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LEGAL UPDATE

April 12, 2004

To: Superintendents, Member School Districts (K-12)

From: Susanne K. Reed, Associate General Counsel

Subject: Classified Employees - Notification of Reasonable Assurance of Employment
Memo No. 4-2004

In order for classified employees who do not work during the summer to be held ineligible for unemployment benefits, section 1253.3 of the Unemployment Insurance Code (attached) requires that districts give or send these employees a "letter of assurance" no later than 30 days prior to the last day of school. The Code requires very specific language. The attached sample letters comply with Code requirements.

Letter No. 1 is a sample letter for classified employees who work less than 12 months.

Letter No. 2 is a sample letter for categorical, special, or federally-funded classified employees who work for less than 12 months.

Letter No. 3 is a sample letter for classified substitutes to be used if the district has a classified substitute list.

Please call me if you have any questions.

SKR:dlh

Attachments

(1) SAMPLE LETTER OF REASONABLE ASSURANCE for Classified Employees who work less than twelve months.

Date:
To: (name of employee)
Job Title:
From: (name and title of personnel official)
Subject: NOTIFICATION OF REASONABLE ASSURANCE FOR 2004-2005

The (name of the District) hereby notifies you that you have Reasonable Assurance of returning to our employ in the 2004-2005 school year. It is anticipated that the 2004-2005 school year will begin on or about (date). You will be expected to return to work on (date).

Nonetheless, you may file an unemployment insurance claim at the conclusion of the current school year. Your entitlement to unemployment benefits will be determined by the Employment Development Department and not by this District. If you are not offered an opportunity to perform services in the next academic term, you may be entitled to unemployment insurance benefits retroactive to the date you file an initial claim, if you file a claim for benefits within 30 days of the start of the next academic term and if you are otherwise eligible.

For the purpose of unemployment claim filing, the mailing address of record you should use is:

Name of District
District Personnel Address

Furthermore, this letter is the only official notification and authorized notification on which you should rely when determining your employment status for the next year. Please complete the attachment below and return that portion of this letter to the District personnel office no later than June _____.

_____ Yes, I will be returning in the 2004-2005 school year.
_____ No, I do not plan to return in the 2004-2005 school year and consider this my Notice of Resignation from employment with the District. If no, please indicate reason:

Signature Date

(2) SAMPLE LETTER OF REASONABLE ASSURANCE for Categorical, Special or Federally-Funded Classified Employees who work less than twelve months.

Date:

To: (name of employee)

Job Title:

From: (name and title of personnel official)

Subject: NOTICE OF END OF SCHOOL YEAR FUNDING/
REASONABLE ASSURANCE

This is to notify you that as of (indicate end of school year) there will be no work until funds for the next school year have been approved. At this time we expect to rehire you when school opens next fall. Notice of recall to work shall be by seniority and as available funds become verified.

(Optional - only include if correct: Please note that your medical insurance premiums will continue to be paid by the district through the summer months.)

You may, nonetheless, file a claim for unemployment insurance benefits. Your entitlement to benefits will be determined by the Employment Development Department and not by this District. If you are not offered an opportunity to perform services in the next academic year or term, you may be entitled to unemployment benefits retroactive to the date you filed an initial claim, if you file a claim for the benefits within 30 days after the start of the next academic year/term, and if you are otherwise eligible.

For the purpose of unemployment insurance claim filing, the mailing address of record you should use for your last employer is:

Name of District
District Personnel Address

This letter is the only official and authorized notification on which you should rely when determining your employment status for the next academic year or term.

(3) SAMPLE LETTER OF REASONABLE ASSURANCE for Classified Substitutes.

Date:

To: (name of employee)

From: (name and title of personnel official)

Subject: NOTIFICATION OF REASONABLE ASSURANCE FOR 2004-2005

The (name of school district) hereby notifies you that you have Reasonable Assurance of returning to work in this District as one of our Classified Substitutes for the 2004-2005 school year, which is anticipated to begin on or about (date). You can be assured that you will be called and offered substitute assignments after the start of the new school year when needed, if you choose to remain on our substitute list. As in the past, this District will experience a Thanksgiving recess, winter recess, and a spring recess during the 2004-2005 school year. Again following each of these recesses you will be called and offered assignments as needed.

Nonetheless, you may file unemployment insurance claim at the conclusion of the current school year. Your entitlement of unemployment benefits will be determined by the Employment Development Department and not by this District. If you are not offered an opportunity to perform services in the next academic term, you may be entitled to unemployment insurance benefits retroactive to the date you filed an initial claim, if you file a claim for benefits within 30 days of the start of the next academic term and if you are otherwise eligible.

For the purpose of unemployment claim filing, the mailing address of record you should use is:

Name of District
District Personnel Address

Furthermore, this letter is the only official notification and authorized notification on which you should rely when determining your employment status for the next year. Please complete the attachment below and return that portion of this letter to the District personnel office no later than June (date).

_____ Yes, I wish to accept this offer of continuing work as a substitute.

_____ No, I do not wish to accept this offer of continuing work as a substitute.

Reason: _____

Signature

Date