



DIOCESE OF SANTA ROSA – LAY EMPLOYEE ACTION FORM

Please complete for **all** employees and **SEE INFORMATION AND DEFINITIONS ON BACK**

* **Effective Date of Action:** _____

New Hire **Change in Status** **Leave of Absence**

Separation of Employment **Pay rate change** (parishes only)

Information Change Address, SS# / Name -reason for change: _____

Entity Name: _____

Check one: Parish School N/A

City _____ Entity # _____

Employee Name: _____

First name _____ (M) _____ Last _____

Check one: Male Female

Social Security Number: _____ **Date of Birth:** _____ **Marital Status:** _____

Mailing Address: _____

Street #/name _____ City/State _____ Zip _____

Personal Phone: _____ **Work Phone:** _____ **E-mail:** _____

Estimated ANNUAL Earnings \$ _____ **Job Title:** _____

Needed to estimate value of life ins. if applicable

NON-EXEMPT \$ _____/Hour **EXEMPT** **CONTRACTED TEACHER/ADMINISTRATOR**

New Employee

Check one:

New Hire **Rehire**-previous hire date: _____ **Transfer** from another Diocesan entity name: _____

Parishes: Indicate position Permanent Temporary: For how long? _____

Schools: Cleared to Hire by Depart. of Cath. Schools? Yes No Application on File? Yes No

Check one: Contract MOU Sub. For how long? _____

Check one: **Less than 20 hrs./wk.** **20-29 hrs./wk.** **30+ hrs./wk.** (Employee electing to waive Health Benefits)

If benefits eligible, indicate start date: _____ Include Section 125 form & proof of other coverage)

Previously employed at another Diocesan entity name: _____

Comment: _____

Change in Status

Change FROM: **Less than 20 hrs./wk.** **20-29 hrs./wk.** **30+ hrs./wk.** (Employee waived Health Benefits.)

Change in Status due to: **Check one:** **Hours increased** **Hours reduced** **Furlough** (Attach furlough letter)

Change TO: **Less than 20 hrs./wk.** **20-29 hrs./wk.** **30+ hrs./wk.** (Employee electing to waive Health Benefits.)

Recalled from Furlough _____ Include Section 125 form & proof of other coverage)

Leave of Absence. **Check all that apply:** **FMLA / CFRA / NPLA** **SDI** **PDL** **PFL** **UI**

Projected date of return _____ Returned from LOA _____

Comment: _____

Separation of Employment

Check one:

Separation of Employment due to: (Original hire date: _____) **Eligible for Rehire?** Yes No

Termination / Dismissal Cleared to Terminate by: Human Resources, Lori Norcia Legal Counsel, Adrienne Moran

Resignation (Include resignation Letter) Teacher Contract Nonrenewal

Retirement Early Retirement. If eligible for Deferred Pension (frozen plan), benefits start date: _____

Transfer to another Diocesan entity (name): _____

Other _____

Employee had no Diocesan Benefits (less than 20 hrs./wk.)

Comment: _____

Employee: I have read, understand and acknowledge receipt of a copy of this document.

Employee Signature _____ Date: _____

Employee Refused to sign Employee unavailable for signature Copy delivered to employee via _____

Submitted by: _____ **Approved by:** _____ Date: _____

Pastor or Principal (not needed for personal information changes)

Fax this form to: Diocese of Santa Rosa, Benefits Office (707) 566-3381
(Include SUN LIFE Beneficiary form if applicable)

For questions call: Human Resources (707) 566-3322
or Benefits Office (707) 566-3349

Faxed to Benefits Office on: _____

www.srdiocese.org

Benefits Office use only:

<input type="checkbox"/> Logged LEAF sheet	<input type="checkbox"/> Updated OneAmerica _____	<input type="checkbox"/> Accounting Dept. _____	Hire history:
<input type="checkbox"/> Sent ACA Notice _____	<input type="checkbox"/> Updated RetaTrust _____	<input type="checkbox"/> Dept. of Catholic Schools _____	
<input type="checkbox"/> Sent SL Conversion form _____	BAS# _____	<input type="checkbox"/> Human Resources _____	
<input type="checkbox"/> Rec'd Sec 125 & POC	<input type="checkbox"/> Updated IBS _____	<input type="checkbox"/> Faxed Pension Services _____	

Definition of Exempt/Non Exempt Employees

Non-exempt employees-HOURLY:

- Are directly supervised by an executive, administrative, or professional employee.
- May make decisions, but more in a routine manner.
- Are subject to the wage and hour laws of the state and federal government including overtime laws.
- Are required by law to take breaks and meal breaks.

Exempt Employees-SALARY: More than 50% of time must be spent doing the following:

- An executive, administrative, or professional employee.
- Have decision making authority.
- Usually supervises others.
- Regularly and customarily exercises discretion and independent judgment. The decisions must involve matters of consequence of real and substantial significance to the **policies** or **general operation** of the business.
- Must be paid at least two times the state minimum wage for full time work.

Contracted Teacher/Administrator:

- Professionally qualified and employed by a Catholic school
- Terms, provisions and obligations are stated on the contract

Definition of Benefits Status

All Diocesan benefits are effective on the first day of month following eligibility date unless eligibility date is on the 1st of the month, and will end on the last day of the month in which employment/contract ends or full time hours end. Location administrator must "terminate" employee's health benefits [*including those who waived*] via www.RetaTrust.org.

30+ Hours per Week = Full Diocesan Benefits:

- Retirement Plan-One America (Defined Contribution)
- Sun Life Insurance
- Health Benefits Package: medical, prescription, dental, vision

20-29 Hours per Week = Part Diocesan Benefits:

- Retirement Plan-One America (Defined Contribution)
- Sun Life Insurance

Less than 20 Hours per Week = Ineligible for Diocesan Benefits:

- Only eligible for CA paid sick leave of 24 hours per calendar year

Furlough - expected to return and maintain employment status. If already on Diocesan health benefits and worked 9 months out of last 12, employee retains health benefits. If not, then CA Cobra eligible and benefits reinstated upon return.

Medical Leave Categories -Some of them run con-current

Job Protection

FMLA: Family Medical Leave Act
CFRA: CA Family Rights Act
NPLA: New Parent Leave Act
PDL: Pregnancy Disability Leave

Wage Replacement

SDI: State Disability Insurance
PFL: Paid Family Leave
UI: Unemployment Insurance

Termination

Termination of employment is a time consuming and stressful event. Though we are an "at will" State, documentation is a huge part of the process. With all of the pitfalls, it is mandatory that Legal counsel and Human Resources be involved with the termination process. Therefore, effective April 30, 2013:

As a condition of coverage for any employment claims, our insurance carrier, Catholic Mutual, has notified us that Lori Norcia, Human Resources Director for the Diocese AND Adrienne Moran, Diocesan attorney, must be **promptly** contacted if there is a potential for termination. The Diocese will need to confirm that advice of Human Resources and our attorney was sought and followed prior to termination so that we can meet these insuring requirements. Catholic Mutual has advised that failure to follow this protocol will result in the denial of coverage of the employment claim.

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For questions contact:

- Human Resources, Lori Norcia: 707-566-3322 / lnorcia@srdiocese.org
- Diocesan Attorney, Adrienne Moran: 707-544-5858 / ade@shapirogalvinlaw.org
- Benefits Coordinator, Rachael de la O: 707-566-3349 / rdelao@srdiocese.org
- Benefits Assistant, Annette Carroll: 707-566-3348 / acarroll@srdiocese.org
- Diocesan website: www.srdiocese.org