



THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

CELLULAR PHONE ELECTION FOR ITINERANT TEACHERS 2018 - 2019

EMPLOYEE INFORMATION

| EMPLOYEE INQUIRY INFORMATION | | | |
|----------------------------------|--|--------------------|--|
| Employee's Name: | | Personnel Number: | |
| Name of Primary Work Location: | | Position: | |
| Additional Assigned Location(s): | | Cell Phone Number: | |

The above listed employee is an Itinerant Teacher meeting the definition below. In accordance with Article 19, Section T, of the Broward Teacher's Union-Educational Professionals (BTU-EP) Collective Bargaining Agreement, this employee shall be compensated for using his/her personal cellular phone for official School Board business or may elect to continue using an unrestricted cellular phone issued by the District.

Definition: Itinerant Teachers are those teachers who travel to two or more locations throughout the workday to provide services to students and/or student populations at different locations and may be housed at an area office or in a school within the zone.

Teachers meeting the definition stated above may include the following:

- | | |
|-----------------------------|--|
| Social Workers | Teachers of the Visually Impaired |
| Speech Language Pathologist | Teachers of the Deaf and Hard of Hearing (DDH) |
| DJJ Teachers | School Psychologists |
| Hospital/Homebound Teachers | Occupational/Physical Therapy Teachers |
| Family Counselors | Behavior Specialist |
| Program Specialist | |

Election (CHOOSE ONE ONLY):

- { } For the 2018 - 2019 school year, I elect to receive a one-time payment in accordance with contract language for using my personal cellular phone for School Board business calls.
- { } For the 2018 - 2019 school year, I elect to continue using a cellular phone issued by the District.

My signature below confirms my election for the 2018 - 2019 school year regarding using my personal cell phone for School Board business calls or using a School Board issued cellular phone.

| | |
|--|---------------|
| _____ Employee's Signature | _____ Date |
| _____ Principal/Designee Printed Name | |
| _____ Principal/Designee Signature | _____ Date |

Form Distribution: Original: Retain at location
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