

**Application for Per Session Employment and Claim for Retention Rights for 2005-2006**

**Directions:** Please read the second page of this form before completing it. This form must be completed prior to commencement of employment by a person applying for work in a per session activity. A copy of this form must be retained by the per session program supervisor. An applicant who wishes to claim retention rights must assert such a claim on this form. No person may be employed or paid for a second per session activity or for more than 400 hours in one or a combination of per session activities without prior written approval of the Division of Human Resources in accordance with Chancellor's Regulation C-175.

Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Home Address \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ File # \_\_\_\_\_ Social Security # \_\_\_\_\_

I. Are you a full time employee of the NYC Department of Education? \_\_\_ Yes \_\_\_ No If yes, indicate current work location: Region \_\_\_ District \_\_\_ School/Office \_\_\_\_\_

License or Title \_\_\_\_\_ Hours of Employment From \_\_\_\_\_ to \_\_\_\_\_

**II. Under Collective Bargaining Agreements, you may claim retention rights in only one activity. (Please refer to #14 on the reverse side of this form.)**

Per Session Position For Which You Are Applying: Program Name \_\_\_\_\_

Region \_\_\_ District \_\_\_ Approximate Start Date: \_\_\_\_\_ Do you claim retention rights? \_\_\_ Yes \_\_\_ No

School/Office \_\_\_\_\_ Approximate Total # of Hours in Activity \_\_\_\_\_

Work Hours Monday-Friday \_\_\_\_\_ to \_\_\_\_\_ Saturday- Sunday \_\_\_\_\_ to \_\_\_\_\_

**III. Between July 1, 2005 and June 30, 2006 have you worked or do you plan to work in any other per session activity? \_\_\_ Yes \_\_\_ No. If yes, indicate all positions below.**

a) Program Name \_\_\_\_\_

Region \_\_\_ District \_\_\_ Approximate Start Date: \_\_\_\_\_ Do you claim retention rights? \_\_\_ Yes \_\_\_ No

School/Office \_\_\_\_\_ Approximate Total # of Hours in Activity \_\_\_\_\_

Work Hours Monday-Friday \_\_\_\_\_ to \_\_\_\_\_ Saturday- Sunday \_\_\_\_\_ to \_\_\_\_\_

b) Program Name \_\_\_\_\_

Region \_\_\_ District \_\_\_ Approximate Start Date: \_\_\_\_\_ Do you claim retention rights? \_\_\_ Yes \_\_\_ No

School/Office \_\_\_\_\_ Approximate Total # of Hours in Activity \_\_\_\_\_

Work Hours Monday-Friday \_\_\_\_\_ to \_\_\_\_\_ Saturday- Sunday \_\_\_\_\_ to \_\_\_\_\_

**IV. Will your total per session hours for this year, including the hours for the position for which you are applying, exceed 400? \_\_\_ Yes \_\_\_ No**

**V. Declaration:** I have read and understand the requirements cited in Chancellor's Regulation C-175. I have also read the second page of this application which contains pertinent provisions from Chancellor's Regulation C-175. I agree to be bound by those provisions. I affirm that the information given above is, to my knowledge, accurate and complete and I understand that a willfully false answer to any question contained herein is a Class E felony, which shall render this application null and void and may result in loss of retention rights, cancellation of employment, loss of pay, recoupment of compensation already paid or disciplinary action.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**VI. Approval By Per Session Supervisor:** I certify that this applicant possesses the qualifications established for the position and that the selection was made after following advertising procedures set forth in Chancellor's Regulation C-175, and the Standard Operating Procedures Manual. (A copy of the advertisement is attached.)

\_\_\_\_\_  
Signature of Per Session Program Supervisor

\_\_\_\_\_  
Date

### Summary of Chancellor's Regulation C-175

Chancellor's Regulation C-175 is available for review in your principal's office, Regional Operations Center (ROC), on the DHR website and at the Division of Human Resources, Per Session Monitoring Unit, 65 Court Street-Room 405, Brooklyn, New York 11201. Each school maintains a copy of the Standard Operating Procedures Manual for Schools (SOPM). Individuals may review a copy of these procedures in order to familiarize themselves with the process by which per session employees are processed and paid.

1. All per session employees must complete an application for per session activity (OP175) prior to commencing service.
2. Individuals applying for a second per session activity must obtain an approved waiver prior to commencing service in the second activity (OP175 W)
3. If an individual has claimed retention rights in a per session activity, s/he must submit a waiver for any other per session activity regardless of whether or not the activity begins prior to the activity in which the individual claims retention rights. (Example: A teacher claims retention rights in Activity X which begins each year in October. S/he applies to work in a per session activity during July and August. S/he must submit a waiver for this summer per session activity.)
4. Individuals who have been approved for waivers in prior years must resubmit new waiver applications each year. For this purpose, the per session year is from July 1<sup>st</sup> to June 30<sup>th</sup>.
5. Individuals who have been granted a per session waiver for a second position are required to submit an additional waiver form for exceeding the limit on the maximum number of hours that can be served in a per session year. The maximum number of hours of per session work that may be performed annually by employees is announced in periodic Personnel Memoranda from the Division of Human Resources.
6. No individual is authorized to work in a per session activity during a normal school workday.
7. Per session employment, whether funded from the same or a different source, may not be used as a means of providing additional compensation for work similar to that which is performed in an individual's primary assignment.
8. Individuals cannot serve in a per session activity for which, in their primary assignment, they are responsible for hiring, rating, or coordinating or which they normally supervise in their primary assignment.
9. No per session compensation may be paid for work performed at home.
10. Employees on sabbatical leaves beginning August 1<sup>st</sup> must complete per session activities in which they are serving in July. They will not be permitted to commence any new per session assignments until the September following the completion of the sabbatical.
11. Each per session employee is required to use a time clock to record the exact time of arrival and departure. The timecard is to be maintained at the work site and should serve as the basis of entries on the Personnel Time Report. If a time clock is not available, a daily attendance report with exact time of arrival and departure must be provided, maintained and approved by a supervisor. In every case, regardless of the specific manner in which time is reported, supervisors are accountable for verifying the record of attendance. Approval by a co-worker is not acceptable. Failure to maintain satisfactory records will result in the withholding of compensation or recoupment of payment already made.
12. Each per session employee is required to submit a time sheet for service that was performed during the prior per session period within one school day of the per session period immediately following each service.
13. Time sheets submitted for per session work which required a waiver that was not previously approved will result in the withholding of per session payment.
14. If a teacher is entitled to retention rights in a per session activity but fails to claim those rights before or at the time of application for a different per session job in which the teacher has no retention rights, the teacher may then be denied employment in the job for which there is entitlement to retention.

**Notes:** Requests for waivers must be submitted sufficiently in advance to allow the Per Session Monitoring Unit time for review and appropriate action. All requests for waivers will be reviewed and acted upon within 10 school days from the date of their submission. Per session compensation will be withheld for any individual who has not received prior written approval from the Division of Human Resources for a second per session activity or whose service exceeds the prescribed number of hours indicated in Chancellor's Regulations.

New York City Department of Education  
Division of Human Resources  
65 Court Street  
Brooklyn, New York 11201

**Request for Waiver of Restriction on Per Session Employment**

**Directions:** The appropriate Superintendent, Executive Director or designee or Personnel Manager signs and submits this form to request a waiver of any of the restrictions on per session employment in accordance with Chancellor's Regulation C-175. Per session employment may not exceed any restriction unless prior approval is received from the Division of Human Resources. Please refer to the regulation and appropriate Collective Bargaining Agreement for direction in advertising and selecting personnel for available per session positions.

Waiver is requested for Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Social Security # \_\_\_\_\_ File # \_\_\_\_\_

The applicant has been selected for the position of: \_\_\_\_\_

Budget Code \_\_\_\_\_ Region \_\_\_\_\_ District \_\_\_\_\_ Quick Code \_\_\_\_\_ Line # \_\_\_\_\_

Location of Per Session Activity: (School/Office) \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Per Session Program Supervisor: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Check the restriction(s) for which the waiver is being requested:

\_\_\_\_ multiple activities (M/A)      \_\_\_\_ number of hours over 400 limit (HRS)

Between what dates and how widely was the position advertised? (Attach copy of advertisement.) \_\_\_\_\_

Number of applications received for this position \_\_\_\_\_

Is there another applicant for whom a waiver would not be needed? \_\_\_\_ If so, indicate why this applicant was not selected. \_\_\_\_\_

**Declaration:** I certify that this position was advertised and selected in accordance with the regulations governing per session employment and the current Collective Bargaining Agreement, and that this waiver is needed to staff the position appropriately.

\_\_\_\_\_  
Signature of Superintendent, Executive Director or Designee, Personnel Manager      Date

**Declaration:** I request a waiver to permit me to work in excess of the restriction noted above governing per session employment. I understand that I am not permitted to exceed the restriction unless prior approval has been received from the Division of Human Resources.

\_\_\_\_\_  
Signature of Applicant      Date

**Note:** Attach this form to copies of the employee's APPLICATION FOR PER SESSION EMPLOYMENT AND CLAIM FOR RETENTION RIGHTS (Form OP 175) and the advertisement announcing this position, and forward to: Division of Human Resources – Per Session Monitoring Unit, 65 Court St. (Rm. 405), Brooklyn, NY 11201

**For Division of Human Resources Action**

**To Program Supervisor:** Your request for a waiver of the restriction noted above for per session year \_\_\_\_ has been  
Approved \_\_\_\_ Disapproved \_\_\_\_

\_\_\_\_\_  
Division of Human Resources      Date