DESIGNATION OF ELEMENTARY SAFETY PATROL SUPERVISOR 2021-2022 SCHOOL YEAR

Please type or print the designee's name as it appears on his/her paycheck.

(If appointing 2 individuals to share a position, complete lines one (1) and two (2) and note the percent of time the position will be shared.)

time the position will be shared.)					
If de	esignee is a non CEA ba	argaining unit mem	ber, has staff who are CEA ba	rgaining unit mem	bers (in your
building) declined the offer of this position?				No No	Yes
(A non CEA bargaining unit member's name cannot be submitted for Board approval if yes is not marked.)					
1.					
	First Name	Middle Name	Last Name	Percent%	Employee ID#
Did ⁻	this person encumber	this supplemental	contract position last year?	No	Yes
Has this person completed the required Safety Patrol Training? No Yes					
2.					
	First Name	Middle Name	Last Name	Percent%	Employee ID#
Did this person encumber this supplemental contract position last year? No Yes					
Has this person completed the required Safety Patrol Training? No Yes					
This this person completes the required surety ration framing.					
Scho	pol			Facility Code	
Principal's Signature Date					
COMPLETE AND RETURN TO HR - Maia Cox, tcox1@columbus.k12.oh.us					
Columbus City Schools					
Mission: Each student is highly educated, prepared for leadership and service, and empowered for success as a citizen in a global community.					
Human Resources Department Use Only					
	-	d D-t-	1.00		2 64-11
Board Date			1. Step		2. Step