



**EMPLOYEE ELECTION FORM TO PARTICIPATE IN THE  
CLASSIFIED SCHOOL EMPLOYEE SUMMER ASSISTANCE PROGRAM**

This election form must be submitted by **March 1, 2019** to the Alhambra Unified School District Payroll Office.

**Section A. Completed by Classified School Employee:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Employee ID: \_\_\_\_\_

Employer: \_\_\_\_\_ Alhambra Unified School District \_\_\_\_\_

**Section B. Employee Election Choice for Withholdings**

1. I wish to have the following amount withheld from my monthly paychecks in the 2019-20 school year pursuant to the Classified School Employee Summer Assistance Program (CSESAP).

\$ \_\_\_\_\_

2. I elect to have the amounts specified above, and related state match funds, paid out in one or two payments in the summer recess period following the 2019-20 school year: (Select only one)

One (1) Payment

Two (2) Payments

By submission of this form, I am notifying Alhambra Unified School District in writing that I wish to participate in the CSESAP. I agree to have withholdings made from my monthly paychecks in the 2019-20 school year in the amounts specified in Section B. I am aware that the withholding amount I specify on this form is subject to adjustment by my employer if it exceeds 10 percent of my monthly paycheck. I acknowledge that my participation in the CSESAP is subject to my employer's determination that I meet all eligibility requirements.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Filing Deadline:**

A completed election form must be submitted to your employer by **March 1, 2019**, according to instructions provided by your employer.

## **Employee Election Form to Participate in the Classified School Employee Summer Assistance Program**

### ***Information and Instructions to complete the Employee Election Form to Participate in the Classified School Employee Summer Assistance Program:***

The 2018-19 Budget package signed into law provides \$50 million in one-time funding for the Classified School Employee Summer Assistance Program (CSESAP). The California Department of Education (CDE) will apportion funds to participating local educational agencies (LEAs) in August 2020, to provide up to a dollar for dollar match on amounts withheld from an LEA's participating classified school employees' monthly pay checks during the 2019-20 school year.

A participating LEA will pay their classified school employees the amounts withheld from the employee's monthly paychecks plus the CSESAP match funds attributable to the amounts withheld, in one or two payments in accordance with the employee's selected payment option made on this form, in the summer recess period following the 2019-20 school year.

### ***Is your employer a participating LEA?***

A participating LEA is required to notify its classified school employees by January 1, 2019, that it elected to participate in the CSESAP. If you received such notification, your employing school district or county office of education (employer) is a participating LEA. If you did not receive a notification, or are unsure, please check with your employer.

### ***Who must complete this form?***

Any classified school employee who wishes to participate in the CSESAP for state match funds, must complete this form and submit it to their employer by March 1, 2019. The employee must be employed by an LEA that is participating in the CSESAP; hold a position that does not require certification qualifications, as defined in California *Education Code* sections 45103, 45104, and 45256; and meet the CSESAP program eligibility requirements as described below.

The information on this form will be used by the employer LEA to determine eligibility to participate in the CSESAP.

### ***What are the eligibility requirements?***

A classified school employee must meet the following eligibility criteria to participate in the CSESAP:

1. Have been employed with the LEA for at least one year at the time the employee elects to participate;
2. Be employed by the employer for fewer than 12 months per fiscal year; and

## **Employee Election Form to Participate in the Classified School Employee Summer Assistance Program**

3. Have regular annual pay received directly from the employer that is less than two times the full time pay of a classified school employee, paid at the state minimum wage for an entire school year, at the time of enrollment. For purposes of determining annual pay, exclude any pay received during the summer recess period of the previous year.

### ***What happens after I am determined to be eligible by my employer?***

The classified school employee will have the monthly amounts specified on this form, not to exceed 10 percent of the monthly pay, withheld from their monthly paychecks during the 2019-20 school year. The monthly withholdings plus the CSESAP match funds will be paid by the employer in the summer recess period following the 2019-20 school year, in one or two payments as specified by the employee.

### ***How to File:***

Any classified school employee wishing to participate in the CSESAP must complete this form and submit it to their employer by **March 1, 2019**, according to filing instructions provided by their employer.

### ***CSESAP Information:***

Additional information, including frequently asked questions, is available on the CDE's CSESAP web page at <https://www.cde.ca.gov/fg/aa/ca/csesap.asp>.