

**ADMINISTRATIVE CIRCULAR NO.57**

Office of the Superintendent

**SAN DIEGO UNIFIED SCHOOL DISTRICT**

**Date:** January 12, 2009

**To:** School Principals, Division and Department Heads, Child Development Center Administrators, and San Diego Education Association Representatives.

**Subject:** JOB SHARE PROGRAM

**Department and/or Persons Concerned:** Certificated Staff

**Due Date:** May 1, 2009

**Reference:** Article 21 of the 2006-2008 Collective Negotiations Contract between the District and the San Diego Education Association (SDEA) and Administrative Procedure 7342

**Action Requested:** Disseminate information regarding the Job Share Program. Interested certificated employees submit application as described below.  
**Please print and post a copy of this circular.**

**Brief Explanation:**

In accordance with Article 21 of the Collective Negotiations Contract between the San Diego Unified School District and the San Diego Education Association (SDEA), unit members may share their individual assignment with another unit member during the school year. Job sharing assignments allow two unit members to share one budgeted position. **Unit members also have the option to submit a Job Share application with another unit member who is participating in the Reduced Workload Program. Please note: the deadline for Reduced Work Load applications is March 1<sup>st</sup> of each year. Job Share partners may apply up to May 1<sup>st</sup> of each year.**

The health and welfare benefits available to each unit member participating in a Job Share are determined by the actual time worked. **For two unit members in a Job Share assignment, reference attachment 2.1 for information on health and welfare benefits. For a unit member in a Job Share assignment with a Reduced Workload partner, reference attachment 2.2 for information on health and welfare benefits.** All assignments must be made with the mutual consent of the site administrator and the unit members involved in the Job Share assignment.

**MAXIMUM PARTICIPATION**

Job Share assignments are limited to a maximum of one percent of the full-time positions in the SDEA bargaining unit. Unit members in an assignment with a Reduced Workload partner shall not count towards the limit.

## ELIGIBILITY

Unit members who are interested in participation in the Job Share Program must have permanent status with the district, hold the appropriate credential for the assignment, and have effective ratings on all elements of their most recent evaluation.

## CONDITIONS OF PARTICIPATION

Job Share assignments shall be limited to a term of one school year, with renewal by mutual agreement of the principal/supervisor and the unit member(s) involved in the Job Share assignment.

Upon termination of the Job Share assignment, where one partner was not previously at the site, the unit member with the required credential and greater district seniority will have the right of assignment to the budgeted position unless otherwise stipulated in the original Job Share agreement. The unit member without the right of assignment to the budgeted position may, by mutual agreement with the site administrator, be placed in another appropriate vacancy at the site/cost center. Absent mutual agreement, the unit member will participate in the post and bid process without priority consideration. If this does not result in an assignment, then the Human Resource Services Division (HRSD) will reassign the unit member.

If both Job Share partners were members of the site staff prior to the Job Share agreement, and there is a need to reduce staff at the site, then the provisions of Article 12, Section 12.7.3 and Section 12.7.4 of the SDEA contract will apply.

During the period of the Job Share assignment, absences shall be covered by the Job Share partner (with payment at the daily substitute rate) or by a district-provided visiting teacher. Trading of workdays by Job Share partners shall be at the discretion of the principal or designee. Absences shall be reported as the appropriate leave categories (e.g., sick leave and bereavement leave) and charged to the absent Job Share partner.

## APPLICATION PROCEDURE

Permanent certificated employees submitting an application to participate in the Job Share Program shall identify their partner and the two shall jointly submit a completed Job Share Agreement (Attachment 1) and the health and life insurance benefits forms (Attachment 2.1, 2.2 and 2.3). The site-approved Job Share application must be forwarded to HRSD for final approval.

The Job Share forms (Attachment 1, 2.1, 2.2 and 2.3) can be printed from the San Diego Unified School district website at ([www.sandi.net](http://www.sandi.net)). You can locate the forms by clicking "For District Staff" search for "Bulletins and Circulars" and locate the number of the circular. Duplicate forms as needed. Prior to submitting your Job Share agreement, please review Administrative Procedure 7342. Job Share agreements should be submitted to HRSD, Eugene Brucker Education Center, Room 1241. **Job Share calendars for the 2009-2010 school year may be downloaded from the district website at ([www.sandi.net](http://www.sandi.net)) after March 10, 2009.**

To obtain a list of unit members interested in a possible Job Share assignment, or to add your name to the list, please contact your certificated support staff, listed below:

**Elementary Sites:**

Eileen Sandifer (619) 725-8015 [esandifer@sandi.net](mailto:esandifer@sandi.net)

**Special Education/Counseling, Librarians and Nursing:**

Theresa Chowdhury (619) 725-8012 [tchowdhury@sandi.net](mailto:tchowdhury@sandi.net)

**Middle/Language Academy and Longfellow:**

Sonja J. Elston (619) 725-8058 [selston@sandi.net](mailto:selston@sandi.net)

**High School Sites:**

Darin Noyes (619) 725-8019 [dnoyes1@sandi.net](mailto:dnoyes1@sandi.net)

Questions regarding staffing may be referred to your assigned certificated staffing support team. Questions regarding health benefits may be referred to Employee Benefits, at (619) 725-8130, select option 6 between the hours of 8:00 am and 5:00 p.m., Monday through Friday.

Tim Asfazadour  
Director of Certificated Human Resources

APPROVED:



Sam Wong  
Chief Human Resources Officer

SW:sje

Attachments (4)

Distribution: Lists A, C, D, E, F, H and S



EUGENE BRUCKER EDUCATION CENTER  
4100 Normal Street, San Diego, CA 92103-2682

(619) 725-8012  
Fax: (619) 296-7522

***JOB SHARE PROGRAM***  
***SCHOOL YEAR 2009 - 2010***

- NEW
- RENEWAL

Please return Job Share Agreement,  
Health & Life Ins. Benefits form to:  
Certificated Support Staff  
Eugene Brucker Ed. Center  
Room 1241, HRSD

**JOB SHARE AGREEMENT**  
**NAMES OF PARTICIPANTS**

<b>REQUIRED</b>	<b>REQUIRED</b>
<p><i>Initial One</i> Job Share _____ Reduced Workload _____</p> <p>Partner A _____</p> <p>Employee ID # _____</p> <p>Present site location and assignment _____</p> <p>Daytime Phone: _____</p> <p>Home Address: _____ _____</p> <p><b>INSTRUCTIONAL SCHEDULE FOR 2009-2010</b></p> <p>School and Assignment Percentage (%): _____</p> <p>Grade Level/Assignment Program: _____</p>	<p><i>Initial One</i> Job Share _____ Reduced Workload _____</p> <p>Partner B _____</p> <p>Employee ID # _____</p> <p>Present site location and assignment _____</p> <p>Daytime Phone: _____</p> <p>Home Address: _____ _____</p> <p><b>INSTRUCTIONAL SCHEDULE FOR 2009-2010</b></p> <p>School and Assignment Percentage (%): _____</p> <p>Grade Level/Assignment Program: _____</p>

**BENEFIT TO DISTRICT/STUDENTS:**

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**HEALTH AND LIFE INSURANCE BENEFITS FOR  
JOB SHARE ASSIGNMENT**

The following conditions apply to the two employees in a job share assignment:

1. Job share employees must pay for medical, dental, and/or vision coverage on a tenthly pro-rata basis, if coverage is desired.
2. Job share employees who elect coverage under any district-sponsored medical, dental and/or vision plan must make the required tenthly pro-rata contribution for the plan(s) selected through the end of the calendar year. If coverage continues into a subsequent calendar year, the required tenthly pro-rata contribution must be through the end of that calendar year.
3. District-paid basic life insurance coverage will remain in effect for a job share employee who is in paid status in a monthly salaried position. The benefit is equal to one times annual salary.
4. Job share employees may waive all of their percentage participation in each of the three health insurance programs (medical, dental and vision) and transfer such participation to their job share partner.
  - a. Such arrangements must be included in the job share agreement and may not be modified during the term of the agreement.
  - b. Employees who waive coverage under this provision will be eligible to enroll either on the first of the month following the first day of paid service in an assignment that is not a job share assignment or on the first of the month following the start of a new job share assignment.

**To be completed by Job Share Partners**

In accordance with the conditions specified above, as job share partners, we agree to the following division of the benefits package:

**PLEASE NOTE:** If both partners participate in a specific benefit (i.e., medical), each will pay a pro-rata share of the cost of coverage equivalent to their own position. (Pro-rata rate chart attached.)

**Name of Work Location** \_\_\_\_\_

	<b>Partner A</b>			<b>Partner B</b>		
	Participate	Waive	Office Use Only	Participate	Waive	Office Use Only
Medical	<input type="checkbox"/>	<input type="checkbox"/>	_____ _____ _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	_____ _____ _____ _____
Dental	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Vision	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Basic life	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

**Percentage of job share assignment** \_\_\_\_\_

**Percentage of job share assignment** \_\_\_\_\_

**Partner A** \_\_\_\_\_

**Partner B** \_\_\_\_\_

Printed Name

Printed Name

\_\_\_\_\_  
Employee ID #

\_\_\_\_\_  
Employee ID #

\_\_\_\_\_  
Signature/Date

\_\_\_\_\_  
Signature/Date

**HEALTH AND LIFE INSURANCE BENEFITS FOR  
JOB SHARE ASSIGNMENT TO COMPLETE A  
REDUCED WORKLOAD ASSIGNMENT**

The following conditions apply in a job share assignment partner with a reduced workload partner:

1. Job share employees must pay for medical, dental, and/or vision coverage on a tenthly pro-rata basis, if coverage is desired.
2. Job share employees who elect coverage under any district-sponsored medical, dental and/or vision plan must make the required tenthly pro-rata contribution for the plan(s) selected through the end of the calendar year. If coverage continues into a subsequent calendar year, the required tenthly pro-rata contribution must be continued through the end of that calendar year.
3. District-paid basic life insurance coverage will remain in effect for a job share employee who is in paid status in a monthly salaried position. The benefit is equal to one times the annual salary.
4. Employees who elect not to participate in coverage under this provision will be eligible to enroll either on the first of the month following the first day of paid service in an assignment which is not a job share assignment or on the first of the month following the start of a new job share assignment.

**To be completed by job share partner:**

In accordance with the conditions specified above, as a job share partner, I agree to the following acceptance of the benefits package:

**PLEASE NOTE: A job share** partner participating in a specific benefit (i.e., medical), will pay a pro-rata share of the cost of coverage equivalent to their own position. (Pro-rata rate chart attached.)

**Name of Work Location** \_\_\_\_\_

**Job Share Partner**

	Participate	Waive
Medical	<input type="checkbox"/>	<input type="checkbox"/>
Dental	<input type="checkbox"/>	<input type="checkbox"/>
Vision	<input type="checkbox"/>	<input type="checkbox"/>
Life	<input type="checkbox"/>	<input type="checkbox"/>

Office Use Only
_____
_____
_____
_____

**Percentage of job share assignment** \_\_\_\_\_

**Partner** \_\_\_\_\_

Printed Name

\_\_\_\_\_  
Employee ID #

\_\_\_\_\_  
Signature/Date

**JOB SHARE PROCEDURE & CHECKLIST**  
**(Application Deadline is May 1, 2009)**

Partner A \_\_\_\_\_

Emplid# \_\_\_\_\_

Partner B \_\_\_\_\_

Emplid# \_\_\_\_\_

ACTION	A	B	DATE	INITIALS
Application entered in Database once received by HR; 2009-10 Job Share Folder (by May 5 <sup>th</sup> )				
Application Complete ? <ul style="list-style-type: none"> <li>• Job Share Agreement</li> <li>• Health Life Ins. Benefits</li> <li>• Outline of Responsibilities</li> <li>• Calendar from each partner, signed by Principal, A and B partners identified</li> </ul>				
Applicant Eligible/Meets All Requirements ? <ul style="list-style-type: none"> <li>• Permanent Status</li> <li>• Principal's signature on application</li> <li>• Appropriate credential(s) for assignment</li> <li>• Effective on most recent evaluation (See Circular)</li> </ul>				
Original application to HRSD Staffing Administrator for approval. (Seniors, please initial bottom right corner prior to submitting to CSA). To CSA by May 9 <sup>th</sup> .				
CSA returns by May 23 <sup>rd</sup> If approved –Senior requests PAR from site/dept. for <b>NEW PARTICIPANTS, LOCATION AND/OR FTE CHANGES.</b> letter to employee, copies to: Principal and Personnel File  If not approved – letter to employee, copies to: Principal and Personnel File				
Memo of approved participants (roster) for Benefit and Input Depts: attach Medical Forms to each				
Job Share calendars to Payroll, with A and B partners identified, before June 1 <sup>st</sup> . (forward as each is approved)				
Input Job Share status in database – ie: approved or not approved				
PeopleSoft follow up on PAR – new assignment correctly reflected?				

TENTHLY PRO RATA RATE CHART  
 For Teachers in Job Share Assignments  
 Employee Only or Employee With Dependents  
 Rates Effective January 1, 2009 through December 31, 2009

**MEDICAL PLANS**

**DENTAL PLANS**

<u>PACIFICARE HMO</u>	
Position Equivalent (1) (Percent of full-time contract)	Tenthly Employee Contribution
20%	\$804.12
40%	\$603.09
50%	\$502.58
60%	\$402.06
80%	\$201.03

<u>DELTACARE USA</u>	
Position Equivalent (1) (Percent of full-time contract)	Tenthly Employee Contribution
20%	\$26.27
40%	\$19.97
50%	\$17.52
60%	\$21.02
80%	\$ 7.01

<u>PACIFICARE POS</u>	
Position Equivalent (1) (Percent of full-time contract)	Tenthly Employee Contribution
20%	\$943.75
40%	\$707.81
50%	\$589.84
60%	\$471.87
80%	\$235.94

<u>DELTA DENTAL PPO PLAN</u>	
Position Equivalent (1) (Percent of full-time contract)	Tenthly Employee Contribution
20%	\$63.46
40%	\$47.82
50%	\$42.47
60%	\$34.01
80%	\$16.98

<u>KAISER</u>	
Position Equivalent (1) (Percent of full-time contract)	Tenthly Employee Contribution
20%	\$700.89
40%	\$525.66
50%	\$438.05
60%	\$350.44
80%	\$175.22

<u>WESTERN DENTAL</u>	
Position Equivalent (1) (Percent of full-time contract)	Tenthly Employee Contribution
20%	\$26.79
40%	\$20.09
50%	\$17.86
60%	\$13.99
80%	\$ 7.14

(1) For a position equivalent not shown, contact the Employee Benefits Operations Office 619.725.8130

<u>VISION SERVICE PLAN</u>	
Position Equivalent (1) (Percent of full-time contract)	Tenthly Employee Contribution
20%	\$9.64
40%	\$7.23
50%	\$6.43
60%	\$5.14
80%	\$2.57