

Administrative Leave with Pay Checklist

Name of Employee: _____ Date: _____

Employee ID# _____

You are being placed on administrative leave with pay pending the outcome of an investigation into allegations of conduct and behavior that if substantiated could result in corrective action up to and including termination of your employment. This leave is not disciplinary action and no allegations have been substantiated at this time. The following information is intended to outline your rights and responsibilities while on leave.

In order to maintain the integrity of the investigation process, as well as maintain necessary confidentiality, you are instructed to adhere to the following checked parameters. Failure to abide in any way with any/all of the following checked directives may result in the termination of your employment with the Douglas County School District.

You are directed to:

_____ Leave your badge and/or keys with your supervisor and/or Human Resources.

For security purposes, access to the following will be suspended during your leave period:

_____ All District servers

_____ E-mail

_____ Voicemail

During your leave period, you will not have access to school or school grounds unless specified otherwise below:

_____ By appointment: _____

_____ Other: _____

During your administrative leave period:

_____ A District investigator may be contacting you and you are expected to cooperate in this investigation.

_____ You are required to be available during regular work hours for such an appointment or return-to-work meeting.

_____ You may not contact any students, parents, or personnel involved with the school or school district except for the Building Administrator, your immediate supervisor or Human Resources.

_____ District personnel will conduct a prompt and thorough investigation and will inform you of the results of the investigation.

_____ Should you be contacted by co-workers or other DCSD staff, you should not discuss any aspects of the investigation until the matter has been resolved.

Employee Signature: _____ Date: _____

Supervisor/HR Signature: _____ Date: _____