and phone numbers of Regional and District EBSA Offices are available through EBSA's website.) For more information about the Marketplace, visit [www.HealthCare.gov](http://www.HealthCare.gov).

**Keep your Plan informed of address changes**

To protect your family's rights, let the Plan Administrator know about any changes in the addresses of family members. You should also keep a copy, for your records, of any notices you send to the Plan Administrator.

**Plan contact information**

Information can be obtained from Kathy Morris, Employee Benefits Secretary, Davison Community Schools, 1490 N. Oak Road, Davison, MI 48423, (810) 591-3373 about medical, dental and vision insurance coverage along with COBRA continuation coverage.

## STATE AND FEDERAL LAWS AND RELATED DISTRICT POLICIES

- EQUAL EMPLOYMENT OPPORTUNITY
- FEDERAL MINIMUM WAGE
- MICHIGAN MINIMUM WAGE
- FAMILY AND MEDICAL LEAVE ACT (FMLA)
- JOB SAFETY & HEALTH PROTECTION
- MICHIGAN SAFETY & HEALTH PROTECTION ON THE JOB
- POLYGRAPH PROTECTION ACT
- LEGAL REQUIREMENTS GOVERNING EMPLOYMENT OF MINORS
- WHISTLEBLOWER PROTECTION ACT
- MICHIGAN EMPLOYMENT SECURITY ACT
- PAID MEDICAL LEAVE ACT (PMLA)
- FAMILY EDUCATION RIGHTS AND PRIVACY ACT
- HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996 (HIPPA)
- EMPLOYEE CRIMINAL OFFENSE CHART
- ARRAIGNMENT DISCLOSURE FORM
- STATE COURT CONVICTION DISCLOSURE FORM



# Know Your Rights: Workplace Discrimination is Illegal

The U.S. Equal Employment Opportunity Commission (EEOC) enforces Federal laws that protect you from discrimination in employment. If you believe you've been discriminated against at work or in applying for a job, the EEOC may be able to help.

## Who is Protected?

- Employees (current and former), including managers and temporary employees
- Job applicants
- Union members and applicants for membership in a union

## What Types of Employment Discrimination are Illegal?

Under the EEOC's laws, an employer may not discriminate against you, regardless of your immigration status, on the bases of:

- Race
- Color
- Religion
- National origin
- Sex (including pregnancy, childbirth, and related medical conditions, sexual orientation, or gender identity)
- Age (40 and older)
- Disability
- Genetic information (including employer requests for, or purchase, use, or disclosure of genetic tests, genetic services, or family medical history)
- Retaliation for filing a charge, reasonably opposing discrimination, or participating in a discrimination lawsuit, investigation, or proceeding
- Interference, coercion, or threats related to exercising rights regarding disability discrimination or pregnancy accommodation

## What Organizations are Covered?

- Most private employers
- State and local governments (as employers)
- Unions
- Staffing agencies
- Educational institutions (as employers)

## What Employment Practices can be Challenged as Discriminatory?

All aspects of employment, including:

- Discharge, firing, or lay-off
- Harassment (including unwelcome verbal or physical conduct)
- Hiring or promotion
- Assignment
- Pay (unequal wages or compensation)
- Failure to provide reasonable accommodation for a disability; pregnancy, childbirth, or related medical condition; or a sincerely-held religious belief, observance or practice
- Benefits
- Job training
- Classification
- Referral
- Obtaining or disclosing genetic information of employees
- Requesting or disclosing medical information of employees
- Conduct that might reasonably discourage someone from opposing discrimination, filing a charge, or participating in an investigation or proceeding
- Conduct that coerces, intimidates, threatens, or interferes with someone exercising their rights, or someone assisting or encouraging someone else to exercise rights, regarding disability discrimination (including accommodation) or pregnancy accommodation

## What can You Do if You Believe Discrimination has Occurred?

Contact the EEOC promptly if you suspect discrimination. Do not delay, because there are strict time limits for filing a charge of discrimination (180 or 300 days, depending on where you live/work). You can reach the EEOC in any of the following ways:

**Submit** an inquiry through the EEOC's public portal:  
<https://publicportal.eeoc.gov/Portal/Login.aspx>

**Call** 1-800-669-4000 (toll free)  
1-800-669-6820 (TTY)  
1-844-234-5122 (ASL video phone)

**Visit** an EEOC field office (information at [www.eeoc.gov/field-office](http://www.eeoc.gov/field-office))

**E-Mail** [info@eeoc.gov](mailto:info@eeoc.gov)

Additional information about the EEOC, including information about filing a charge of discrimination, is available at [www.eeoc.gov](http://www.eeoc.gov).



## EMPLOYERS HOLDING FEDERAL CONTRACTS OR SUBCONTRACTS

The Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) enforces the nondiscrimination and affirmative action commitments of companies doing business with the Federal Government. If you are applying for a job with, or are an employee of, a company with a Federal contract or subcontract, you are protected under Federal law from discrimination on the following bases:

### Race, Color, Religion, Sex, Sexual Orientation, Gender Identity, National Origin

Executive Order 11246, as amended, prohibits employment discrimination by Federal contractors based on race, color, religion, sex, sexual orientation, gender identity, or national origin, and requires affirmative action to ensure equality of opportunity in all aspects of employment.

### Asking About, Disclosing, or Discussing Pay

Executive Order 11246, as amended, protects applicants and employees of Federal contractors from discrimination based on inquiring about, disclosing, or discussing their compensation or the compensation of other applicants or employees.

### Disability

Section 503 of the Rehabilitation Act of 1973, as amended, protects qualified individuals with disabilities from discrimination in hiring, promotion, discharge, pay, fringe benefits, job training, classification, referral, and other aspects of employment by Federal contractors. Disability discrimination includes not making reasonable accommodation to the known physical or mental limitations of an otherwise qualified individual with a disability who is an applicant or employee, barring undue hardship to the employer. Section 503 also requires that Federal contractors take affirmative action to employ and advance in employment qualified individuals with disabilities at all levels of employment, including the executive level.

### Protected Veteran Status

The Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended, 38 U.S.C. 4212, prohibits employment discrimination against, and requires affirmative action to recruit, employ, and advance in employment, disabled veterans, recently separated veterans (i.e., within three years of discharge or release from active duty), active duty wartime or campaign badge veterans, or Armed Forces service medal veterans.

### Retaliation

Retaliation is prohibited against a person who files a complaint of discrimination, participates in an OFCCP proceeding, or otherwise opposes discrimination by Federal contractors under these Federal laws.

Any person who believes a contractor has violated its nondiscrimination or affirmative action obligations under OFCCP's authorities should contact immediately:

The Office of Federal Contract Compliance Programs (OFCCP)  
U.S. Department of Labor  
200 Constitution Avenue, N.W.  
Washington, D.C. 20210  
1-800-397-6251 (toll-free)

If you are deaf, hard of hearing, or have a speech disability, please dial 7-1-1 to access telecommunications relay services. OFCCP may also be contacted by submitting a question online to OFCCP's Help Desk at <https://ofccphelpdesk.dol.gov/s/>, or by calling an OFCCP regional or district office, listed in most telephone directories under U.S. Government, Department of Labor and on OFCCP's "Contact Us" webpage at <https://www.dol.gov/agencies/ofccp/contact>.

## PROGRAMS OR ACTIVITIES RECEIVING FEDERAL FINANCIAL ASSISTANCE

### Race, Color, National Origin, Sex

In addition to the protections of Title VII of the Civil Rights Act of 1964, as amended, Title VI of the Civil Rights Act of 1964, as amended, prohibits discrimination on the basis of race, color or national origin in programs or activities receiving Federal financial assistance. Employment discrimination is covered by Title VI if the primary objective of the financial assistance is provision of employment, or where employment discrimination causes or may cause discrimination in providing services under such programs. Title IX of the Education Amendments of 1972 prohibits employment discrimination on the basis of sex in educational programs or activities which receive Federal financial assistance.

### Individuals with Disabilities

Section 504 of the Rehabilitation Act of 1973, as amended, prohibits employment discrimination on the basis of disability in any program or activity which receives Federal financial assistance. Discrimination is prohibited in all aspects of employment against persons with disabilities who, with or without reasonable accommodation, can perform the essential functions of the job.

If you believe you have been discriminated against in a program of any institution which receives Federal financial assistance, you should immediately contact the Federal agency providing such assistance.

(Revised 6/27/2023)

# EMPLOYEE RIGHTS UNDER THE FAIR LABOR STANDARDS ACT

## FEDERAL MINIMUM WAGE

# \$7.25

 PER HOUR

BEGINNING JULY 24, 2009

The law requires employers to display this poster where employees can readily see it.

### OVERTIME PAY

At least 1½ times the regular rate of pay for all hours worked over 40 in a workweek.

### CHILD LABOR

An employee must be at least 16 years old to work in most non-farm jobs and at least 18 to work in non-farm jobs declared hazardous by the Secretary of Labor. Youths 14 and 15 years old may work outside school hours in various non-manufacturing, non-mining, non-hazardous jobs with certain work hours restrictions. Different rules apply in agricultural employment.

### TIP CREDIT

Employers of "tipped employees" who meet certain conditions may claim a partial wage credit based on tips received by their employees. Employers must pay tipped employees a cash wage of at least \$2.13 per hour if they claim a tip credit against their minimum wage obligation. If an employee's tips combined with the employer's cash wage of at least \$2.13 per hour do not equal the minimum hourly wage, the employer must make up the difference.

### PUMP AT WORK

The FLSA requires employers to provide reasonable break time for a nursing employee to express breast milk for their nursing child for one year after the child's birth each time the employee needs to express breast milk. Employers must provide a place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public, which may be used by the employee to express breast milk.

### ENFORCEMENT

The Department has authority to recover back wages and an equal amount in liquidated damages in instances of minimum wage, overtime, and other violations. The Department may litigate and/or recommend criminal prosecution. Employers may be assessed civil money penalties for each willful or repeated violation of the minimum wage or overtime pay provisions of the law. Civil money penalties may also be assessed for violations of the FLSA's child labor provisions. Heightened civil money penalties may be assessed for each child labor violation that results in the death or serious injury of any minor employee, and such assessments may be doubled when the violations are determined to be willful or repeated. The law also prohibits retaliating against or discharging workers who file a complaint or participate in any proceeding under the FLSA.

### ADDITIONAL INFORMATION

- Certain occupations and establishments are exempt from the minimum wage, and/or overtime pay provisions.
- Special provisions apply to workers in American Samoa, the Commonwealth of the Northern Mariana Islands, and the Commonwealth of Puerto Rico.
- Some state laws provide greater employee protections; employers must comply with both.
- Some employers incorrectly classify workers as "independent contractors" when they are actually employees under the FLSA. It is important to know the difference between the two because employees (unless exempt) are entitled to the FLSA's minimum wage and overtime pay protections and correctly classified independent contractors are not.
- Certain full-time students, student learners, apprentices, and workers with disabilities may be paid less than the minimum wage under special certificates issued by the Department of Labor.



WAGE AND HOUR DIVISION  
UNITED STATES DEPARTMENT OF LABOR

1-866-487-9243  
[www.dol.gov/agencies/whd](http://www.dol.gov/agencies/whd)



WH1088 REV 0423



GRETCHEN WHITMER  
GOVERNOR

## Michigan Department of Labor and Economic Opportunity

### Wage and Hour Division

PO Box 30476

Lansing, MI 48909-7976

### REQUIRED POSTER

### GENERAL REQUIREMENTS - MINIMUM WAGE and OVERTIME



SUSAN CORBIN  
DIRECTOR

Coverage				
The Improved Workforce Opportunity Wage Act (IWOWA), Public Act 337 of 2018, as amended, covers employers who employ 2 or more employees 16 years of age and older.				
Minimum Hourly Wage Rate				
Employees must be paid at least:				
Effective Date	Minimum Hourly Wage Rate	Tipped Employee		85%** Rate
		Minimum Hourly Rate	Reported Average Hourly Tips	
January 1, 2021	\$9.65*	\$3.67	\$5.98	\$8.20
January 1, 2022	\$9.87*	\$3.75	\$6.12	\$8.39
January 1, 2023	\$10.10*	\$3.84	\$6.26	\$8.59
<small>*An increase in the minimum hourly wage rate as prescribed in subsection (1) does not take effect if the unemployment rate for this state, as determined by the Bureau of Labor Statistics, United States Department of Labor, is 8.5% or greater for the calendar year preceding the calendar year of the prescribed increase. An increase in the minimum hourly wage rate as prescribed in subsection (1) that does not take effect pursuant to this subsection takes effect in the first calendar year following a calendar year for which the unemployment rate for this state, as determined by the Bureau of Labor Statistics, United States Department of Labor, is less than 8.5%.</small>				
▶ **Minors 16-17 years of age may be paid 85% of the minimum hourly wage rate.				
Training Wage				
A training wage of \$4.25 per hour may be paid to employees 16 to 19 years of age for the first 90 calendar days of employment.				
Overtime				
Employees covered by the IWOWA must be paid 1-1/2 times their regular rate of pay for hours worked over 40 in a workweek. The following are exempt from overtime requirements: employees exempt from the minimum wage provisions of the Fair Labor Standards Act of 1938, 29 USC 201 to 219 (except certain domestic service employees), professional, administrative, or executive employees; elected officials and political appointees; employees of amusement and recreational establishments operating less than 7 months of the year; agricultural employees, and any employee not subject to the minimum wage provisions of the act.				
Compensatory Time				
If an employer meets certain conditions, employees may agree to receive compensatory time of 1-1/2 hours for each hour of overtime worked. The agreement must be voluntary, in writing, and obtained before the compensatory time is earned. All compensatory time earned must be paid to an employee. Accrued compensatory time may not exceed 240 hours. Employers must keep a record of compensatory time earned and paid. Contact the Wage and Hour Division for information on the conditions an employer must meet in order to offer compensatory time off in lieu of overtime compensation.				
Equal Pay				
An employer shall not discriminate on the basis of sex by paying employees a rate which is less than the rate paid to employees of the opposite sex for equal work on jobs requiring equal skill, effort, and responsibility performed under similar working conditions - except where payment is pursuant to a seniority system, merit system or system measuring earnings on the basis of quantity or quality of production or a differential other than sex.				
Enforcement				
An employee may either file civil action for recovery of unpaid minimum wages or overtime, or they may file a complaint with the Department of Labor and Economic Opportunity. The department may investigate a complaint and file civil action to collect unpaid wages or overtime due the employee and all employees of an establishment. Recovery under this act can include unpaid minimum wages or overtime, plus an equal additional amount as liquidated damages, costs, and reasonable attorney fees. A civil fine of \$1,000 can be assessed to an employer who does not pay minimum wage or overtime.				

LEO is an equal opportunity employer/program.

Auxiliary aids, services and other reasonable accommodations are available, upon request, to individuals with disabilities.

[www.michigan.gov/wagehour](http://www.michigan.gov/wagehour) • Toll Free 1-855-4MI-WAGE (1-855-464-9243)

WHD 9904 (Revised • 12/2021)

# Your Employee Rights Under the Family and Medical Leave Act

## What is FMLA leave?

The Family and Medical Leave Act (FMLA) is a federal law that provides eligible employees with **job-protected leave** for qualifying family and medical reasons. The U.S. Department of Labor's Wage and Hour Division (WHD) enforces the FMLA for most employees.

Eligible employees can take **up to 12 workweeks** of FMLA leave in a 12-month period for:

- The birth, adoption or foster placement of a child with you,
- Your serious mental or physical health condition that makes you unable to work,
- To care for your spouse, child or parent with a serious mental or physical health condition, and
- Certain qualifying reasons related to the foreign deployment of your spouse, child or parent who is a military servicemember.

An eligible employee who is the spouse, child, parent or next of kin of a covered servicemember with a serious injury or illness **may take up to 26 workweeks** of FMLA leave in a single 12-month period to care for the servicemember.

You have the right to use FMLA leave in **one block of time**. When it is medically necessary or otherwise permitted, you may take FMLA leave **intermittently in separate blocks of time, or on a reduced schedule** by working less hours each day or week. Read Fact Sheet #28M(c) for more information.

FMLA leave is **not paid leave**, but you may choose, or be required by your employer, to use any employer-provided paid leave if your employer's paid leave policy covers the reason for which you need FMLA leave.

## Am I eligible to take FMLA leave?

You are an **eligible employee** if **all** of the following apply:

- You work for a covered employer,
- You have worked for your employer at least 12 months,
- You have at least 1,250 hours of service for your employer during the 12 months before your leave, and
- Your employer has at least 50 employees within 75 miles of your work location.

Airline flight crew employees have different "hours of service" requirements.

You work for a **covered employer** if **one** of the following applies:

- You work for a private employer that had at least 50 employees during at least 20 workweeks in the current or previous calendar year,
- You work for an elementary or public or private secondary school, or
- You work for a public agency, such as a local, state or federal government agency. Most federal employees are covered by Title II of the FMLA, administered by the Office of Personnel Management.

## How do I request FMLA leave?

Generally, to request FMLA leave you **must**:

- Follow your employer's normal policies for requesting leave,
- Give notice at least 30 days before your need for FMLA leave, or
- If advance notice is not possible, give notice as soon as possible.

You **do not have to share a medical diagnosis** but must provide enough information to your employer so they can determine whether the leave qualifies for FMLA protection. You **must also inform your employer if FMLA leave was previously taken** or approved for the same reason when requesting additional leave.

Your **employer may request certification** from a health care provider to verify medical leave and may request certification of a qualifying exigency.

The FMLA does not affect any federal or state law prohibiting discrimination or supersede any state or local law or collective bargaining agreement that provides greater family or medical leave rights.

State employees may be subject to certain limitations in pursuit of direct lawsuits regarding leave for their own serious health conditions. Most federal and certain congressional employees are also covered by the law but are subject to the jurisdiction of the U.S. Office of Personnel Management or Congress.

## What does my employer need to do?

If you are eligible for FMLA leave, your **employer must**:

- Allow you to take job-protected time off work for a qualifying reason,
- Continue your group health plan coverage while you are on leave on the same basis as if you had not taken leave, and
- Allow you to return to the same job, or a virtually identical job with the same pay, benefits and other working conditions, including shift and location, at the end of your leave.

Your **employer cannot interfere with your FMLA rights** or threaten or punish you for exercising your rights under the law. For example, your employer cannot retaliate against you for requesting FMLA leave or cooperating with a WHD investigation.

After becoming aware that your need for leave is for a reason that may qualify under the FMLA, your **employer must confirm whether you are eligible** or not eligible for FMLA leave. If your employer determines that you are eligible, your **employer must notify you in writing**:

- About your FMLA rights and responsibilities, and
- How much of your requested leave, if any, will be FMLA-protected leave.

## Where can I find more information?

Call **1-866-487-9243** or visit **dol.gov/fmla** to learn more.

If you believe your rights under the FMLA have been violated, you may file a complaint with WHD or file a private lawsuit against your employer in court. **Scan the QR code to learn about our WHD complaint process.**



WAGE AND HOUR DIVISION  
UNITED STATES DEPARTMENT OF LABOR

SCAN ME



WH1420 REV 04/23



# Job Safety and Health IT'S THE LAW!

## All workers have the right to:

- A safe workplace.
- Raise a safety or health concern with your employer or OSHA, or report a work-related injury or illness, without being retaliated against.
- Receive information and training on job hazards, including all hazardous substances in your workplace.
- Request a confidential OSHA inspection of your workplace if you believe there are unsafe or unhealthy conditions. You have the right to have a representative contact OSHA on your behalf.
- Participate (or have your representative participate) in an OSHA inspection and speak in private to the inspector.
- File a complaint with OSHA within 30 days (by phone, online or by mail) if you have been retaliated against for using your rights.
- See any OSHA citations issued to your employer.
- Request copies of your medical records, tests that measure hazards in the workplace, and the workplace injury and illness log.

*This poster is available free from OSHA.*

**Contact OSHA. We can help.**

## Employers must:

- Provide employees a workplace free from recognized hazards. It is illegal to retaliate against an employee for using any of their rights under the law, including raising a health and safety concern with you or with OSHA, or reporting a work-related injury or illness.
- Comply with all applicable OSHA standards.
- Notify OSHA within 8 hours of a workplace fatality or within 24 hours of any work-related inpatient hospitalization, amputation, or loss of an eye.
- Provide required training to all workers in a language and vocabulary they can understand.
- Prominently display this poster in the workplace.
- Post OSHA citations at or near the place of the alleged violations.

On-Site Consultation services are available to small and medium-sized employers, without citation or penalty, through OSHA-supported consultation programs in every state.



**1-800-321-OSHA (6742) • TTY 1-877-889-5627 • [www.osha.gov](http://www.osha.gov)**

OSHA 3055-04R (2010)

# MICHIGAN SAFETY AND HEALTH PROTECTION ON THE JOB

THE MICHIGAN OCCUPATIONAL SAFETY AND HEALTH ACT, 1974 P.A. 154, AS AMENDED, REQUIRES POSTING OF THIS DOCUMENT IN A CENTRAL AND CONSPICUOUS LOCATION. FAILURE TO DO SO MAY RESULT IN A PENALTY.

The Michigan Occupational Safety and Health Act (MIOSH Act), Act No. 154 of the Public Acts of 1974, as amended, provides job safety and health protection for Michigan employees through the maintenance of safe and healthful working conditions. Under the MIOSH Act and a state plan approved in September 1973 by the U.S. Department of Labor, the Michigan Department of Labor and Economic Opportunity is responsible for administering the Act. Department representatives conduct job site inspections and investigations to ensure compliance with the Act and with safety and health standards.

The contents of this poster describe many important provisions of the Act. These provisions apply equally to employers and employees in either private industry or the public sector.

## EMPLOYER REQUIREMENTS: MIOSHA requires that each employer:

1. Furnish to each employee employment and a place of employment which is free from recognized hazards that are causing or are likely to cause death or serious physical harm to the employee.
2. Comply with promulgated rules and standards and with orders issued pursuant to the Act.
3. Post this and other notices and use other appropriate measures to keep his or her employees informed of their protection and obligations under the Act, including the provisions of applicable rules and standards.
4. Notify the Michigan Department of Labor and Economic Opportunity within 8 hours of any work-related fatality. Notification may be accomplished by calling 1-800-858-0397.
5. Notify the Michigan Department of Labor and Economic Opportunity within 24 hours of all work-related inpatient hospitalizations, amputations and losses of an eye. Notification may be accomplished by calling 844-464-6742 (4MIOSHA).
6. Make available to employees, for inspection and copying, all medical records and health data in the employer's possession pertaining to that employee.
7. Afford an employee an opportunity with or without compensation to attend all meetings between the Michigan Department of Labor and Economic Opportunity and the employer relative to any appeal of a citation by the employer.
8. Give the representative of employees the opportunity to accompany the department during the inspection or investigation of a place of employment and to prohibit the suffering of any loss of wages or fringe benefits or discriminate against the representative of employees for time spent participating in the inspection, investigation, or opening and closing conferences.
9. Provide personal protective equipment, at the employer's expense, when it is specifically required by a MIOSHA standard.
10. Not permit an employee, other than an employee whose presence is necessary to avoid, correct or remove an imminent danger, to operate equipment or engage in a process which has been tagged by the Department and which is the subject of an order issued by the Department identifying that an imminent danger exists.
11. To promptly notify an employee who was or is being exposed to toxic materials or harmful physical agents in concentrations or at levels which exceed those prescribed by a MIOSHA standard.

## EMPLOYEE REQUIREMENTS: MIOSHA requires that each employee:

1. Comply with promulgated rules and standards and with orders issued pursuant to the Act.
2. Not remove, displace, destroy, or carry off a safeguard furnished or provided for use in a place of employment, or interfere in any way with the use thereof by any other person.

**INSPECTIONS/INVESTIGATIONS:** Inspections and investigations are conducted by trained personnel. The Act requires that an employer representative and a representative of employees be given an opportunity to accompany the department representative for the purpose of aiding in the inspection or investigation.

If a representative of employees does not participate, the department representative will consult with a number of employees concerning matters of safety or health in the place of employment.

**COMPLAINTS:** Employees and employee representatives who believe that an unsafe or unhealthful condition exists in their workplace have the right to request an inspection by giving written notice to the Michigan Department of Labor and Economic Opportunity. If a condition exists which may present an immediate danger, the Department should be notified in the most expedient manner without regard to a written notice. The names of complainants will be kept confidential and not revealed upon the request of the employee. Employees also have the right to bring unsafe or unhealthful conditions to the attention of the department representative during the conduct of an inspection or investigation.

The Act provides that employees may not be discharged or in any manner discriminated against for filing a complaint or exercising any of their rights under the Act. An employee who believes he or she has been discriminated against may file a complaint with the Michigan Department of Labor and Economic Opportunity within 30 days of the alleged discrimination.

The U.S. Department of Labor is monitoring the operation of the Michigan Occupational Safety and Health Administration (MIOSHA) to assure the effective administration of the state act. Any person may make a written complaint regarding the state administration of the state act directly to the Regional Office of OSHA, 230 South Dearborn, Chicago, Illinois 60604.

**CITATIONS:** If upon inspection or investigation the Michigan Department of Labor and Economic Opportunity believes that a requirement of the Act has been violated, a citation alleging such violation and setting a time period for correction will be issued to the employer. The citation must be prominently posted at or near the place of the alleged violation for three days or until the violation is corrected, whichever is later.

The Act provides for first instance penalties of up to \$7,000 for a violation. Penalties of up to \$7,000 per day may be assessed for failure to correct a violation within a proposed abatement period. Any employer who willfully or repeatedly violates the Act may be assessed penalties of up to \$70,000 for each such violation. Employers may appeal the alleged citation, the proposed penalties or the abatement periods to the Department and to the Board of Health and Safety Compliance and Appeals. Employees may appeal the abatement period in a similar manner. Employees also may appeal to the Board of Health and Safety Compliance and Appeals any decision issued by the Department in response to an employer appeal.

Criminal penalties also are provided for in the Act. A person who knowingly makes a false statement or report pursuant to the Act upon conviction is punishable by a fine of up to \$10,000 or may be imprisoned for not more than 6 months or both. Any willful violation resulting in death of an employee, upon conviction, is punishable by a fine of up to \$10,000 or by imprisonment for not more than one year or both. A second conviction doubles the maximum monetary penalty and is punishable by imprisonment for up to three years.

**VOLUNTARY ACTIVITY & COMPLIANCE ASSISTANCE:** The act encourages employers and employees to reduce workplace hazards voluntarily.

The Michigan Department of Labor and Economic Opportunity offers limited on-site consultation assistance to employers to assist them in achieving compliance with occupational safety and health standards. Training specialists are available and can give advice on the correction of hazardous conditions and on the development of safety and health systems. Department staff are available to conduct seminars and training relative to occupational safety and health for both employer and employee groups. Requests for service should be addressed to the department at the address shown below.

The U.S. Department of Labor will continue to enforce federal standards governing maritime operations of long shoring, shipbuilding, ship breaking and ship repairing. These issues are not covered by the Michigan Plan for Occupational Safety and Health.

## MORE INFORMATION:

Michigan Department of Labor and Economic Opportunity  
Michigan Occupational Safety and Health Administration  
530 W. Allegan Street, P.O. Box 30643  
Lansing, Michigan 48909-8143  
[www.michigan.gov/miosha](http://www.michigan.gov/miosha)

**THIS IS AN IMPORTANT DOCUMENT - DO NOT COVER!**



MIOSHA Complaint Hotline ..... 1-800-866-4674  
Fatality Hotline ..... 1-800-858-0397  
MIOSHA Injuries/Illnesses Reporting ..... 1-844-464-6742  
Consultation and Training Assistance ..... 1-517-284-7720

The Michigan Department of Labor and Economic Opportunity (LEO) is an equal opportunity employers/program.



MIOSHA/CET 2010 (06/21)

# EMPLOYEE RIGHTS

## EMPLOYEE POLYGRAPH PROTECTION ACT

**The Employee Polygraph Protection Act prohibits most private employers from using lie detector tests either for pre-employment screening or during the course of employment.**

### PROHIBITIONS

Employers are generally prohibited from requiring or requesting any employee or job applicant to take a lie detector test, and from discharging, disciplining, or discriminating against an employee or prospective employee for refusing to take a test or for exercising other rights under the Act.

### EXEMPTIONS

Federal, State and local governments are not affected by the law. Also, the law does not apply to tests given by the Federal Government to certain private individuals engaged in national security-related activities.

The Act permits polygraph (a kind of lie detector) tests to be administered in the private sector, subject to restrictions, to certain prospective employees of security service firms (armored car, alarm, and guard), and of pharmaceutical manufacturers, distributors and dispensers.

The Act also permits polygraph testing, subject to restrictions, of certain employees of private firms who are reasonably suspected of involvement in a workplace incident (theft, embezzlement, etc.) that resulted in economic loss to the employer.

The law does not preempt any provision of any State or local law or any collective bargaining agreement which is more restrictive with respect to lie detector tests.

### EXAMINEE RIGHTS

Where polygraph tests are permitted, they are subject to numerous strict standards concerning the conduct and length of the test. Examinees have a number of specific rights, including the right to a written notice before testing, the right to refuse or discontinue a test, and the right not to have test results disclosed to unauthorized persons.

### ENFORCEMENT

The Secretary of Labor may bring court actions to restrain violations and assess civil penalties against violators. Employees or job applicants may also bring their own court actions.

**THE LAW REQUIRES EMPLOYERS TO DISPLAY THIS POSTER WHERE EMPLOYEES AND JOB APPLICANTS CAN READILY SEE IT.**



WAGE AND HOUR DIVISION  
UNITED STATES DEPARTMENT OF LABOR

1-866-487-9243  
[www.dol.gov/agencies/whd](http://www.dol.gov/agencies/whd)



WH1462 REV 02/22



STATE OF MICHIGAN

GRETCHEN WHITMER  
GOVERNOR

DEPARTMENT OF LABOR AND ECONOMIC OPPORTUNITY

SUSAN CORBIN  
DIRECTOR

Informational Sheet:  
Youth Employment Standards Act 90 of 1978, as amended

POSTING REQUIREMENT

**MCL 409.110 Minor under 16 years; days and hours of employment.**

**Sec. 10.** A minor under 16 years shall not be employed in an occupation subject to this act for more than 6 days in 1 week, nor for a period longer than a weekly average of 8 hours per day or 48 hours in 1 week, nor more than 10 hours in 1 day. The minor shall not be employed between the hours of 9 p.m. and 7 a.m. A minor who is a student in school shall not be employed more than a combined school and work week of 48 hours during the period when school is in session.

**MCL 409.111 Minor 16 years and over; days and hours of employment; employment in agricultural processing.**

**Sec. 11. (1).** Except as provided in subsection (3), a person shall not employ a minor 16 years of age or older in an occupation subject to this act for more than any of the following periods:

- (a) Six days in 1 week.
- (b) An average of 8 hours per day in 1 week.
- (c) Ten hours in 1 day.
- (d) Subject to subdivision (e), 48 hours in 1 week.
- (e) If the minor is a student in school and school is in session, 24 hours in 1 week.

**(2)** Except as provided in subsection (3), a person shall not employ a minor 16 years of age or older between 10:30 p.m. and 6 a.m. However, except as provided in subsection (3), a person may employ a minor 16 years of age or older who is a student in school until 11:30 p.m. on any of the following days:

- (a) On Fridays and Saturdays.
- (b) During school vacation periods.
- (c) During periods when the minor is not regularly enrolled in school.

**(3)** A person may employ a minor 16 years of age or older in farming operations involved in the production of seed or in agricultural processing for a period greater than the periods described in subsections (1) and (2) if all of the following conditions are met: If a minor is a student in school, the period greater than the periods described in subsections (1) and (2) occurs when school is not in session.

- (a) The minor is employed for not more than 11 hours in 1 day.
- (b) The minor is employed for not more than 62 hours in any week. However, the employer shall not require the minor to work more than 48 hours during any week without the consent of the minor.
- (c) The minor is not employed between 2 a.m. and 5:30 a.m.
- (d) The agricultural processing employer maintains on file a written acknowledgment of the minor's parent or guardian consenting to the period of employment authorized under this subsection.

**(4)** As used in this section:

- (a) "Agricultural processing" means the cleaning, sorting or packaging of fruits or vegetables.
- (b) "Farming operations involved in the production of seed" means farming activities and research involved in the production of seed, including plant detasseling, hand-pollination, roguing, or hoeing, and any other similar farming activity required for commercial seed production.

History: Am. 1978, Act 90, Eff. June 1, 1978 ;-- Am. 1995, Act 251, Eff. Mar. 28, 1996 ;-- Am. 1996, Act 499, Imd. Eff. Jan. 9, 1997 ;-- Am. 2000, Act 418, Imd. Eff. Jan. 8, 2001 ;-- Am. 2011, Act 197, Imd. Eff. Oct. 18, 2011

**MCL 409.112 Meal and rest period.**

**Sec. 12.** A minor shall not be employed for more than 5 hours continuously without an interval of at least 30 minutes for a meal and rest period. An interval of less than 30 minutes shall not be considered to interrupt a continuous period of work.

**MCL 409.112a Prohibition of minors working alone in occupation involving a cash transaction after sunset or 8 p.m. at fixed location.**

**Sec. 12a.** A minor who would otherwise be permitted under this act to be employed in an occupation subject to this act shall not be employed in an occupation that involves a cash transaction subject to this act after sunset or 8 p.m., whichever is earlier, at a fixed location unless an employer or other employee 18 years of age or older is present at the fixed location during those hours.

History: Add. 1980, Act 436, Eff. Mar. 31, 1981.

**IMPORTANT: Administrative Rule, R408.6207 REQUIRES A MINOR SUBJECT TO ACT 90 BE SUPERVISED BY THE EMPLOYER OR ANOTHER EMPLOYEE 18 YEARS OF AGE OR OLDER**

LEO is an equal opportunity employer/program.

Auxiliary aids, services and other reasonable accommodations are available, upon request, to individuals with disabilities.

WAGE AND HOUR DIVISION  
P.O. Box 30476 • Lansing, Michigan 48909-7976  
**OVERNIGHT MAIL ADDRESS: 2407 N. GRAND RIVER • LANSING, MICHIGAN 48906**  
Toll Free: 1-855-4MI-WAGE (1-855-464-9243) • (517) 284-7800 • FAX (517) 763-0110  
[www.michigan.gov/wagehour](http://www.michigan.gov/wagehour)

WHD-9919 08/21

## OSHA's Whistleblower Protection Program

OSHA's Whistleblower Protection Program enforces the provisions of more than 20 federal laws protecting employees from retaliation for, among other things, raising or reporting concerns about hazards or violations of various workplace safety and health, aviation safety, commercial motor carrier, consumer product, environmental, financial reform, food safety, health insurance reform, motor vehicle safety, nuclear, pipeline, public transportation agency, railroad, maritime, securities, tax, antitrust, and anti-money laundering laws. Employees who believe that they have experienced retaliation in violation of one of these laws may file a complaint with OSHA.

### Whistleblower Laws Enforced by OSHA

Following is a list of statutes which OSHA enforces. Each statute has a different time frame in which a complaint can be filed.

- *Anti-Money Laundering Act (90 days)*
- *Asbestos Hazard Emergency Response Act (90 days)*
- *Clean Air Act (30 days)*
- *Comprehensive Environmental Response, Compensation and Liability Act (30 days)*
- *Consumer Financial Protection Act of 2010 (180 days)*
- *Consumer Product Safety Improvement Act (180 days)*
- *Criminal Antitrust Anti-Retaliation Act (180 days)*
- *Energy Reorganization Act (180 days)*
- *Federal Railroad Safety Act (180 days)*
- *Federal Water Pollution Control Act (30 days)*
- *International Safe Container Act (60 days)*
- *Moving Ahead for Progress in the 21st Century Act (motor vehicle safety) (180 days)*
- *National Transit Systems Security Act (180 days)*
- *Occupational Safety and Health Act (OSH Act) (30 days)*
- *Pipeline Safety Improvement Act (180 days)*
- *Safe Drinking Water Act (30 days)*
- *Sarbanes-Oxley Act (180 days)*
- *Seaman's Protection Act (180 days)*
- *Section 402 of the FDA Food Safety Modernization Act (180 days)*
- *Section 1558 of the Affordable Care Act (180 days)*
- *Solid Waste Disposal Act (30 days)*
- *Surface Transportation Assistance Act (180 days)*
- *Taxpayer First Act (180 days)*
- *Toxic Substances Control Act (30 days)*
- *Wendell H. Ford Aviation Investment and Reform Act for the 21st Century (90 days)*

### What Is Retaliation?

Retaliation is an adverse action against an employee because of activity protected by one of these whistleblower laws. Retaliation can involve several types of actions, such as:

- Firing or laying off
- Demoting
- Denying overtime or promotion
- Disciplining
- Denying benefits
- Failing to hire or rehire
- Intimidation or harassment
- Making threats
- Reassignment to a less desirable position or affecting promotion prospects
- Reducing pay or hours
- More subtle actions, such as isolating, ostracizing, mocking, or falsely accusing the employee of poor performance
- Blacklisting (intentionally interfering with an employee's ability to obtain future employment)
- Constructive discharge (quitting when an employer makes working conditions intolerable due to the employee's protected activity)
- Reporting the employee to the police or immigration authorities

### Filing a Complaint

Employees who believe that their employers retaliated against them because they engaged in protected activity should contact OSHA as soon as possible because they must file any complaint within the legal time limits.

An employee can file a complaint with OSHA by visiting or calling their local OSHA office, sending a written complaint to the closest OSHA office, or filing a complaint online. No particular form is required and complaints may be submitted in any language.

Written complaints may be filed by fax, electronic communication, hand delivery during business hours, U.S. mail (confirmation services recommended), or other third-party commercial carrier.

The date of the postmark, fax, electronic communication, telephone call, hand delivery, delivery to a third-party commercial carrier, or in-person filing at an OSHA office is considered the date filed.

To file a complaint electronically, please visit: [www.osha.gov/whistleblower/WBComplaint](http://www.osha.gov/whistleblower/WBComplaint).

To contact an OSHA area office, employees should call 1-800-321-OSHA (6742) to be connected to the closest area office or visit [www.osha.gov/contactus/bystate](http://www.osha.gov/contactus/bystate) to find local OSHA office address and contact information.

When OSHA receives a complaint, OSHA will first review it to determine whether certain basic requirements are met, such as whether the complaint was filed on time. If so, the complaint will be investigated in order to determine whether the employer retaliated against the employee for engaging in activity protected under one of OSHA's whistleblower laws. OSHA may also attempt to assist the employer and employee in reaching a settlement of the case.

Private-sector employees throughout the United States and its territories and employees of the United States Postal Service (USPS) who suffer retaliation because of occupational safety or health activity are covered by section 11(c) of the OSH Act. In addition, private-sector employees are also covered by laws in States which operate their own comprehensive occupational safety and health programs approved by Federal OSHA ("State Plans"). For information on the whistleblower provisions of the 22 State Plan States which cover private-sector employees, visit [www.osha.gov/stateplans](http://www.osha.gov/stateplans).

With the exception of employees of the USPS, public-sector employees (those employed as municipal, county, state, territorial, or federal workers) are not covered by the OSH Act. State and local government employees are covered by the whistleblower provisions of all the States with State Plans, including six States which cover only State and local government employees.

A federal employee who is not a USPS employee who wishes to file a complaint alleging retaliation due to disclosure of a substantial and specific danger to public health or safety or involving a violation of an occupational safety or health standard or regulation should contact the Office of Special Counsel ([www.osc.gov](http://www.osc.gov)). Such federal employees are also covered by their own agency's procedures for remedying such retaliation.

Public-sector employees who are unsure whether they are covered under a whistleblower law should call 1-800-321-OSHA (6742) for assistance, or visit [www.whistleblowers.gov](http://www.whistleblowers.gov).

### Results of the Investigation

If OSHA determines that retaliation in violation of the OSH Act, *Asbestos Hazard Emergency Response Act*, or the *International Safe Container Act* has occurred, the Secretary of Labor may sue in federal district court to obtain relief. If OSHA determines that no retaliation has occurred, it will dismiss the complaint.

Under the other whistleblower laws, if the evidence supports an employee's complaint of retaliation, OSHA will issue an order requiring the employer, as appropriate, to put the employee back to work, pay lost wages, and provide other possible relief. If the evidence does not support the employee's complaint, OSHA will dismiss the complaint. After OSHA issues a decision, the employer and/or the employee may request a full hearing before an administrative law judge of the Department of Labor. The administrative law judge's decision may be appealed to the Department's Administrative Review Board (ARB); in significant cases the Secretary of Labor may review the ARB decision. Aggrieved parties may seek review of final DOL decisions by the courts of appeals.

Under some of the laws, an employee may file the retaliation complaint in federal district court if the Department has not issued a final decision within a specified number of days (180, 210 or 365 depending on the law).

### To Get Further Information

To obtain more information on whistleblower laws, go to [www.whistleblowers.gov](http://www.whistleblowers.gov).

**This is one in a series of informational fact sheets highlighting OSHA programs, policies or standards. It does not impose any new compliance requirements. For a comprehensive list of compliance requirements of OSHA standards or regulations, refer to Title 29 of the Code of Federal Regulations. This information will be made available to sensory-impaired individuals upon request. The voice phone is (202) 693-1999; teletypewriter (TTY) number: (877) 889-5627.**



DWPP FS-3638 08/2022



## UNEMPLOYMENT INSURANCE

### **Notice To All Employees: Information about Unemployment Benefits**

This employer is covered by the

#### **MICHIGAN EMPLOYMENT SECURITY ACT**

Unemployment benefits are payable to qualified and eligible workers of this employer through Michigan's Unemployment Insurance Agency.

#### **File an unemployment claim online**

If you become unemployed, you can file your new unemployment claim or reopen an established claim online through the Michigan Web Account Manager (MiWAM) at [michigan.gov/uiia](https://michigan.gov/uiia). Click on MiWAM for Workers.

A claim for benefits begins the week it is filed. File your claim the first week you become unemployed.

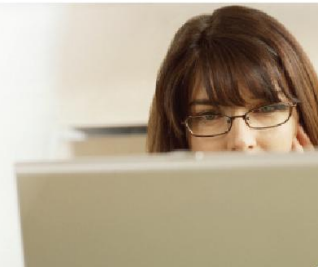
For complete information about your benefit rights and responsibilities, review the Handbook for Unemployed Workers at [michigan.gov/uiia](https://michigan.gov/uiia).

#### **STATE OF MICHIGAN DEPARTMENT OF LABOR AND ECONOMIC OPPORTUNITY UNEMPLOYMENT INSURANCE AGENCY**

UIA is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.

Michigan Department of Labor and Economic Opportunity  
Unemployment Insurance Agency; Authority: Michigan Administrative  
Code, Section R 421.105; Paid for with federal funds.

UIA 1710  
(Rev. 12-19)





GRETCHEN WHITMER  
GOVERNOR

## Michigan Department of Labor and Economic Opportunity

Wage and Hour Division  
PO Box 30476  
Lansing, MI 48909-7976  
REQUIRED POSTER

### GENERAL REQUIREMENTS – PAID MEDICAL LEAVE ACT\*

SUSAN CORBIN  
DIRECTOR

#### Coverage

The Paid Medical Leave Act, 2018 Public Act 338, as amended by 2018 Public Act 369, effective March 29, 2019, covers employers who employ 50 or more individuals. The act covers individuals engaged in service to an employer in the business of the employer and from whom an employer is required to withhold for federal income tax purposes. An eligible employee does not include executive, administrative, and professional overtime exempt employees, employees covered by a private collective bargaining agreement that is in effect, employees of the United States government, another state, or a political subdivision of another state, individuals whose primary work location is not in this state, individuals 16-19 years of age being paid the youth training wage in accordance with the Improved Workforce Opportunity Wage Act, temporary employees as described in the Michigan Employment Security Act, variable hour employees as defined by 26 CFR 54.4980H-1, employees covered by the Railway Labor Act and Railroad Unemployment Insurance Act, individuals employed by an employer for 25 weeks or fewer in a calendar year for a job scheduled for 25 weeks or fewer, individuals who worked, on average, fewer than 25 hours per week during the immediately preceding calendar year. (See section 2 of The Paid Medical Leave Act, 2018 Public Act 338.)

#### Paid Medical Leave Accrual

Paid medical leave accrual begins on March 29, 2019, or upon commencement of the employee's employment, whichever is later. Paid medical leave is accrued at a rate of 1 hour for every 35 actual hours worked; however, an employer is not required to allow accrual of over 1 hour in a calendar week or more than 40 hours in a benefit year. A benefit year is any consecutive 12-month period used by an employer to calculate an eligible employee's benefits. Employees can carry over up to 40 hours of unused accrued paid medical leave from one benefit year to the next; however, employers are not required to allow employees to use more than 40 hours in a single benefit year. An employer may provide the total amount of paid medical leave all at once by providing at least 40 hours at the beginning of the benefit year or on the date that the individual becomes eligible during the benefit year on a prorated basis. If an employer adopts this practice, it does not have to permit employees to carry over unused leave to the next benefit year. (See section 3 of the Paid Medical Leave Act, 2018 Public Act 338.)

#### Paid Medical Leave Usage

An employee may use paid medical leave as it is accrued except an employer may require an employee to wait until the 90<sup>th</sup> calendar day after commencing employment before using accrued paid medical leave. Paid medical leave must be used in 1-hour increments unless the employer has a different increment policy set forth in writing in an employee handbook or other employee benefit document. Employees must follow the employer's usual and customary notice, procedural, and documentation requirements for requesting leave. The employee must be allowed at least 3 days to provide documentation. Employees may take paid medical leave for any of the following:

- Physical or mental illness, injury, or health condition of the employee or his or her family member
- Medical diagnosis, care, or treatment of the employee or employee's family member
- Preventative care of the employee or his or her family member
- Closure of the employee's primary workplace by order of a public official due to a public health emergency
- The care of his or her child whose school or place of care has been closed by order of a public official due to a public health emergency
- The employee's or his or her family member's exposure to a communicable disease that would jeopardize the health of others as determined by health authorities or a health care provider

For domestic violence and sexual assault situations, employees may use paid medical leave for any of the following:

- Medical care or psychological or other counseling
- Receiving services from a victim services organization
- Relocation and obtaining legal services
- Participation in civil or criminal proceedings related to or resulting from the domestic violence or sexual assault

#### Employee Rights

An employee may file a complaint with the Department of Labor and Economic Opportunity (LEO) within 6 months of the alleged violation. LEO shall investigate a complaint and attempt mediation, where appropriate.

#### Penalties

If informal resolution is unsuccessful and a violation found, payment of paid medical leave improperly withheld will be requested and penalties may be imposed. An employer who fails to provide paid medical leave is subject to an administrative fine of not more than \$1,000.00. An employer who willingly violates the posting requirement is subject to an administrative fine of not more than \$100.00 for each separate violation.

\*For precise language of the statute, see Public Act 338 of 2018, as amended

LEO is an equal opportunity employer/program.

Auxiliary aids, services and other reasonable accommodations are available, upon request, to individuals with disabilities.

[www.michigan.gov/wagehour](http://www.michigan.gov/wagehour) • Toll Free 1-855-4MI-WAGE (1-855-464-9243)

WHD 9911 (Revised • 8/2021)

## FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA)

### EDUCATION RECORDS

The Family Education Rights and Privacy Act (FERPA) affords parents and students over 18 years of age (“eligible students”) certain rights with respect to the student’s educational records. They are:

1. The right to inspect and review the student’s education records within 45 days of the day the district receives a request for access.
2. The right to request the amendment of the student’s education records that the parent or eligible student believes are inaccurate or misleading. Parents or eligible students may ask the school district to amend a record that they believe is inaccurate or misleading. If the district decides not to amend the record as requested by the parent or eligible student, the district will notify the parent or eligible student of the decision and advise them of their right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the parent or eligible student when notified of the right to a hearing.
3. The right to consent to disclosures of personally identifiable information contained in the student’s education records, except to the extent that FERPA authorizes disclosure without consent. One exception which permits disclosure without consent is disclosure to school officials with legitimate educational interests. A school official is a person employed by the district as an administrator, supervisor, instructor, or support staff member (including health or medical staff and law enforcement unit personnel); a person serving on the School Board; a person or company with whom the district has contracted to perform a special task (such as an attorney, auditor, medical consultant, or therapist); or a parent or student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks. A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibility. Upon request, the district discloses educational records without consent to officials of another school district in which a student seeks or intends to enroll.
4. The right to file a complaint with the U. S. Department of Education concerning alleged failures by the district to comply with the requirements of FERPA.

### DIRECTORY INFORMATION

FERPA permits the district to publish or otherwise disclose directory information relating to a student without the consent of the parent or eligible student, unless the parent or eligible student expressly objects to such disclosure. “Directory information” includes information contained in an education record of a student which would not generally be considered harmful or an invasion of privacy if disclosed. Davison Community Schools hereby designates the following as “directory information”: student’s name, address, telephone number, electronic mail address, picture, parent or guardian, date and place of birth, major field of study, dates of attendance, grade level, participation in officially recognized activities and sports, weight and

height of members of athletic teams, degrees, honors and awards received, and the most recent educational agency or school attended by the student.

High school students and their parents/guardians may prevent disclosure of a student's name, address and telephone number to military recruiting representatives (who can only use that information to provide information to students concerning education and career opportunities available in the U. S. Armed Forces or service academies) by submitting a signed written request to that effect to the high school principal.

#### PROTECTION OF FERPA RIGHTS

All employees of the district are expected to abide by the requirements of the Family Education Rights and Privacy Act when dealing with student educational records. Violation of the rights of a parent or student under FERPA by an employee of Davison Community Schools may lead to disciplinary action.

## HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996 (HIPAA)

Davison Community Schools is required by the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) to provide you with a notice of medical information privacy policy for each of our covered entity health plans. Those covered entity health plans are:

- Davison Community Schools Cafeteria Plan – This plan covers employees who are eligible to elect health insurance coverage or cash option. This plan also covers the payment of employee pre-tax health insurance premium contributions and the flexible spending account option.

Davison Community Schools is not considered a covered entity with regard to the district's medical insurance plans or the dental and vision insurance plans.

*CAFETERIA PLAN – THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.*

As the plan sponsor of the Davison Community Schools Cafeteria Plan (the Plan), the Davison Community Schools acknowledges how important it is to maintain secure and confidential protected health information (PHI) that the Plan receives and maintains about you (and your dependents) who participate in the Plan. The Plan complies with regulations under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), which require that specific measures be taken to keep your PHI private. PHI is information about you, including demographic data, that can reasonably be used to identify you and that relates to your past, present or future physical or mental health, health care provided to you or payment for health care.

In this notice, we explain how the Plan protects the privacy of your PHI and how the Plan will allow your PHI to be used and provided to others. We must follow the privacy practices described in this notice while it is in effect. This notice takes effect April 14, 2004 and will remain in effect until we replace or modify it.

The plan provides cash or benefits under the district's Cash Option and Health Plans. The Flexible Spending Account option allows you to set aside funds on a pre-tax basis to pay for dependent care expenses and out-of-pocket costs for medical, dental, and vision services.

The Plan reserves its right to change its privacy practices at any time, consistent with the requirements of the law. These revised practices will apply to your PHI regardless of when it was created or received. Before the Plan makes a significant change to its privacy practices, you will receive a revised notice telling you about that change.

## USES AND DISCLOSURES OF PHI BY THE PLAN

In making payment for your medical expenses, the Plan may make the following uses or disclosures of your PHI without your authorization:

- The Plan may disclose your PHI to you or to someone who has the legal right to act on your behalf.
- The Plan may disclose your PHI for “health care operations,” such as management or administration of the plan, preventing/investigating fraud, and obtaining bids from service providers.
- The Plan will disclose your PHI if it is required to do so by law, such as the PHI is required to be produced by subpoena, court order or in connection with a workers’ compensation claim. The Plan will also disclose your PHI if required to do so by the Secretary of Health and Human Services.
- Your PHI may be disclosed to the Plan Sponsor, i.e., the Davison Community Schools, but only for the purpose of administering benefits under the Plan.
- Your PHI may be disclosed for matters in the public interest, such as public safety activities, reporting of child or adult abuse, neglect or domestic violence or to avoid a serious threat to the health and safety of others.

The Plan may disclose your PHI without prior authorization from you, as permitted by law to others which perform services or functions on behalf of the Plan, such as a third party administrator, attorney, accountant or other advisor or service provider to the Plan. If the Plan makes such a disclosure, the Plan will at the same time obtain a binding agreement from the third party that prohibits the third party from disclosing or using the information other than to carry out the purposes for the disclosure, except as permitted by law or regulations. You may authorize in writing that your PHI be disclosed to a third party for any other purpose. The Plan will require that your authorization be made on a specific authorization form, which you may obtain from the Plan’s HIPAA compliance officer, named below.

## YOUR RIGHTS REGARDING YOUR PROTECTED HEALTH INFORMATION

Under federal law, you have the right to:

- Request that restrictions be placed on release of the PHI. To request restrictions, you must make your request in writing to the HIPAA Compliance Officer. In your request, you must tell the Plan (1) what information you want to limit, (2) whether you want to limit the Plan’s use, disclosure or both, and (3) to whom you want the limits to apply. The Plan is not required to agree to these additional restrictions, however, if the Plan does agree, it will abide by them (except as needed for emergency treatment or as required by law) unless the Plan notifies you that it is terminating its agreement to the restrictions.
- Receive confidential communications regarding your PHI. You may request that the Plan communicate with you about your PHI in a certain way or at a certain location, for example, only by mail or only at work. The Plan will honor such requests, in its discretion, if the requests

are reasonable and can be accommodated with minimal disruption to plan administration. Also, the Plan will accommodate the request only if you clearly provide information showing that the disclosure of all or part of the PHI other than as you requested could endanger you. To request confidential communication of your PHI, you must make a written request to the HIPAA Compliance Officer. Your request must state how or where you wish to be contacted.

- Inspect and copy your own PHI. To inspect and copy your PHI, you must submit a written request to the HIPAA Compliance Officer identified below. The Plan may charge a reasonable fee for the costs of copying and mailing your PHI to you. The Plan may deny your request in certain limited circumstances. If your request is denied, you may request that the denial be reviewed.
- Request an amendment to your PHI. A request to amend your PHI must be made in writing and addressed to the HIPAA Compliance Officer. You must provide a reason to support your request. The Plan may deny your request if it is not in writing or does not include a reason to support your request. Also, the Plan may deny your request to amend PHI which (1) is not a part of the PHI kept by or for the Plan, (2) was not created by the Plan, unless the person or entity that created the information is no longer available to make the amendment, (3) is not part of the PHI which you would be permitted to inspect and copy, or (4) is accurate and complete.
- Obtain an accounting for any disclosures of your PHI. This right covers disclosures other than disclosures made (1) to carry out treatment, payment or health care operations, (2) to you about your own PHI, (3) incident to an otherwise permitted use or disclosure, (4) as permitted by an authorization, (5) for the purpose of creating a facility directory or to persons involved in your medical care or other notification purposes, (6) as part of a limited data set as described in HIPAA, (7) for other purposes permitted by HIPAA, and (8) prior to April 14, 2004. To request an accounting of disclosures of your PHI, you must make a written request to the Plan's HIPAA Compliance Officer. If you request an accounting more than once in a 12-month period, the Plan may charge you a fee covering the cost of responding to any additional requests.
- Receive upon request a paper copy of any notice regarding uses and disclosures of your PHI.

## QUESTIONS AND COMPLAINTS

If you want more information about the Plan's privacy practices or a paper copy of this notice, please contact:

Christine Kuzinski, Director of Human Resources & Operations  
HIPAA Compliance Officer  
Davison Community Schools  
1490 N. Oak Road  
Davison, Michigan 48423      Phone: 810-591-0808

You may also file a written complaint with the U.S. Department of Health and Human Services. The Plan will provide you with the Department's address to file your complaint upon request.

The Plan will not take action against you if you file a complaint with the Plan or with the U. S. Department of Health and Human Services.

### Employee Criminal Offense Chart

The following offenses, both felonies and listed misdemeanors, require the employee to complete the Arraignment Disclosure Form within 3 business days after being arraigned for the crime to the school Superintendent and the Michigan Department of Education (MDE). Failure to do so is a violation of the law and may result in further charges and/or fines.

If convicted of the following offenses, the employee must provide the completed State Court Conviction Disclosure Form to the Department of Education (who, with respect to teachers, in turn will notify the State Board Approved Holder regarding the employee's certification).

Offense	If convicted....
<ul style="list-style-type: none"> <li>• Accosting, enticing, soliciting a child for immoral purposes.</li> <li>• Involvement in child sexually abusive activity or material.</li> <li>• A third or subsequent violation of any combination of engaging in obscene or indecent conduct in public, indecent exposure or a local ordinance substantially corresponding to either offense.</li> <li>• First, second, third, or fourth degree Criminal Sexual Conduct (CSC).</li> <li>• Assault with intent to commit CSC.</li> <li>• The crime of gross indecency, kidnapping, sodomy or soliciting another for prostitution if the victim is less than 18 years of age.</li> <li>• Leading, enticing, or carrying away a child under 14 years of age.</li> <li>• Pandering.</li> <li>• Any other violation of a state law or local ordinance constituting a sexual offense against an individual less than 18 years of age.</li> <li>• An offense committed by a sexually delinquent person.</li> <li>• An attempt or conspiracy to commit one of the offenses listed above.</li> </ul>	<ul style="list-style-type: none"> <li>• These listed offenses will result in termination and require registration of the employee on the sex offender's list as defined by the Sex Offender Registration Act.</li> <li>• With respect to teachers, the teacher's teaching certificate is suspended. The teacher may request a hearing with MDE.</li> </ul>
<p>All felonies including, but not limited to:</p> <ul style="list-style-type: none"> <li>• Manufacturing/delivering a controlled substance.</li> <li>• Possession of a controlled substance.</li> <li>• Recruiting, inducing, soliciting, or coercing a minor to commit a felony.</li> <li>• Assault with intent to commit murder.</li> <li>• Assault with intent to rob and steal armed.</li> <li>• Attempt to murder.</li> <li>• First Degree or Second Degree murder.</li> <li>• Armed robbery aggravated assault.</li> </ul>	<ul style="list-style-type: none"> <li>• The specifically listed felonies will result in the suspension or termination of the employee.</li> <li>• With respect to teachers, the specifically listed felonies will result in the suspension or revocation of their teaching certificate. The teacher may request a hearing with MDE.</li> <li>• The School Board and the school Superintendent must agree in writing to retain any employee convicted of any felony.</li> </ul>
<ul style="list-style-type: none"> <li>• Felonious assault on a child, child abuse in any degree, or an attempt to commit child abuse in any degree.</li> <li>• Cruelty, torture, or indecent exposure involving a child.</li> <li>• Delivery of a narcotic to a minor or student within 1,000 feet of school property.</li> <li>• Breaking and entering.</li> <li>• Knowingly allowing a minor to consume or possess alcohol or a controlled substance at a social gathering.</li> <li>• Accosting, enticing, or soliciting a child for an immoral purpose.</li> <li>• Larceny from a vacant dwelling.</li> <li>• Assault; assault and battery.</li> <li>• Assault; infliction of serious injury.</li> <li>• Selling or furnishing alcoholic liquor to a person less than 21 years of age.</li> </ul>	<ul style="list-style-type: none"> <li>• These misdemeanors may result in the suspension or termination of the employee.</li> <li>• With respect to teachers, these misdemeanors may result in the suspension or revocation of their teaching certificate after a hearing with MDE.</li> </ul>

## Arraignment Disclosure Form

A copy of this form must be provided to the employing school district, intermediate school district, public school academy, or non-public school and the Michigan Department of Education within three business days of arraignment.

Name (please print) \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

School Name \_\_\_\_\_

School District \_\_\_\_\_

Position \_\_\_\_\_

Date of Arraignment \_\_\_\_\_

Pursuant to Public Act 131 of 2005, I, hereby disclose that I was arraigned on the aforementioned date for the criminal offense of \_\_\_\_\_, in Court, located in the State of \_\_\_\_\_, County of \_\_\_\_\_

In signing this form, I acknowledge that I understand that should I be convicted of or pled guilty or nolo contendere (no contest) or is the subject of finding of guilt by a judge or jury, it is my responsibility to disclose to the court that I am employed by a school, public or non-public. I also understand that if I am subsequently not convicted of any crime after the completion of judicial proceedings resulting from that charge, I must request, in writing, that the Michigan Department of Education and the employing school/district delete the report from my records.

Signature

Date

Send Form to: Send Form to: Director

Michigan Department of Education  
Office of Educator Excellence  
P.O. Box 30008  
Lansing, MI 48909

Arraignment Disclosure Form



# Conviction Disclosure Form

Please contact [MDE-Professional-Practice@Michigan.gov](mailto:MDE-Professional-Practice@Michigan.gov) with any questions.

Name (Please Print) \_\_\_\_\_ Date of Birth \_\_\_\_\_

School/District Name (Please Print) \_\_\_\_\_

Position (Please Print) \_\_\_\_\_

Pursuant to [Michigan Compiled Laws 380.1230d](#), I attest that:

\_\_\_\_\_ 1. I have previously disclosed an arraignment but have not been convicted of or pled guilty or nolo contendere (no contest), nor am I the subject of a finding of guilt by a judge or jury of any crime.

\_\_\_\_\_ 2. This is my initial disclosure, I have been convicted of or pled guilty or nolo contendere (no contest) or am the subject of a finding of guilt by a judge or jury for the following crimes (*attach a separate sheet of paper to explain the criminal offense, date, court, city/state, and circumstances surrounding the conviction*):

Felony	_____	Misdemeanor	_____	Conviction	_____	Date	_____
Felony	_____	Misdemeanor	_____	Conviction	_____	Date	_____

\_\_\_\_\_ 3. This serves as disclosure of subsequent convictions for which I have been convicted of, or pled guilty or nolo contendere (no contest) or am the subject of a finding of guilt by a judge or jury for the following crimes (*attach a separate sheet of paper to explain the criminal offense, date, court, city/state, and circumstances surrounding the conviction*), and I understand that failure to disclose any subsequent convictions is considered to be a crime:

Felony	_____	Misdemeanor	_____	Conviction	_____	Date	_____
Felony	_____	Misdemeanor	_____	Conviction	_____	Date	_____

Please provide a detailed description of the circumstances of the conviction(s). This statement should be a narrative in your own words of the events leading up to the conviction(s) and what steps have been taken to prevent a future recurrence of the offense(s).


Please initial next to the statements below, and sign and date on the signature line.

In signing this form, I understand and agree that:

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | If I have been convicted of a listed offense, my employment shall be terminated.   |
| <input type="checkbox"/> | I also understand that if I have been convicted of a felony, other than a listed offense, the superintendent, or chief school official and the board or governing body must each approve, in writing, to my employment.  |
| <input type="checkbox"/> | Until the criminal history report is received and reviewed by the employing school/district, I am regarded as a conditional employee and if the criminal history report is not the same as my representation(s) above, my employment contract may be voided at the discretion of the employer. |

\_\_\_\_\_  
Signature

Date

## BOARD POLICIES/PROCEDURES

- EMPLOYEE HARASSMENT AND INTIMIDATION POLICY (BOARD POLICY 1662, 3362, 3362.01, 4362)
- ALCOHOL AND DRUG-FREE WORKPLACE POLICY (BOARD POLICY 3122.01, 4122.01, 4162)
- SMOKE-FREE ENVIRONMENT POLICY (BOARD POLICY 3215, 4215)
- FAMILY & MEDICAL LEAVES OF ABSENCE – FMLA (BOARD POLICY 3430.01)
- COMPUTER TECHNOLOGY AND NETWORKS (BOARD POLICY 7540, 7540.01, 7540.03, 7540.04, 7540.05, 7540.07, 7540.08, 7542, 7543, 7544, 7545)
- CORPORAL PUNISHMENT (BOARD POLICY 5630, 5630.01)
- BULLYING (BOARD POLICY 5517.01)
- NONDISCRIMINATION ON THE BASIS OF SEX IN EDUCATION PROGRAMS OR ACTIVITIES (BOARD POLICY 2266)

## ATOD LOCAL RESOURCE LIST

For a listing of local support agencies, the following has been provided:  
(all phone numbers are area code 810 unless other indicated)

### **Alcohol and Drug Abuse**

Intake, Assessment & Referral Center	235-9555
National Council on Alcoholism and Drug Dependence.....	1-800-NCA-CALL (1-800-622-2255)
Genesee County Substance Abuse	257-3201
Alcoholics Anonymous	234-0815
Al-Anon and Alateen	234-1460
Narcotics Anonymous	1-800-230-4085 (Hotline: 1-888-994-5291)
Genesee Health System (GHS) Crisis Center	1-877-346-3648

### **Abuse and Neglect**

Genesee Health System (GHS) 24-Hour Hotline	257-3740
Parent Help Line	1-855-427-2736
Protective Services	760-2550
Voices for Children	1-855-444-3911

### **Health Services**

Genesee Health System (GHS) Child & Family Services .....	257-3705
Genesee County Health Department	257-3612
Mott Children's Health Center	767-5750
American Lung Association	1-800-586-4872

### **Legal Services**

Legal Services of Eastern Michigan	1-800-322-4512
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### **Poison Information**

Poison Control Center	1-800-222-1222
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### **Runaway Help-Emergency Shelter**

REACH Runaway Shelter	233-8700
Runaway Hotline	1-800-RUNAWAY (1-800-786-2929)

### **Sexual Assault and Rape**

YWCA	238-7621
Voices for Children	1-855-444-3911

### **Miscellaneous Agencies**

Life Challenge of Greater Flint	235-3787
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# MICHIGAN SCHOOL CODE REVISION

## PUBLIC ACT 213 OF 2022

### Section 1 of Article VIII of the Michigan Constitution of 1963:

Religion, morality and knowledge being necessary to good government and the happiness of mankind, schools and the means of education shall forever be encouraged.

### Section 10 of the Revised School Code:

It is the natural, fundamental right of parents and legal guardians to determine and direct the care, teaching, and education of their children. The public schools of this state serve the needs of the pupils by cooperating with the pupil's parents and legal guardians to develop the pupil's intellectual capabilities and vocational skills in a safe and positive environment.

### MCL 380.11a General powers school district.

(3) A general powers school district has all of the rights, powers, and duties expressly stated in this act; may exercise a power implied or incident to a power expressly stated in this act; and, except as otherwise provided by law, may exercise a power incidental or appropriate to the performance of a function related to operation of a public school and the provision of public education services in the interests of public elementary and secondary education in the school district, including, but not limited to, all of the following:

(a) Educating pupils. In addition to educating pupils in grades K-12, this function may include operation of preschool, lifelong education, adult education, community education, training, enrichment, and recreation programs for other persons. A school district may do either or both of the following:

- (i) Educate pupils by directly operating 1 or more public schools on its own.
- (ii) Cause public education services to be provided for pupils of the school district through an agreement, contract, or other cooperative agreement with another public entity, including, but not limited to, another school district or an intermediate school district.

(b) Providing for the safety and welfare of pupils while at school or a school sponsored activity or while en route to or from school or a school sponsored activity.

(c) Except as otherwise provided in this section, acquiring, constructing, maintaining, repairing, renovating, disposing of, or conveying school property, facilities, equipment, technology, or furnishings.

(d) Hiring, contracting for, scheduling, supervising, or terminating employees, independent contractors, and others, including, but not limited to, another school district or an intermediate school district, to carry out school district powers. A school district may indemnify its employees.

(e) Receiving, accounting for, investing, or expending public school money; borrowing money and pledging public school funds for repayment; and qualifying for state school aid and other public or private money from local, regional, state, or federal sources.

 **Davison Community Schools**

Where Kids Come First and Futures Begin

*Connections ♦ Curriculum ♦ Opportunities*

Please see below the Guiding documents for students with disabilities and IEP development documents.

**Guiding Documents for Discipline for Students with Disabilities**

- a. [Individuals With Disabilities Education Act \(IDEA\) Discipline Requirements \(michigan.gov\)](#)
- b. [Conducting a Manifestation Determination Review \(michigan.gov\)](#)

**Guiding Documents for Individualized Education Plan (IEP) Development**

- a. [IEP Development: Special Education Programs and Services](#)
- b. [Individualized Education Program Development: Present Level of Academic](#)
- c. [Measurable Annual Goals and Short-Term Objectives](#)
- d. [Measurable Annual Goals and Short-Term Objectives—Substantive Compliance](#)
- e. [Individualized Education Program \(IEP\) Amendment Guidance \(michigan.gov\)](#)

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