

**EAST BUCHANAN COMMUNITY SCHOOL DISTRICT  
2010-2011  
CERTIFIED STAFF**

**INSURANCES**

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>✦ Health/Major Medical           <ul style="list-style-type: none"> <li>\$600.00 Per Month Toward Purchase of Insurance Benefits</li> <li>Additional Costs (Salary Reduction) *</li> </ul> </li> <br/> <li>✦ Dental           <ul style="list-style-type: none"> <li>Fully Paid Single Premium</li> <li>\$52.66 Additional Family Per Month * (Salary Reduction) *</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>✦ Long Term Disability           <ul style="list-style-type: none"> <li>60%</li> </ul> </li> <br/> <li>✦ Life Insurance           <ul style="list-style-type: none"> <li>\$25,000 Double Indemnity</li> </ul> </li> <br/> <li>✦ Vision Insurance           <ul style="list-style-type: none"> <li>\$6.76 Additional Per Month</li> </ul> </li> </ul> |
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\* Premium amounts change annually on July 1st of each year.

**LEAVES**

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>✦ Illness           <ul style="list-style-type: none"> <li>Fist Year = 10 Days</li> <li>Second Year = 11 Days</li> <li>Third Year = 12 Days</li> <li>Fourth Year = 13 Days</li> <li>Fifth Year = 14 Days</li> <li>Sixth Year = 15 Days</li> <li>Accumulative to 125 Days</li> </ul> </li> <br/> <li>✦ Professional           <ul style="list-style-type: none"> <li>As Approved</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>✦ Family Illness           <ul style="list-style-type: none"> <li>5 days</li> <li>Accumulative to 7 Days</li> </ul> </li> <br/> <li>✦ Personal           <ul style="list-style-type: none"> <li>2 Days</li> <li>Accumulative to 4 Days</li> </ul> </li> <br/> <li>✦ Bereavement           <ul style="list-style-type: none"> <li>Immediate Family = 6 Days</li> <li>Extended Family or Friend = 2 Days</li> </ul> </li> </ul> |
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**EAST BUCHANAN COMMUNITY SCHOOL DISTRICT  
2010-2011  
CLASSIFIED STAFF**

**INSURANCES**

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**EAST BUCHANAN COMMUNITY SCHOOL DISTRICT  
2010-2011  
BUS DRIVERS**

**LEAVES**



**Illness**

Fist Year = 10 Days  
Second Year = 11 Days  
Third Year = 12 Days  
Fourth Year = 13 Days  
Fifth Year = 14 Days  
Sixth Year = 15 Days  
Accumulative to 125 Days



**Professional**

As Approved



**Family Illness**

5 days  
Accumulative to 7 Days



**Personal**

2 Days  
Accumulative to 4 Days



**Bereavement**

Immediate Family = 6 Days  
Extended Family or Friend = 2 Days