

TO: Charles Heinlein, Deputy Superintendent of Schools  
 FROM: Keith A. Butcher, Fayette County Schools Superintendent  
 DATE: ~~April 30, 2014~~ May 1, 2014 REVISED  
 RE: Personnel Agenda

Your consideration and approval of the following personnel requests is appreciated for the **May 5, 2014** Fayette County Board of Education meeting.

**Professional Personnel Agenda  
 May 5, 2014**

**EMPLOYMENT OF PROFESSIONAL PERSONNEL** (first time WVDE applicants *ONLY*)

Social Security Number	Name (last, first)	Valid Credential	Endorsement, Grade Range	Credential Expiration Date	Assigned Location, Position, Grade Range	Fingerprint Clearance Date	Employment Effective Date	County Use

**EMPLOYMENT OF PROFESSIONAL PERSONNEL** (persons who hold or previously held WVDE credentials)

Social Security Number	Name (last, first)	Valid Credential	Endorsement, Grade Range	Credential Expiration Date	Assigned Location, Position, Grade Range	Employment Effective Date	County Use

**EMPLOYMENT OF PROFESSIONAL PERSONNEL** (persons not requiring WVDE credentials)

Social Security Number	Name (last, first)	Valid Credential	Endorsement, Grade Range	Credential Expiration Date	Assigned Location, Position, Grade Range	Employment Effective Date	County Use

**RE-EMPLOYMENT OF PROFESSIONAL PERSONNEL FROM PREFERRED RECALL FOR 2014-15**  
 (Posted Position Applied For)

	Name	Valid Credential	Endorsement, Grade Range	Credential Expiration Date	Assigned Location, Position, Grade Range	Employment Effective Date	County Use
	Bush, Deborah	Professional Teaching Certificate	LA 7-9, Prof Dev MCE 5-9	Permanent	Collins Middle, English 5-8	<b>2014-15</b>	P010-15

**TRANSFER OF PROFESSIONAL PERSONNEL**

	Name (last, first)	Valid Credential Endorsement Area/s, Grade Range/s	Credential Expiration Date	From Current Location/Position/ Grade Range	To New Location/Position/ Grade Range	Transfer <i>Effective</i> Date	County Use
	Price, Sandra	Elem Ed K-6, Rdg Spec PK- AD	Permanent	Title I K-4, New River Elem	Grade 2, Gatewood Elem	<b>2014-15</b>	P012- 15

**RESCISSION OF PROFESSIONAL REDUCTION IN FORCE FOR 2014-15**

Social Security Number	Name	Valid Credential	Endorsement, Grade Range	Credential Expiration Date	Assigned Location, Position, Grade Range	Employment <i>Effective</i> Date	County Use

**RESCISSION OF PROFESSIONAL TRANSFER FOR 2014-15**

Social Security Number	Name	Valid Credential	Endorsement, Grade Range	Credential Expiration Date	Assigned Location, Position, Grade Range	Employment <i>Effective</i> Date	County Use

**LEAVE REQUEST FOR PROFESSIONAL PERSONNEL**

Social Security Number	Name (last, first)	Position/Location	Type of Leave	Effective Date

**RESIGNATION/RETIREMENT OF PROFESSIONAL PERSONNEL**

	Name (last, first)	Position/Location	Reason	Date
	Raines, III, Walter	Assistant Principal 9-12 Oak Hill High	Resignation	06.18.14 (end of day)
	Webb, Janie	French/Spanish 9-12 Oak Hill High	Resignation	06.12.14 (end of day)

**EMPLOYMENT OF GENERAL SHORT AND/OR LONG-TERM SUBSTITUTE PROFESSIONAL PERSONNEL**

(first time WVDE applicants **ONLY**)

Social Security Number	Name (last, first)	Valid Professional Certificate (Check if appropriate)	Valid Short- Term Permit (Check if appropriate)	Valid Long- Term Permit (Check if appropriate)	Valid Credential Endorsement Area(s)/ Grade/Range(s)	Valid Credential Expiration Date	Fingerprint Clearance Date	County Use

**EMPLOYMENT OF GENERAL SHORT AND/OR LONG-TERM SUBSTITUTE PROFESSIONAL PERSONNEL**  
(persons who hold or previously held WVDE credentials)

Name (last, first)	Valid Professional Certificate (Check if appropriate)	Valid Short-Term Permit (Check if appropriate)	Valid Long-Term Permit (Check if appropriate)	Valid Student Teacher Permit (Check if appropriate)	Valid Credential Endorsement Area(s)/Grade/Range(s)	Valid Credential Expiration Date	County Use
Arrington, Roger	✓				Elem Ed 1-8 Soc St 1-12 Prin K-12 Voc Admin 5-AD Supv Gen Inst K-12, Supt K-12	Permanent	Eff 2014 - 2015
Stepowski, Ann	✓				Safety K-12 Health K-12 PE K-12 Ment Ret K-12 SLD K-12	Permanent	Eff 2014 - 2015

**EMPLOYMENT OF PROFESSIONAL PERSONNEL FOR MENTOR PROGRAM**

Social Security Number	Name (last, first)	Position	Employment Effective Date	Valid Teaching Credential	Valid Authorization	Valid Credential Expiration Date	County Use

**EMPLOYMENT OF EXTRA-CURRICULAR/EXTRA-DUTY PERSONNEL**

Name (last, first)	Position/Location	Employment Effective Date	Valid Teaching/Admin. Credential (Check if appropriate)	Valid Authorization (Check if appropriate)	Valid Credential Expiration Date	Funding Source
Pinnick, Christopher	Principal Credit Recovery Oak Hill High P-SUM01-15	06.30.14	✓		Permanent	County Step VII
Bowling, Donna	Soc Stud 5-12 Credit Recovery Oak Hill High P-SUM04-15	06.30.14	✓		Permanent	County Step VII
Payton, Julie	Math 7-12 Credit Recovery Oak Hill High P-SUM05-15	06.30.14	✓		Permanent	County Step VII
Cortines, Kimberly	Math 5-12 Credit Recovery Oak Hill High P-SUM06-15	06.30.14	✓		06.30.15	County Step VII
Payton, Timothy	Credit Recovery Credit Recovery Oak Hill High P-SUM08-15	06.30.14	✓		Permanent	County Step VII
Adkins, Derrick	Network/Computer Technician Summer Employment Fayette Co Schools P-SUM23-15	06.16.14	✓		06.30.15	County Levy for Technology

**RESIGNATION OF EXTRA-CURRICULAR/EXTRA-DUTY PERSONNEL**

	<b>Name (last, first)</b>	<b>Position/Location</b>	<b>Effective Date</b>
	Crookshanks, Lisa M.	Football/Basketball Middle Cheer Coach, Meadow Bridge High	06.30.14

**SERVICE PERSONNEL AGENDA**

**May 5, 2014**

**Rescission of Service Transfer/Contract Termination for 2014-15**

	<b>Name (last, first)</b>	<b>Position/Location</b>
	Bowyer, Jennifer	Itinerant Special Education Supervisory Aide III/Bus Aide/Autism Mentor, Oak Hill High

**Re-Employment of Service Personnel from 2014-2015 Preferred Recall List (posted position applied for)**

<b>Social Security Number</b>	<b>Name (last, first)</b>	<b>Position/Location</b>	<b>Work Hours (approx.)</b>	<b>Effective Date</b>	<b>Certification</b>

**Employment of Service Personnel**

<b>Social Security Number</b>	<b>Name (last, first)</b>	<b>Position/Location</b>	<b>Work Hours (approx.)</b>	<b>Effective Date</b>	<b>Certification</b>

**Transfer of Service Personnel**

<b>Social Security Number</b>	<b>Name (last, first)</b>	<b>From</b>	<b>To</b>	<b>Work Hours (approx.)</b>	<b>Effective Date</b>	<b>Certification</b>

**Termination of Service Personnel**

<b>Social Security Number</b>	<b>Name (last, first)</b>	<b>Position/Location</b>	<b>Date</b>

**Retirement/Resignation of Service Personnel**

Social Security Number	Name (last, first)	Position/Location	Reason	Date

**Recommended Employment of Substitute Service Personnel Effective 2013-2014**

	Name (last, first)	Classification(s)
	Arthur, Gregory	Bus Operator
	Donelow, Timothy	Custodian
	Farley, Marvin	Bus Operator
	Jones III, John L.	Bus Operator
	Pitsenbarger, Lois	Bus Operator

**Recommended Removal of Substitute Service Personnel**

Social Security Number	Name (last, first)	Classification(s)	Effective Date

**Leave Request for Service Personnel**

Social Security Number	Name (last, first)	Position/Location	Type of Leave	Effective Date

**Request for Higher Pay Grade for Specialized Health Care and Medication Administration for 2013-2014 ONLY (State Code 18-5-22: Provides specialized health care to students)**

Social Security Number	Name (last, first)	Position	Location	Effective Date

**Employment of Extra-Duty Service Personnel**

Social Security Number	Name (last, first)	Position/Location	Employment Effective Date	Valid Authorization (Check if appropriate)	Valid Credential Expiration Date	Funding Source

**Resignation of Extra-Duty Service Personnel**

Social Security Number	Name (last, first)	Position/Location	Effective Date

**\*Corrections to Minutes/Agenda/Personnel Action**

<b>Board Agenda</b>	<b>Personnel Action:</b>			
	<b>EMPLOYMENT OF EXTRA-CURRICULAR/EXTRA-DUTY PERSONNEL</b>			
	<b>NAME</b>	<b>POSITION/LOCATION</b>		<b>POSITION/LOCATION</b>
Agenda 04.23.14 Schmidt, Pg. 3	Samples, Phillip	Auxiliary SSAC Assistant Girls Basketball Coach Fayetteville High <b>TAC020-15</b>	<i>Should have been</i>	Auxiliary SSAC Assistant <b>Middle</b> Girls Basketball Coach Fayetteville High <b>TAC021-15</b>

**Initial Request for Approval to add a New Professional and/or Service Position within the County School System**

Position Code	Title of Position	Assignment Location	Grade Level Served	Number of Days Employed	Anticipated Start Date	Estimated Annual Salary	Funding Source Code- 1 State aid 2 State Grant 3 Federal Grant 4 County Funds 6 RESA 7 Donations 8 Other Sources	Specific Funding Source if indicate Source Codes 2, 3, 7, or 8	Account Code-including, *Fund *Project *Program/Function Codes

**Employment of Professional and/or Service Personnel into Newly Funded Positions**

SS Number	Name (last, first)	Valid Credential	Endorsement/ Grade Range	Credential Expiration Date	Assigned Location, Position, Grade Range	Employment Effective Date	Annual Salary