JORDAN Human Resources

7387 South Campus View Drive • West Jordan, UT 84084
Phone: 801-567-8150 • Fax: 801-567-8056
employment.jordandistrict.org
April Gaydosh, Administrator of Human Resources

PROVISIONAL STATUS NON-RENEWAL (ESP)

I am requesting the following action in relation to the below mentioned ESP employee's provisional status. This request and the documentation attached constitutes a request only. Your request will be evaluated to ensure all policy provisions are followed.

DEADLINE — DO NOT MISS

DP316B-Orderly Termination Procedures-ESP

II. H. 2. When the District determines not to renew a contract of a provisional education support professional, the education support professional shall be notified in writing at least sixty (60) days prior to the end of his/her first 12 months of employment.

STEP 1 — REQUEST TYPE

☑ **Non-Renewal** DP316B NEG – Orderly Termination Procedures – ESP

STEP 2 — EMPLOYEE INFORMATION

Employee Name _____ **School/Department** _____

Employee Position _____ **Hire Date** _____

STEP 3 — REQUIRED DOCUMENTATION (check each item and attach)

☐ Crucial Policy Review Completion — Date Completed _____

☐ 1st Evaluation Completed (Generally within six (6) months of hire) — Date of Meeting _____

☐ 2nd Evaluation Completed (Optional) — Date of Meeting _____

DP314 NEG-Provisional and Probationary ESP

II.C. Provisional employees shall be evaluated in writing prior to the end of each six-month period of their first year of employment. This evaluation shall be discussed and signed by both employee and immediate supervisor.

☐ **Submit an employee signed Written Warning or Summary of Meeting – REQUIRED**

☐ **Verify Employee is not on probation**

☐ **Other supporting documentation, if applicable**

☐ **Attach supporting documentation to this form and submit to the Assistant Director, Employee Relations & Compliance**

☐ **I am requesting this employee be placed on paid administrative leave for the 60 day notification waiting period.**
Must be approved by the Superintendent or Business Administrator with notification sent to HR.

Administrator Signature _____ **Date** _____

ADMINISTRATOR OF SCHOOLS REVIEW (office use)

Date received by AOS _____

Request ☐ Approved ☐ Denied

AOS Reason _____

AOS Signature _____ **Date** _____

HUMAN RESOURCES REVIEW (office use)

Date received by HR _____

Request ☐ Approved ☐ Denied

HR Reason _____

HR Signature _____ **Date** _____

HR USE ONLY

Non-Renewal letter sent to Principal/Director for employee signature — **Date** _____

Signed Non-Renewal letter returned to Human Resources — **Date** _____