

## **AGENDA REQUEST FORM**

## THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

| MEETING DATE  |   | 2018-06-12 10:05 - School Board Operational Meeting      |                            |                          | Special Order Request O Yes No |                |           |
|---|---|--|----------------------------|--------------------------|--------------------------------|----------------|-----------|
| TEM No.:  | EM No.: AGENDA ITEM                                 |  | ITEMS                      |                          |                                | Time           |           |
| G-5.  | CATEGORY  | G. OFFICE OF HUMAN RESOURCES                             |                            |                          |                                |                |           |
|   | DEPARTMENT  | Talent Acquisition & Operations (Instructional Staffing) |                            |                          | al Staffing)                   | Open Agenda    |           |
| TTLE:   |   |  |                            |                          |                                | J ( Yes        | ● No      |
| upplemental Pay F   | Positions   |  |                            |                          |                                |                |           |
| REQUESTED A   | CTIONI  |  |                            |                          |                                |                |           |
|   | nended supplemental pay                             | positions of   | employees for the 2017-2   | 2018 school/fiscal       | year.                          |                |           |
|   |   |  |                            |                          | •                              |                |           |
|   |   |  |                            |                          |                                |                |           |
|   |   |  |                            |                          |                                |                |           |
| UMMARY EXI  | PLANATION AND BA                                    | CKGROU   | JND:                       |                          |                                |                |           |
|   | mmended for supplement                              |  |                            |                          |                                |                |           |
|   | and supplement type. The sons, athletic supplements |  | •                          | • • • •                  |                                | •              |           |
|   | een analyzed by the Office                          | _  |                            |                          |                                |                |           |
| nultiple supplements are consistent with the language set forth in Policy 6210, Supplements. Individuals listed meet the requirements for the supplemental ositions. (None at this time.) |   |  |                            |                          |                                |                |           |
| ositions. (None at i  | ins une.)   |  |                            |                          |                                |                |           |
|   |   |  |                            |                          |                                |                |           |
|   |   |  |                            |                          |                                |                |           |
| CHOOL BOAR  | RD GOALS:   |  |                            |                          |                                |                |           |
| Goal 1:   | High Quality Instruc                                | tion (   | Goal 2: Continuou          | us Improveme             | ent O Goal 3: E                | ffective Commu | nication  |
| INANCIAL IMI  | PACT:   |  |                            |                          |                                |                |           |
| unding has been b   | udgeted in the 2017-2018                            | school/fisca   | l year for all supplements | through June 30,         | 2018.                          |                |           |
|   |   |  |                            |                          |                                |                |           |
|   |   |  |                            |                          |                                |                |           |
| EXHIBITS: (Lis  | st)   |  |                            |                          |                                |                |           |
| None at this time   |   |  |                            |                          |                                |                |           |
|   |   |  |                            |                          |                                |                |           |
|   |   |  |                            |                          |                                |                |           |
| BOARD ACTIO   | MI-   | 1  | SOURCE OF ADDI             | TIONAL INFORM            | IATION:                        |                |           |
| DOAND ACTIO   | /IV.  |  | Name: Susan T. Rockelman   |                          | Phone: 754-32                  | 21-2320        |           |
|   |   |  |                            |                          |                                |                |           |
|   | ool Board Records Office Only                       |  | Name:                      |                          |                                | Phone:         |           |
| HE SCHOO Senior Leader  | L BOARD OF BR<br>& Title                            | ROWARI   | D COUNTY, FLO              |                          | Approved In Open               |                |           |
| Craig J. Nichols - Chief Human Resources & Equity Of  |   |  | Equity Officer             | Board Meeting On:<br>By: |                                |                |           |
| signature   |   |  |                            | _                        | ۵,۰                            | School Board ( | <br>Chair |
| J   |   |  |                            |                          |                                | Control Board  | , i (dii  |
|   |   |  |                            |                          |                                |                |           |

Electronic Signature
Form #4189 Revised 08/04//2017
RWR/ CJN/STR:lb