

11/25/2019

TO: Regional Staff

FR: Regional Minister and President

RE: Record Keeping Required by Our Regional Board

First, please read the following from the 2019 revised Personnel Policy of our Region.

E. Record Keeping: Records of the following areas shall be kept by the Administrative Assistant for all program and support staff and will be reviewed annually at the January Personnel Committee meeting. Such information will be given to the Administrative Assistant by the staff member involved. **The calendar year will be used to figure new staff member vacation/sick leave/continuing education leave. Days earned will be prorated based upon a staff members beginning date of employment.**

1. Vacation days accumulated and taken
2. Sick leave days accumulated and taken
3. Overtime work accumulated and taken
4. Continuing education accumulated and taken
5. Continuing education budgeted and used.

For context, review the policy [here](#). Anyone who is unsure of their vacation or leave time, etc. should review their contract or letter of call. If there are questions, contact the Regional Minister and President.

For 2020, I want us to begin doing a better job of our record keeping. Fortunately, Regional staff members have done a good job of managing their time away from work responsibly. The need for documentation is not meant to reflect distrust. Believe it or not, accurate and up-to-date personnel leave records can provide important data to protect us and our Region.

For now, I would like to ask that you send a quick email with the information listed above to Jessica so that a report for 2019 can be compiled to give to the Personnel Committee at their January meeting.

In 2020, however, I want to ask us to use the attached form to report all that is required by our Personnel Policy.



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REGIONAL PERSONNEL LEAVE REPORT

NAME: _____ DATE: _____

EMERGENCY CONTACT INFORMATION:

VACATION LEAVE REQUEST

FROM: _____ TO: _____

DAYS ACCUMULATED YEAR TO DATE:

NOTES: (optional)

CONTINUING EDUCATION LEAVE REQUEST EVENT:

FROM: _____ TO: _____

DAYS ACCUMULATED YEAR TO DATE:

REGIONAL STAFF CONTINUING EDUCATION FUNDS USED:

NOTES: (optional)

SICK/FAMILY LEAVE REPORT FROM: TO:

NOTES: (optional)

PERSONAL LEAVE DAY REPORT DATE:

I have reviewed and approved this request.

William B. Rose-Heim, Regional Minister and President

Date: