



August 23, 2021

WSPY News

VIA EMAIL – wspynews@gmail.com

Re: FOIA request dated 8/19/21 and received 8/19/21

Subject: Provide the personnel file of Deryl Leubner.

This letter will serve as Oswego Community Unit School District 308's response to your FOIA request received on August 19, 2021 under the Freedom of Information Act (5 ILCS 140/1 et seq.), in which you asked for the above referenced information. The information regarding your request is attached. Redactions were made due to the following exemption under the Illinois Freedom of Information Act as follows:

Section 7(1)(c) - Personal information contained within public records, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy, unless the disclosure is consented to in writing by the individual subjects of the information.

Section 7.5(r) of the Illinois Freedom of Information Act, 5 ILCS 140/7.5(r): Information prohibited from being disclosed by the Illinois School Student Records Act.

The decision to withhold the redacted information was made by me consulting with our District legal counsel. You have a right to have the denial of your request reviewed by the Public Access Counselor (PAC) at the Office of the Illinois Attorney General. 5 ILCS 140/9.5(a). You can file your Request for Review with the PAC by writing to:

Public Access Counselor
Office of the Attorney General
500 South 2nd Street
Springfield, IL 62706

If you choose to file a Request for Review with the PAC, you must do so within 60 calendar days of the date of this denial letter. Please note that you must include a copy of your original FOIA request and this denial letter when filing a Request for Review with the PAC. You also have the right to seek judicial review of your denial by filing a lawsuit in the State circuit court. 5 ILCS 140/11.

To promote district transparency and assist others who may have a similar question, this responsive document will be posted online on the district's website. To access it, go to www.sd308.org and select *Our District > Freedom of Information Act Request > FOIA Request Responses > FOIA Requests Responses -2021 > then select FOIA ID #21-53*.

Please be advised that to comply with your FOIA request, the district incurred an expense that comprised of the cost of labor and resources used to search for records responsive to your request. Let me know if you have additional questions. Thank you.

John Petzke, CFO

John Petzke, CFO
Freedom of Information Officer



COMMUNITY UNIT
SCHOOL DISTRICT

World-Class Schools Serving Caring Communities

To: Deryl Leubner, Delta Aquatics Swimming Coach & Program Administrator
From: Kenneth Miller, Executive Director of Human Resources, Payroll and Benefits

CC: Dr. John Sparlin, Superintendent
Personnel File

Date: August 19, 2021

RE: Investigation Findings With Respect To Delta Aquatics

This memorandum has been sent to communicate the findings and decision regarding an investigation into misconduct with respect to your roles as the Delta Aquatics Program Administrator and Swimming Coach.

Investigation:

On July 27, 2021, you attended an investigatory meeting at the District Administrative Center regarding allegations that your conduct as the Delta Aquatics Program Administrator and Swimming Coach and as the High School Girls Swimming Coach violated Board policies and District ethics and conduct standards. Also present at this meeting were Elizabeth Palatine—OEA Co-President, Raphael Daniels—IEA/NEA UniServ Director, Valerie Patterson—Executive Director of Student Services, and me. The allegations with respect to your role as the High School Girls Swimming Coach are still under investigation and will be addressed separately.

During the investigatory meeting, you were informed that the District has received a complaint alleging that you acted inappropriately toward swimmers in Lane 8 during a Delta Aquatics girls' swim practice on June 15, 2021. Specifically, it was alleged that you were yelling at the swimmers, telling some or all of the swimmers in that lane that they "will never make it on the high school swim team," that one was a "mental minimalist," and that another was "completely useless and should become a professional lifeguard." When you were questioned about these allegations, you admitted that you were disappointed with how the swimmers in that lane – [REDACTED] -- were performing on June 15, 2021. You admitted that you did say something similar to "they will never make it on the high school swim team." You also admitted that you should have worded that differently, and that you had misspoken. Though you denied the allegations that you referred to a swimmer as a "mental minimalist," and that another was "completely useless and should just become a professional lifeguard," you stated that it's not inappropriate to refer to a swimmer as 'useless' in the context of a joke. A female swimmer present at the June 15 practice who came forward to defend your actions acknowledged that you were ranting at several swimmers on that date. She didn't know what you were specifically yelling about because you rant at the swimmers so frequently that she tunes out your rantings. At least two swimmers in Lane 8 did resign after the practice that occurred on June 15, 2021.

Kenneth Miller

*Executive Director of
Human Resources, Payroll
and Benefits*

DISTRICT ADMINISTRATION CENTER • 4175 ROUTE 71 • OSWEGO, IL 60543

P: (630) 636-3092 • F: (630) 636-3669 • kmiller01@sd308.org • WWW.SD308.ORG

In addition to the June 15, 2021 incident, the investigatory meeting also covered allegations of misconduct with respect to your role as the Program Administrator of Delta Aquatics. When you were asked about the accrediting agency that governs Delta Aquatics, you stated that it was governed by USA Swimming. The Delta Aquatics website of which you are administratively responsible as the Program Administrator states:

Delta Aquatics Swim Team Policies

As a club member of USA-Swimming, and for the physical and emotional safety of our athletes, parents, officials, chaperones, coaches, and other non-athlete members of the Delta Aquatics, we have developed and adhere to policies pertaining to athlete and non-athlete safety and conduct. These policies are listed below.

**Anti-Bullying Action Plan
Athlete Electronic Communication
Code of Conduct and Travel Policies
Electronic Communication Policy
Safe Sport Initiative
Parent Conduct / Pool Deck Rules**

The website has active links to the last two policies. When I asked you about the remaining policies during the investigatory meeting, you stated that the anti-bullying policy, code of conduct, travel, and electronic communication policies might be on the website. In an email exchange later that evening, you admitted that there are no active links to the first four policies listed as Delta Aquatics Swim Team Policies. When I asked you for hard copies of those policies, you admitted that those documents have not yet been developed.

Applicable Policies:

The following Board Policies are applicable to the allegations at hand:

- Board Policy 5:120 "Ethics and Conduct" which requires all District 308 employees to maintain high standards in their school relationships, to be considerate and cooperative, and to maintain professional and appropriate relationships with students, parents, staff members, and others.
- Board Policy 5:230 "Maintaining Student Discipline" which requires employees to refrain from disciplinary methods that may be damaging to students such as ridicule, sarcasm, or excessive temper displays.
- Board Policy 7:20 "Harassment of Students Prohibited" which prohibits conduct that includes name-calling, using derogatory slurs, stalking, and causing psychological harm.

Kenneth Miller

*Executive Director of
Human Resources, Payroll
and Benefits*

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Findings:

1. The allegations that you yelled at female swimmers in Lane 8, made statements such as “you will never make it on the high school swimming team,” referred to a swimmer as a “mental minimalist” and referred to another swimmer as “completely useless and should just become a professional lifeguard” during the Delta Aquatics Practice on June 15, 2021 are credible. There is no dispute that you made the inappropriate comment “you will never make it on the high school swimming team,” to the swimmers, and you acknowledged that you should have worded that differently. Your denial that you never said that a swimmer was a “mental minimalist” or was “completely useless and should just become a professional lifeguard” lacked credibility for the following reasons: No other witness to the events of June 15, 2021 including those who defended your actions disputed that you were either “yelling” or “ranting” at the girls in Lane 8 on the date; you admitted your disappointment with how the swimmers were performing; you admitted that you should have worded other comments differently to them; and you have previously been disciplined for lacking self-control and being verbally abusive to Delta Aquatics swimmers, as described below.
2. You were previously disciplined for misconduct in December 2019 after verbally abusing male Delta Aquatic swimmers in November 2019. On that date, you were upset at the swimmers and repeatedly yelled [REDACTED] directly at individual swimmers. You justified this action because you erroneously thought that they had each failed to do something that you thought that they should have done. As part of that discipline, you received an unpaid suspension, remedial support in the form of a mandatory anger management referral, and a clear warning that any future instances of similar conduct or violations of ethics and conduct standards would result in disciplinary action—up to and including removal from your roles as the Program Administrator and Swimming Coach for Delta Aquatics.
3. Your actions on June 15, 2021 violated Board Policy 5:120 “Ethics and Conduct” on the grounds that they were unprofessional and inappropriate for a coach to use with athletes, violated Board Policy 5:230 “Maintaining Student Discipline” on the grounds that yelling or ranting at the athletes is evidence of an excessive temper display, and violated Board Policy 7:20 “Harassment of Students Prohibited” on the grounds that your actions on that day were harassing and caused psychological harm to students and prompted more than one swimmer to quit.
4. Your comments regarding prior interactions with Safe Sport were evasive and not made in good faith. You denied having been previously warned about your behavior by USA Swimming, only to be reminded that the USA Swimming Safe Sport Program Director had previously warned you that USA Swimming didn’t condone your use of vulgarity in their program.

Kenneth Miller

*Executive Director of
Human Resources, Payroll
and Benefits*

DISTRICT ADMINISTRATION CENTER • 4175 ROUTE 71 • OSWEGO, IL 60543

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5. As Program Administrator, it was your obligation to ensure that the appropriate policies exist and are adhered to, and to ensure that the website provides accurate information to parents and students regarding such policies. You failed to ensure that the Delta Aquatics website is updated and contains accurate information for swimmers and their families. The Delta Aquatics website states that multiple policies intended to protect the physical and emotional safety of all constituents affiliated with that organization exist and are adhered to. This statement is false.
6. Your comments regarding the Delta Aquatics policies were evasive and not made in good faith. You were aware that these policies had not yet been created when you initially stated during the investigatory meeting that those policies were on the program's website. You recanted via email and admitted that, contrary to what is stated on the website, these policies have not yet been created, only after I asked you for hard copies of those policies.
7. Your inaction and evasiveness in your role as Program Administrator violated Board Policy 5:120 on the grounds that you misrepresented the status of the policies applicable to Delta Aquatics, you have allowed the Delta Aquatics website to falsely state that certain policies have been developed and are adhered to for the physical and emotional safety of those affiliated with the program.

Your positions as the Program Administrator and as the Girls' Swimming Coach for Delta Aquatics are at-will positions. Based on the above-listed findings, it is my conclusion that you have ignored the December 2019 warning and have again violated the District's ethics and conduct standards. I am exercising my authority under Board Policy 5:270 "Employment At-Will, Compensation, and Assignment" to terminate your employment as the Delta Aquatics Program Administrator and Swimming Coach, effective immediately. You are directed to immediately turn over all Program Administration information to me including but not limited to financial accounts, registration accounts, usernames and passwords, and contact information for events/meets.

You do have the right to file a written appeal to me by 5:00 P.M. on Monday, August 23, 2021. If you file a timely written appeal, you may have a name-clearing hearing before a hearing officer selected by the District. That hearing would allow you to clear your name and receive the stipends affiliated with the two Delta Aquatics positions through the end of the short course season that ends in February 2022.

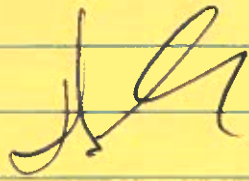
Kenneth Miller

*Executive Director of
Human Resources, Payroll
and Benefits*

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I would like to Request a formal
appeal

A handwritten signature in black ink, consisting of a stylized 'J' followed by a large loop and a horizontal stroke.

8/19/21

Community Unit School District 308

2021-2022

OEA Notification of Assignment 2021-2022

Leubner, Deryl S

Issued By: Community Unit School District 308 on 4/27/2021

Employee ID: [REDACTED] Hire Date: 08/27/1997

Position Information

Position:	Teacher - Social Studies	Start Date:	08/16/2021	End Date:	05/27/2022	Amount:	\$111,753.00
Position Location:	Oswego East High School	Days:	181	Work Calendar:	OEA - Teacher - 181 Days - 24 Pay		
		FTE:	1.0000				
		Type:	OEA Notification of Assignment 2021/2022				
		Salary Sch:	OEA 21/22 SY MS + 47, Ph.D. 23				

Total Amount: \$111,753.00

Note: Per Article XI, Section A.1 (Assignment Notification) of the OEA Professional Agreement, this Notification of Assignment is provided to you twenty (20) days prior to the end of the school year. In the event it is necessary to make a change to your assignment, you will be notified in writing. Extra Duty Pay as per Schedule(s) A, B, and C, and any other additional days or duties are not included in this notification.

Termination/Resignation Form

Sent By: ehettinger

Completed By: User - ssauer

Sent On: 11/19/2019 10:17am CT

Completed: 11/19/2019 11:36am CT

* Employee Last Name: Leubner
* Employee First Name: Deryl
* Position: Head Boys Swim Coach
* Location: Oswego East High School
* Last Day Worked: 11/19/2019
* Reason for Termination: R - Resigned - Non-Medical

Comments:

Deryl still remains as head girls swim coach

Eligible for Rehire?

Yes

* Replacing Position? (If yes, please complete the Posting Request Form on AppliTrack):

Yes

* Did you collect all District Property, i.e., keys, phone, etc.? (If no, please specify under Comments.)

Yes

Comments:

Please upload resignation letter/termination paperwork

[Deryl Leubner B. Swim.pdf](#)

Supervisor Signature:

X

Signed: Kurt Weigt/EH

Stamped: 11/19/2019 10:18:52 AM; 50.201.194.225; User - ehettinger - ehettinger@sd308.org;

FOR HR USE ONLY

Human Resources Signature

X

Signed: Sharon Sauer

Stamped: 11/19/2019 11:35:24 AM; 107.1.119.254; User - ssauer - ssauer@sd308.org;

Date of Board Meeting

Fwd: resignation

1 message

Kurt Weigt <kweigt@sd308.org>
To: Enes Hettinger <ehettinger@sd308.org>

Tue, Nov 19, 2019 at 8:12 AM

One Team One Family!

Go Wolves!

Kurt F. Weigt, CMAA
Director of Athletics
Oswego East High School
1525 Harvey Road
Oswego, IL 60543
Office: (630) 636-2224
Fax: (630) 636-2458
kweigt@sd308.org



"The Oswego East Athletic Department develops student-athletes who are disciplined, hardworking, respectful, resilient, and dedicated to the E.A.S.T. way; displaying excellence in the classroom, on the playing field, and in the community."

Follow us on Twitter...@OEHS_GoWolves

Go EAST...Go WOLVES...Go BLUE!!!!

----- Forwarded message -----

From: Deryl Leubner <dleubner@sd308.org>
Date: Tue, Nov 19, 2019 at 8:00 AM
Subject: Re: resignation
To: Kurt Weigt <kweigt@sd308.org>

Kurt,

Please accept this as my letter of resignation from the Boys Swim Team that starts on November 25th, 2019.

Sincerely,

Deryl Leubner

On Tue, Nov 19, 2019 at 7:46 AM Kurt Weigt <kweigt@sd308.org> wrote:
Deryl,

Please send your resignation ASAP.

Thank you.



NOTICE OF UNPAID SUSPENSION FROM DELTA AQUATICS

December 13, 2019

SENT VIA EMAIL (Dleubner@sd308.org)

Deryl Leubner



Dear Mr. Leubner,

This letter has been sent as formal notification that the District has concluded its investigation into your conduct on the morning of Saturday, November 16, 2019 at Oswego East High School during Delta Aquatics swimming practice.

As a result of my investigation, I have determined that the following events occurred:

- On the morning of Saturday, November 16, 2019 at approximately 10:30 A.M. you engaged in a conversation with Cuauhtemoc "Temo" Flores—Swim Coach for Delta Aquatics—while standing on the deck of the pool at Oswego East High School during a Delta Aquatics practice. The conversation was held in regards to your perception of how the members of the District 308 boys swimming team had handled signing a poster to wish [REDACTED] good luck at the sectional swimming meet the night before.
- You admitted to the use of inappropriate language during your conversation with "Temo" on the deck of the pool, and that you pointed to at least two swimmers and informed them that the conversation you were having with "Temo" was about them.
- On Monday, November 18, 2019, you self-reported your conduct to Kurt Weigt—Athletic Director at Oswego East High School, and resigned as the Head Swimming Coach for the District 308 boys swimming team. That afternoon you pulled the boys on the Delta Aquatics swimming team into the weight room adjacent to the pool at Oswego East High School, offered an explanation and apologized for your actions, and informed them that you resigned from the District 308 boys swimming team.

It is my finding that your conduct on November 16, 2019 violated Board Policy 5:120 "*Ethics and Conduct*" on the grounds that you acted unprofessionally by failing to recuse yourself from addressing a situation [REDACTED] and on the grounds that your use of profanity while in the presence of swimmers was inappropriate. Furthermore, I find that your conduct violated Board Policy 5:230 "*Maintaining Student Discipline*" on the grounds that there were District 308 students present during the practice who witnessed you engage in an excessive display of your temper.

As a result of this finding, the following corrective action will be taken:

- You will serve a one week unpaid suspension from your Delta Aquatics Program Administrator and Swim Coach roles starting Monday, December 16, 2019 through Sunday, December 22, 2019.

Effective immediately upon the resumption of the Boys Delta Aquatics swimming season, you will serve a six week unpaid suspension from the coaching or administration of the Boys Delta Aquatics program. During this time you will have no contact with, nor will you conduct official business on behalf of, the Boys Delta Aquatics program.

As a result of these suspensions, you will see a reduction in your Delta Aquatics Program Administrator and Swim Coach salary equivalent to four weeks of pay. This reduction will be spread over the remaining payroll periods of the 2019-2020 fiscal year.

- You will meet with a District provided professional to undergo mandatory anger management therapy. It is the District's expectation that you will comply fully with the recommendations and course of treatment set forth by the professional.
- Upon your return to coaching and serving as the Program Administrator for the Boys Delta Aquatics program, you will be expected to honor any parent requests for you to recuse yourself from coaching or interacting with their swimmers.

Going forward, you are hereby directed to recuse yourself as a Swim Coach and/or Program Administrator from situations involving [REDACTED] to refrain from the use of profanity and inappropriate language while acting in a professional capacity, and to fully-comply with the recommendations and course of treatment set forth by the District-provided anger management professional.

You are hereby notified that any violation of the directives contained in this letter, and any future instances where you engage in conduct similar to what occurred on November 16, 2019, will result in disciplinary action, up to and including your dismissal from the roles of Delta Aquatics Program Administrator and Swim Coach.

It is your responsibility to contact me immediately if you have any questions regarding the contents of this letter or the District's expectations for your conduct going forward.

Sincerely,



Kenneth L. Miller, PHR

Executive Director of Human Resources, Payroll and Benefits

cc: Dr. John Sparlin, Superintendent (via e-mail)
Christi Tyler, Chief Financial Officer (via e-mail)
Personnel File



May 3, 2019

**Notification of Assignment
2019 – 2020**

Name: DERYLS LEUBNER

Tenured: Yes

Assignment: 1.00 Social Studies Teacher

Building: Oswego East HS.

Salary Schedule Placement*:

Lane: 06

Step: 22

Contract Days: 181

Other Information:

Note: Per Article XI, Section A.1 (Assignment Notification) of the OEA Professional Agreement, this Notification of Assignment is provided to you twenty (20) days prior to the end of the school year. In the event it is necessary to make a change to your assignment, you will be notified in writing.

A handwritten signature in black ink, appearing to read "Kenneth L. Miller".

Kenneth L. Miller

Executive Director of Human Resources, Payroll and Benefits

**Annual Salary is per current CBA and is subject to change pending the outcome of negotiations.*

April 27, 2018

**Notification of Assignment
2018 – 2019**

Name: Deryl S. Leubner **Tenured:** Yes

Assignment: 1.00 Social Studies Teacher

Building: Oswego East HS.

Salary Schedule Placement:

Lane: 6 **Step:** 21

Contract Days: 181

Other Information:

Note: Per Article XI, Section A.1 (Assignment Notification) of the OEA Professional Agreement, this Notification of Assignment is provided to you twenty (20) days prior to the end of the school year. In the event it is necessary to make a change to your assignment, you will be notified in writing.



Roxana Sanders
Executive Director of Human Resources

April 28, 2017

**Notification of Assignment
2017 – 2018**

Name: DERYL S. LEUBNER **Tenured:** Yes

Assignment: 1.00 SOCIAL STUDIES

Building: OSWEGO EAST HIGH

Salary Schedule Placement:

Lane: 6 **Step:** 20

Contract Days: 181

Other Information:

Note: Per Article XI, Section I (Teacher Assignment) of the OEA Professional Agreement, this Notification of Assignment is provided to you twenty (20) days prior to the end of the school year. In the event it is necessary to make a change to your assignment, you will be notified in writing.



Roxana Sanders
Executive Director of Human Resources



April 22, 2016

**Notification of Assignment
2016 – 2017**

Name: DERYL S. LEUBNER **Tenured:** Yes

Assignment: 1.00 SOCIAL STUDIES

Building: OSWEGO EAST HIGH

Salary Schedule Placement:

Lane: 05 **Step:** 17

Contract Days: 181

Other Information:

Note: Per Article XI, Section 1 (Teacher Assignment) of the OEA Professional Agreement, this Notification of Assignment is provided to you twenty (20) days prior to the end of the school year. In the event it is necessary to make a change to your assignment, you will be notified in writing.

Roxana Sanders
Director of Human Resources



November 6, 2015

**Revised Notification of Assignment
2015 – 2016**

Name: DERYL S. LEUBNER **Tenured:** Yes

Assignment: 1.0 SOCIAL STUDIES

Building: OSWEGO EAST HIGH

Salary Schedule Placement:

Lane: 05 **Step:** 17 **Salary:** \$ 80,013.00

Contract Days: 181

Other Information:

Note: Per Article XI, Section I (Teacher Assignment) of the OEA Professional Agreement, this Notification of Assignment is provided to you twenty (20) days prior to the end of the school year. In the event it is necessary to make a change to your assignment, you will be notified in writing.

Roxana Sanders
Director of Human Resources



May 14, 2015

**Notification of Assignment
2015 – 2016**

Name: DERYL S. LEUBNER **Tenured:** Yes

Assignment: I. 0 SOCIAL STUDIES

Building: OSWEGO EAST HIGH SCHOOL

Lane: 05

First Semester Step: 16 **First Semester Salary:** \$ 39,047.50

Mid-year Step: 17 **Mid-year Salary:** \$ 39,577.00

Contract Days: 181

Lane, Step, Salary and Contract Days are pending contract negotiations.

Note: Per the union contract, this statement is to inform teachers what their building assignment will be and what grade/subject they will teach. Changes in above assignments may be made if necessary, and the teacher involved in such changes will be notified as soon as possible.

Roxana Sanders
Director of Human Resources



June 18, 2014

Administration
Center
4175 Route 71
Oswego, IL 60543

Dr. John W. Sparlin
Assistant
Superintendent of
Administrative
Services
Phone 630.636.3080
Fax 630.636.3688

**NOTIFICATION OF ASSIGNMENT
TENURED STAFF
2014-2015**

Name: DERYL S. LEUBNER
Building Assignment: OSWEGO EAST HIGH SCHOOL
Grade/Subject Area: SOCIAL STUDIES

Salary Schedule Placement:

1st Semester - Lane: 05 Mid-Step: 15 Salary: \$ 37,957.00

2nd Semester - Lane: 05 Step: 16 Salary: \$ 38,518.00

Contract Days: 181 Percent Time: 100%

Other Information:

Note: Per the union contract, this statement is to inform teachers what their building assignment will be and what grade/subject they will teach. Changes in above assignments may be made if necessary, and the teacher involved in such changes will be notified as soon as possible.

A handwritten signature in black ink that reads 'John W. Sparlin'.

Dr. John W. Sparlin
Assistant Superintendent for Administrative Services



May 2, 2014

Administration
Center
4175 Route 71
Oswego, IL 60543

John W. Sparlin
Executive Director of
Administrative
Services
Phone 630.636.3080
Fax 630.636.3688

**NOTIFICATION OF ASSIGNMENT
TENURED STAFF
2014-2015**

Name: DERYL S. LEUBNER
Building Assignment: OSWEGO EAST HIGH SCHOOL
Grade/Subject Area: SOCIAL STUDIES
Salary Schedule Placement:

1st Semester - Lane: 05 Mid-Step: 15

2nd Semester - Lane: 05 Step: 16

Contract Days: 181 Percent Time: 100%

Other Information:

Note: Per the union contract, this statement is to inform teachers what their building assignment will be and what grade/subject they will teach. Changes in above assignments may be made if necessary, and the teacher involved in such changes will be notified as soon as possible.

A handwritten signature of John W. Sparlin in black ink.

John W. Sparlin
Executive Director for Administrative Services



May 1, 2013

Administration
Center
4175 Route 71
Oswego, IL 60543

**NOTIFICATION OF ASSIGNMENT
TENURED STAFF
2013-2014**

John W. Sparlin
Executive Director of
Administrative
Services
Phone 630.636.3080
Fax 630.636.3688

NAME: DERYL LEUBNER
BUILDING ASSIGNMENT: OSWEGO EAST HIGH
GRADE/SUBJECT AREA: SOCIAL STUDIES
SALARY SCHEDULE PLACEMENT:

1st Semester (9/13/13 -2/28/14 payroll) - Lane: 05 Mid-Step: 14 Salary: \$ 36,851.25

2nd Semester (3/14/14-8/28/14 payroll) - Lane: 05 Step: 15 Salary: \$ 37,396.00

Contract Days: 181 Percent Time: 100%

Other Information:

Note: Per the union contract, this statement is to inform teachers what their building assignment will be and what grade/subject they will teach. Changes in above assignments may be made if necessary, and the teacher involved in such changes will be notified as soon as possible.

A handwritten signature in black ink that reads 'John W. Sparlin'.

John W. Sparlin
Executive Director for Administrative Services



February 11, 2013

**NOTIFICATION OF ASSIGNMENT
TENURE STAFF
2012-2013**

Administration Center
4175 Route 71
Oswego, IL 60543

John W. Sparlin
Executive Director of
Administrative Services
Phone 630.636.3080
Fax 630.636.3688

NAME: DERYL LEUBNER

BUILDING ASSIGNMENT: OSWEGO EAST HIGH

GRADE/SUBJECT AREA: SOCIAL STUDIES

SALARY SCHEDULE PLACEMENT:

Lane: 5 Step: 14 Salary: \$72,613.00

Contract Days: 181 Percent Time: 100

Other information:

Note: Per the union contract, this statement is to inform teachers what their building assignment will be and what grade/subject they will teach. Changes in above assignments may be made if necessary, and the teacher involved in such changes will be notified as soon as possible.

John W. Sparlin
Executive Director for Administrative Services



Administration Center
4175 Route 71
Oswego, IL 60543

Todd M. Colvin
Associate Superintendent
for Administrative Services
Phone 630.636.3080
Fax: 630.636.3688

April 30, 2012

**NOTIFICATION OF ASSIGNMENT
2012-2013**

NAME: DERYL LEUBNER

BUILDING ASSIGNMENT: OSWEGO EAST HIGH

GRADE/SUBJECT AREA: SOCIAL STUDIES

SALARY SCHEDULE PLACEMENT:

Lane: TBD Step: TBD Salary: TBD

Contract Days: 181 Percent Time: 100%

Other information:

Note: Per the union contract, this statement is to inform teachers what their building assignment will be and what grade/subject they will teach. Changes in above assignments may be made if necessary, and the teacher involved in such changes will be notified as soon as possible.

A handwritten signature in black ink that reads 'Todd M. Colvin'.

**Todd Colvin
Associate Superintendent for Administration**



Administration Center
4175 Route 71
Oswego, IL 60543

Todd M. Colvin
Associate Superintendent
for Administrative Services
Phone 630.636.3080
Fax: 630.636.3688

November 18, 2011

**NOTIFICATION OF ASSIGNMENT
2011-2012**

NAME: DERYL LEUBNER

BUILDING ASSIGNMENT: OSWEGO EAST HIGH

GRADE/SUBJECT AREA: SOCIAL STUDIES

SALARY SCHEDULE PLACEMENT:

Lane: 4 Step: 14 Salary: \$ 68,486.00

Contract Days: 181 Percent Time: 100%

Other information:

Note: This statement is a revision of the notification of assignment you received in May 2011. It verifies your salary, step and lane for the 2011-12 school year. Schedule A,B & C assignments are not reflected on this statement. In addition, a leave of absence may adjust the days worked and the earnings of this statement.

A handwritten signature in black ink that reads 'Todd M. Colvin'.

**Todd Colvin
Associate Superintendent for Administration**



Administration Center
4175 Route 71
Oswego, IL 60543

Todd M. Colvin
Associate Superintendent
for Administrative Services
Phone 630.636.3080
Fax: 630.636.3688

May 9, 2011

**NOTIFICATION OF ASSIGNMENT
2011-2012**

NAME: DERYL LEUBNER

BUILDING ASSIGNMENT: OSWEGO EAST HIGH

GRADE/SUBJECT AREA: SOCIAL STUDIES

SALARY SCHEDULE PLACEMENT:

Lane: TBD Step: TBD Salary: TBD

Contract Days: 181 Percent Time: 100

Other information:

Note: Per the union contract, this statement is to inform teachers what their building assignment will be and what grade/subject they will teach. Changes in above assignments may be made if necessary, and the teacher involved in such changes will be notified as soon as possible.

**Todd Colvin
Associate Superintendent for Administration**

May 5, 2010



Administration Center
4175 Route 71
Oswego, IL 60543

Phone 630.636.3080
Fax: 630.554.2168
www.oswego308.org

Todd Colvin
Associate Superintendent
for Administrative Services

**NOTIFICATION OF ASSIGNMENT
2010-2011**

NAME: DERYL LEUBNER

BUILDING ASSIGNMENT: OSWEGO EAST HIGH

GRADE/SUBJECT AREA: SOCIAL STUDIES

SALARY SCHEDULE PLACEMENT:

***1st Semester (9/15/10-2/28/11 payroll) Lane: 3 Step: 12 Salary: \$ 30,474.74**

2nd Semester(3/15/11-8/30/11 payroll) Lane: 3 Step: 12 Salary: \$ 30,474.74

Contract Days: 180 Percent Time: 100 %

Additional Information: *1st semester includes the furlough day deduction

Note: Per the union contract, this statement is to inform teachers what their building assignment will be and what grade/subject they will teach. Changes in above assignments may be made if necessary, and the teacher involved in such changes will be notified as soon as possible.

Todd M. Colvin

**Todd Colvin
Associate Superintendent for Administration**



Administration Center
4175 Route 71
Oswego, IL 60543

Phone 630.636.3080
Fax: 630.636.3669
www.oswego308.org

Todd Colvin
Associate Superintendent
for Administrative Services

Educational Excellence. Caring Community.

November 9, 2009

**NOTIFICATION OF ASSIGNMENT
2009-2010**

NAME: DERYL LEUBNER

BUILDING ASSIGNMENT: OSWEGO EAST HIGH

GRADE/SUBJECT AREA: SOCIAL STUDIES

SALARY SCHEDULE PLACEMENT:

Lane: 03	Contract Days: 181
Step: 12	Percent Time: 100.00%

TRS Creditable Earnings: \$60,251.00

Other Information:

Note: Per the union contract, this statement is to inform teachers what their building assignment will be and what grade/subject they will teach. Changes in above assignments may be made if necessary, and the teacher involved in such changes will be notified as soon as possible.

A handwritten signature in black ink that reads "Todd M. Colvin".

**Todd Colvin
Associate Superintendent for Administration**

LEUBNER, DERYL

OSWEGO EAST HIGH SCHOOL



Administration Center
4175 Route 71
Oswego, IL 60543

Phone 630.636.3080
Fax: 630.554.6242
www.oswego308.org

Todd Colvin
Assistant Superintendent
for Administration

May 5, 2009

**NOTIFICATION OF ASSIGNMENT
2009-2010**

NAME: DERYL LEUBNER

BUILDING ASSIGNMENT: OSWEGO EAST HIGH

GRADE/SUBJECT AREA: SOCIAL STUDIES

SALARY SCHEDULE PLACEMENT:

*Lane: 03	Contract Days: 181
*Step: 11	Percent Time: 100.00%

***TRS Creditable Earnings:**

***Due to union negotiations, salary, lane and step have yet to be determined.**

Other Information:

Note: Per the union contract, this statement is to inform teachers what their building assignment will be and what grade/subject they will teach. Changes in above assignments may be made if necessary, and the teacher involved in such changes will be notified as soon as possible.

A handwritten signature in black ink that reads "Todd M. Colvin".

**Todd Colvin
Assistant Superintendent for Administration**

May 5, 2008



Administration Center
4175 Route 71
Oswego, IL 60543

Phone 630.636.3080
Fax: 630.554.6242
www.oswego308.org

Todd Colvin
Assistant Superintendent
for Administration

**NOTIFICATION OF ASSIGNMENT
2008-2009**

NAME: LEUBNER, DERYL

BUILDING ASSIGNMENT: OSWEGO EAST HIGH

GRADE/SUBJECT AREA: SOCIAL STUDIES

SALARY SCHEDULE PLACEMENT:

Lane:	03	Contract Days:	181.00
Step:	11	Percent Time:	100%

TRS Creditable Earnings: \$59,508.00

Other Information:

Note: Per the union contract, this statement is to inform teachers what their building assignment will be and what grade/subject they will teach. Changes in above assignments may be made if necessary, and the teacher involved in such changes will be notified as soon as possible.

A handwritten signature in black ink that reads 'Todd M. Colvin'.

**Todd Colvin
Assistant Superintendent for Administration**

LEUBNER, DERYL

OSWEGO EAST HIGH SCHOOL

September 28, 2007



NOTIFICATION OF ASSIGNMENT

2007-2008

Administration Center
4175 Route 71
Oswego, IL 60543

Phone 630.636.3080
Fax: 630.554.6242
www.oswego308.org

Todd Colvin
Assistant Superintendent
for Administration

NAME: LEUBNER, DERYL

BUILDING ASSIGNMENT: OSWEGO EAST HIGH

GRADE/SUBJECT AREA: SOCIAL STUDIES

SALARY SCHEDULE PLACEMENT:

Lane: 03	Contract Days: 181
Step: 11	Percent Time: 100%

TRS Creditable Earnings: \$56,945

Other Information:

THIS NOTIFICATION DOES NOT INCLUDE EXTRA-CURRICULAR ACTIVITIES

Note: Changes in above listed programs may be made if necessary and the teacher involved in such changes will be notified as soon as possible.

Todd Colvin

LEUBNER, DERYL

OSWEGO EAST HIGH SCHOOL



April 27, 2007

**NOTIFICATION OF ASSIGNMENT
TENURE STAFF
2007-2008**

Administration Center
4175 Route 71
Oswego, IL 60543

Phone 630.636.3080
Fax: 630.554.6242
www.oswego308.org

Todd Colvin
Assistant Superintendent
for Administration

NAME: DERYL LEUBNER
BUILDING ASSIGNMENT: OSWEGO EAST HIGH
GRADE/SUBJECT AREA: SOCIAL STUDIES
PERCENT TIME: 100 %
CONTRACT DAYS: 181
SALARY: TBD

EXTRA-CURRICULAR ASSIGNMENTS:

Head Boys Swim
Head Girls Swim

OTHER INFORMATION:

Note: At the completion of negotiations, another Notification of Assignment will be issued to you. Changes in above assignments may be made if necessary, and the teacher involved in such changes will be notified as soon as possible.

Todd M. Colvin

Todd Colvin
Assistant Superintendent for Administration



Administration Center
4175 Route 71
Oswego, IL 60543

Phone 630.636.3080
Fax: 630.554.6242
www.oswego308.org

Todd Colvin
Assistant Superintendent
for Administration

April 20, 2006

NOTIFICATION OF ASSIGNMENT

2006-2007

NAME: DERYL LEUBNER

BUILDING ASSIGNMENT: OSWEGO EAST HIGH SCHOOL

GRADE/SUBJECT AREA: SOCIAL STUDIES

SALARY SCHEDULE PLACEMENT:

Lane 03	TRS Salary	\$54,374.00
Step 11	Longevity	
Contract Days 181		
Percent Time 100.00%	Total TRS Creditable	\$54,374.00

EXTRA-CURRICULAR ASSIGNMENTS:

OEHS Head Boys Swim	(9,10+)	\$6,060.00
OEHS Head Girls Swim	(9,10+)	\$6,060.00

OTHER INFORMATION:

Note: Changes in above listed programs may be made if necessary, and teacher involved in such changes will be notified as soon as possible.

Todd Colvin
Assistant Superintendent for Administration

Name: DERYL LEUBNER

Building: OSWEGO EAST HIGH SCHOOL



September 30, 2005

**TENURE TEACHER
NOTIFICATION OF ASSIGNMENT
2005-2006**

Administration Center
4175 Route 71
Oswego, IL 60543

Phone 630.636.3080
Fax: 630.554.6242
www.oswego308.org

Todd Colvin
Assistant Superintendent
for Administration

NAME: DERYL LEUBNER

HOME SCHOOL: OSWEGO EAST HIGH SCHOOL

GRADE/SUBJECT AREA: SOCIAL STUDIES

SALARY SCHEDULE PLACEMENT:

Lane 3

Step 11

TRS Creditable Earnings

\$52,919.00

Contract Days 181

Per Cent Time 100.00%

**THIS NOTIFICATION DOES NOT INCLUDE SCHEDULE A
ASSIGNMENTS.**

**Note: Changes in above listed programs may be made if necessary and
the teacher involved in such changes will be notified as soon as possible.**

Todd Colvin

DERYL LEUBNER

OSWEGO EAST HIGH SCHOOL



Administration Center
4175 Route 71
Oswego, IL 60543

Phone 630.636.3080
Fax: 630.554.6242
www.oswego308.org

Kerry J. Foderaro, Ed. D.
Assistant Superintendent
for Administration

May 6, 2005

**NOTIFICATION OF ASSIGNMENT
2005-2006**

NAME: DERYL LEUBNER

BUILDING ASSIGNMENT: OSWEGO EAST HIGH SCHOOL

GRADE/SUBJECT AREA: SOCIAL STUDIES

CONTRACT DAYS: 181 PER CENT TIME: 100%

EXTRA-CURRICULAR ASSIGNMENTS

**Head Boys' Swim Coach
Head Girls' Swim Coach**

OTHER INFORMATION

Note: Changes in above listed programs may be made if necessary and the teacher involved in such changes will be notified as soon as possible. Salary will be determined pending settlement of teacher negotiations.

**Kerry J. Foderaro
Assistant Superintendent for Admin.**

DERYL LEUBNER

OSWEGO EAST HIGH SCHOOL



Oswego Community Unit District 308

May 3, 2004

NOTIFICATION OF ASSIGNMENT

2004 – 2005

NAME: Deryl Leubner
BUILDING ASSIGNMENT: Oswego East High School
GRADE/SUBJECT AREA: Social Studies

SALARY SCHEDULE PLACEMENT:

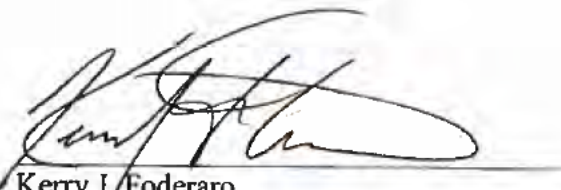
Lane	3	TRS Salary	\$51,264.83
Step	12	Longevity	
Contract Days	181		
Per Cent Time	100%	Total TRS Creditable	\$51,264.83

EXTRA-CURRICULAR ASSIGNMENTS:

Varsity Boys' Swim Coach	(9,10)	\$5,713.77
Varsity Girls' Swim Coach	(9,10)	\$5,713.77

OTHER INFORMATION:

Note: Changes in above listed programs may be made if necessary, and teacher involved in such changes will be notified as soon as possible.



Kerry J. Foderaro
Assistant Superintendent
for Administration



Oswego Community Unit District 308

May 12, 2003

NOTIFICATION OF ASSIGNMENT

2003 – 2004

NAME: Deryl Leubner
BUILDING ASSIGNMENT: Oswego High School
GRADE/SUBJECT AREA: Social Studies

SALARY SCHEDULE PLACEMENT:

Lane	3	Base Salary	\$43,590.00
Step	11	Longevity	
Contract Days	181	Total Salary	\$43,590.00
Per Cent Time	100%	TRS Creditable	\$47,901.09

EXTRA-CURRICULAR ASSIGNMENTS:

Head Boys' Swim Coach (9-10)	Base: \$5,048.00	TRS: \$5,547.38
Head Girls' Swim Coach (9-10)	\$5,048.00	\$5,547.38

OTHER INFORMATION:

Note: Changes in above listed programs may be made if necessary, and teacher involved in such changes will be notified as soon as possible.

Kerry J. Foderaro
Assistant Superintendent
for Administration

1/ 7/2003

2002-2003 SALARY INFORMATION

			LANE	STEP	CONTRACT (TRS Amount)
LEUBNER, DERYL S.	OHS	Social Studies			
		BASE SALARY	3	10	\$43,624.17
		HEAD BOYS SWIM	9	10	\$5,385.77
		HEAD GIRLS SWIM	9	10	\$5,385.77
					\$54,395.71
					*



Oswego Community Unit District 308

Dr. Kerry J. Foderaro
Assistant Superintendent
for Administration

SUBJECT: REQUEST FOR NAME/ADDRESS/PHONE and/or INSURANCE CHANGE.

Please print legibly.

YOU ARE REQUESTING THE FOLLOWING CHANGES EFFECTIVE _____

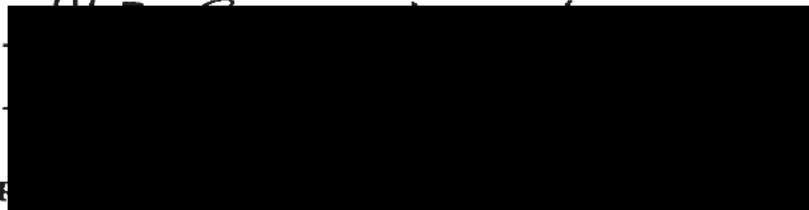
(Marriage date or divorce date) _____

YOUR NAME (as currently on our records): Deryl Leubner

NAME SHOULD BE CHANGED TO: _____

(For any name change you are required to obtain a new Social Security card and provide this office with a copy of it BEFORE we will change your name on our records to avoid any problems with Internal Revenue or your pension.)

NEW ADDRESS:



NEW PHONE NUMBER

INSURANCE COVERAGE: (YOU NEED TO COMPLETE A NEW INSURANCE CARD FOR ANY CHANGE IN COVERAGE AND/OR BENEFICIARY CHANGE) ANY CHANGE MUST BE MADE WITHIN 30 DAYS OF MARRIAGE OR DIVORCE DATE. If change is due to a birth of a child or adoption, child must be added with child's date of birth (and social security card number if available) within 30 days of birth or adoption.

Additionally, employee should complete name change, or address change form (and if desired a beneficiary change) form for either TRS or IMRF (even if you are only changing an address).

If you choose to change your State or Federal W4 from single to married or vice-versa please complete the new form.

KJF:bd

Received in District Personnel/Payroll Office for file: _____

name_change.doc

Administration Center • 4175 Route 71 • Oswego, IL 60543 • Phone (630) 554-3447 • Fax (630) 554-2168
Internet Address <http://www.oswego.kendall.k12.il.us>

W SDS
7-22-02



Oswego Community Unit District 308

May 1, 2002

NOTIFICATION OF ASSIGNMENT

2002 – 2003

NAME: Deryl Leubner

BUILDING ASSIGNMENT: Oswego High School

GRADE/SUBJECT AREA: Social Studies

Extra-Curricular Assignments: Head Boys' Swim Coach
Head Girls' Swim Coach

Other Information:

Note: Changes in above assignments may be made if necessary, and the teacher involved in such changes will be notified as soon as possible.



Kerry J. Foderaro
Assistant Superintendent
for Administration



Oswego Community Unit District 308

September 7, 2001

**NOTIFICATION OF ASSIGNMENT
REVISED
2001 – 2002**

NAME: Deryl Leubner

BUILDING ASSIGNMENT: Oswego High School

GRADE/SUBJECT AREA: Social Studies

SCHEDULE PLACEMENT: Lane 2 Step 9

BASE SALARY: \$34,079.00
(Excluding Extra-Curricular Assignments)

Extra-Curricular Assignments:

Head Boys' Swim Coach	\$ 4,233.00
Head Girls' Swim Coach	\$ 4,233.00

Other Information:

Note: Changes in above listed programs may be made if necessary, and teacher involved in such changes will be notified as soon as possible.

Kerry J. Foderaro
Assistant Superintendent
for Administration

Administration Center • 4175 Route 71 • Oswego, IL 60543 • Phone (630) 554-3447
• Fax (630) 554-2168
Internet Address <http://www.oswego.kendall.k12.il.us>



Oswego Community Unit District 308

May 1, 2001

NOTIFICATION OF ASSIGNMENT

2001 – 2002

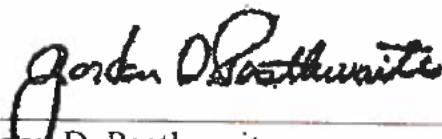
NAME: Deryl Leubner
BUILDING ASSIGNMENT: Oswego High School
GRADE/SUBJECT AREA: Social Studies
SCHEDULE PLACEMENT: Lane 1 Step 9
BASE SALARY: \$32,002.00
(Excluding Extra-Curricular Assignments)

Extra-Curricular Assignments:

Head Boys' Swim Coach \$ 4,233.00
Head Girls' Swim Coach \$ 4,233.00

Other Information:

Note: Changes in above listed programs may be made if necessary, and teacher involved in such changes will be notified as soon as possible.


Gordon D. Postlewaite
Assistant Superintendent
for Administration

Administration Center • 4175 Route 71 • Oswego, IL 60543 • Phone (630) 554-3447
• Fax (630) 554-2168
Internet Address <http://www.oswego.kendall.k12.il.us>



Oswego Community Unit District 308

May 9, 2000

NOTIFICATION OF ASSIGNMENT

2000 – 2001

NAME: Deryl Leubner

BUILDING ASSIGNMENT: Oswego High School

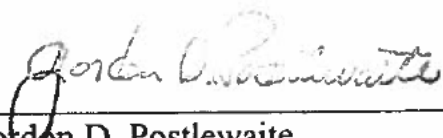
GRADE/SUBJECT AREA: Social Studies

BASE SALARY: \$30,785.00
(Excluding Extra-Curricular Assignments)

Extra-Curricular Assignments:
Head Boys Swim Coach
Head Girls Swim Coach

Other Information:

Note: Changes in above listed programs may be made if necessary, and teacher involved in such changes will be notified as soon as possible.


Gordon D. Postlewaite
Assistant Superintendent
for Administration



Oswego Community Unit District 308

May 7, 1999

NOTIFICATION OF ASSIGNMENT

1999 - 2000

NAME: Deryl Leubner

BUILDING ASSIGNMENT: Oswego Senior High School

GRADE/SUBJECT AREA: Social Studies

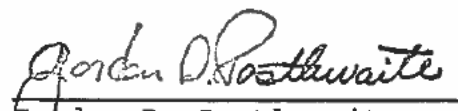
Extra-Curricular Assignments:

Head Boys' Swim Coach
Head Girls' Swim Coach

Other Information:

☒ Full Time ☐ Part Time

NOTE: Changes in above listed programs may be made if necessary, and teacher involved in such changes will be notified as soon as possible.


Gordon D. Postlewaite
Assistant Superintendent
for Administration

TEACHER'S CONTRACT

It is Hereby Agreed by and between the Board of Education of School District No. 308; Counties of Kendall, Kane and Will; State of Illinois; and **Deryl Leubner** a legally qualified teacher, that the said teacher shall teach in said school district for the school year 1998 - 1999. Compensation will be paid for the following services rendered:

\$ 25,840.00	Base salary (For teaching assignment)
\$ 5,220.00	Extra Curricular (As indicated below)
\$	Other (As indicated below)
\$ 31,060.00	Total

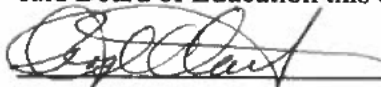
It is Further Agreed that this total amount is payable in 24 equal installments at the end of each pay period as scheduled by the Board (15th and 30th of each month).

It is Further Agreed that said Board will pay in full the 8 percent retirement contribution to the Illinois State Teachers' Retirement System in addition to the salary schedule amount as well as the 1/2 of 1 percent TRS health insurance contribution.

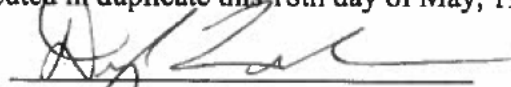
It is Further Agreed that this contract is subject to the School Laws of Illinois and the reasonable and lawful regulations of said Board.

It is Further Agreed that, if negotiations are in progress when this contract is approved, adjustments, if necessary, can be made when said negotiations are concluded and a new Professional Negotiation Agreement becomes effective.


Pursuant to an aye and nay vote taken and recorded at a lawful meeting of the said Board of Education held at Oswego, Illinois, on the 18th day of May, 1998, and by order of said Board of Education this contract is executed in duplicate this 18th day of May, 1998.



President



Teacher



Secretary

BUILDING ASSIGNMENT(S)	<u>Oswego High School</u>
STEP ON SALARY SCHEDULE	<u>B.S. Lane 1, Step 6</u>
TEACHING ASSIGNMENT(S)	<u>Social Studies</u>
EXTRA CURRICULAR ASSIGNMENT(S)	<u>Head Varsity Swim Coach (7-3) \$2610.</u> <u>Head Varsity Swim Coach (7-3) \$2610.</u>
OTHER:	_____ _____

conteach.doc

TEACHER'S CONTRACT

It is Hereby Agreed by and between the Board of Education of School District No 308, Counties of Kendall, Kane and Will, State of Illinois; and **Deryl Leubner** a legally qualified teacher, that the said teacher shall teach in said school district for the school year 1997 - 1998. Compensation will be paid for the following services rendered:

\$ 24,911.00	Base salary (For teaching assignment)
\$ 4,684.00	Extra Curricular (As indicated below)
\$	Other (As indicated below)
\$ 29,595.00	Total

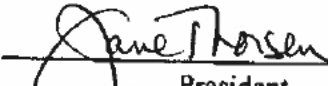
It is Further Agreed that this total amount is payable in 24 equal installments at the end of each pay period as scheduled by the Board (15th and 30th of each month).

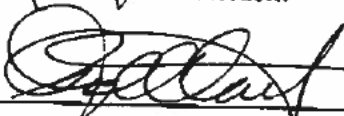
It is Further Agreed that said Board will pay in full the 8 percent retirement contribution to the Illinois State Teachers' Retirement System in addition to the salary schedule amount as well as the 1/2 of 1 percent TRS health insurance contribution.

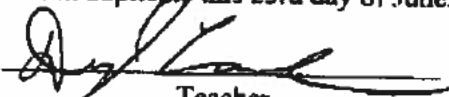
It is Further Agreed that this contract is subject to the School Laws of Illinois and the reasonable and lawful regulations of said Board.

It is Further Agreed that, if negotiations are in progress when this contract is approved, adjustments, if necessary, can be made when said negotiations are concluded and a new Professional Negotiation Agreement becomes effective.

Pursuant to an aye and nay vote taken and recorded at a lawful meeting of the said Board of Education held at Oswego, Illinois, on the 23rd day of June, 1997, and by order of said Board of Education this contract is executed in duplicate this 23rd day of June, 1997.


President


Secretary


Teacher

BUILDING ASSIGNMENT(S)

Oswego High School

STEP ON SALARY SCHEDULE

BS Lane 1, Step 5

TEACHING ASSIGNMENT(S)

Social Studies

EXTRA CURRICULAR ASSIGNMENT(S)

Head Varsity Swim Coach-(7-2) \$2342.00 men
Head Varsity Swim Coach-(7-2) \$2342.00 women

OTHER:

continen.doc

OSWEGO COMMUNITY HIGH SCHOOL
DEPARTMENT OF ATHLETICS

Route 71, Oswego, IL 60543-0729 (708) 554-0483

CRAIG WATSON
ATHLETIC DIRECTOR

DAVID MYERS
ASSISTANT ATHLETIC DIRECTOR

DARYL THOMPSON
PRINCIPAL

June 19, 1996

Mr. Gordon Postlewaite
Oswego School District #308
Rt. 71
Oswego, IL 60543

Dear Mr. Postlewaite,

Upon calling Tavares High School in Florida and speaking with Sue Mullen, the assistant principal, I am pleased to say that Deryl Leubner has accepted the girls' varsity swimming position. Ms. Mullen raved about Deryl's classroom performance which further convinced me that he was the right person for the job. I have encouraged Deryl to get the necessary paperwork into you so that he can be a substitute in our district. I would very much like him to be our boys' coach as well, but he wants to see how much substituting is available first.

<u>Step</u>	<u>Year</u>	<u>Salary</u>
7	1	2320

Sincerely,

Craig
Craig Watson

*U.S. swim cert
- CPP
1st aide
safety train swim coach*

*dept. guide
need WST
need pub trans cert
need AESOP cert*



High Academic Expectations within a Caring School Climate

Training Acknowledgement

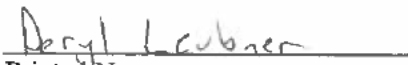
Return to Oswego Community Unit School District 308 Human Resources Department


Administration Center
4175 Route 71
Oswego, IL 60543

Phone 630.636.3080
Fax: 630.554.2168
www.oswego308.org

I acknowledge that I have watched the Sexual Harassment video and received a copy of Oswego Community Unit School District 308 Sexual Harassment (Policy Number 5:20) and Harassment (Policy Number 5:25) policies. I understand and agree that I am responsible for reading, understanding, and complying with the Sexual Harassment and Harassment policies. I understand that Sexual Harassment and Harassment is prohibited in Oswego Community Unit School District 308 and such conduct will result in disciplinary action as outlined in the Board policies.


Signature


Printed Name


Date



33



STATE OF ILLINOIS

GORDON JOHNSON
DIRECTOR

DEPARTMENT OF
CHILDREN AND FAMILY SERVICES

406 EAST MONROE
SPRINGFIELD, ILLINOIS 62701-1498

ACKNOWLEDGEMENT OF MANDATED REPORTER STATUS

I, Deryl Leubner, understand that when I am employed as a
(Employee name)
Substitute Teacher, I will become a mandated reporter under
(Type of Employment)

the Abused and Neglected Child Reporting Act (Ill. Rev. Stat. 1985, ch. 23, pars. 2051 et seq.) This means that I am required to report or cause a report to be made to the child abuse Hotline number (1-800-25A-BUSE) whenever I have reasonable cause to believe that a child known to me in my professional or official capacity may be abused or neglected. I understand that there is no charge when calling the Hotline number and that the Hotline operates 24-hours per day, 7 days per week, 365 days per year.

I further understand that the privileged quality of communication between me and my patient or client is not grounds for failure to report suspected child abuse or neglect. I know that if I willfully fail to report suspected child abuse or neglect I may be found guilty of a Class A misdemeanor. This does not apply to physicians who will be referred to the Illinois State Medical Disciplinary Board for action.

I also understand that if I am subject to licensing under the Illinois Nursing Act, the Medical Practice Act, the Psychologist Registration Act, the Social Workers Registration Act, the Dental Practices Act, the School Code, or "AN ACT to regulate the practice of Podiatry," I may be subject to license suspension or revocation if I willfully fail to report suspected child abuse or neglect.

I affirm that I have read this statement and have knowledge and understanding of the reporting requirements which apply to me under the Abused and Neglected Child Reporting Act.


Signature of Applicant/Employee

6-30-96

Date

CANDIDATE RECOMMENDATION

POSITION:

Delta Aquatics Program Director

- ☐ New position
☒ Replacement (for who) - Jamie Fruit
☐ Leave Cover - If so, for who? _____
☐ Temporary

Dates Covering _____

RECOMMENDED CANDIDATE:

Deryl Leubner

Is recommended candidate a current District 308 employee?

YesIf yes, current building name: OCHS

Current position:

Teacher7,500
Stipend

☐ Yes, Application and all supporting documents have been submitted to DAC. (If not, principal must contact candidate to complete)

FULL-TIME ONE BUILDING ONLY?:

Yes

If yes, building name: _____

No

PART-TIME ONE BUILDING ONLY?:

Yes

No

PERCENT EMPLOYED: _____

IF MULTIPLE BUILDINGS - PERCENT TIME IN EACH BUILDING:

Percent	Building Location	Percent	Building Location

INTERNAL APPLICANTS (All must be interviewed - use backside of this sheet if necessary)

Name

School

Interviewed by:

EXTERNAL APPLICANTS INTERVIEWED (Use backside of this sheet if necessary)

Name

School

Interviewed by:

EMPLOYMENT CHECKED ON RECOMMENDED CANDIDATE

☐ Length of time employed at all previous schools needs to be verified by you with HR and application/resume must match. The area below is for verifying employment on the candidate with the HR department of their prior educational employer(s) (not personal).

Name

School

Dates of employment

Verified by:

Signature of person making the employment recommendation:

Jane M. Cole

Date:

9/25/08

****Maintenance/Custodial Only:** After the Building level has completed this form, please forward the completed form and reference checks to the Director of Building and Grounds at the Maintenance Department.

To be completed by Director of Building and Grounds:

Recommended start date (pending completion of required paperwork): _____

Recommended Step placement: _____

Director of Building and Grounds

4/17/2008 candidate rec revised

Needs - P-Card ✓

APP

Phone - Jenny Kruebe ✓

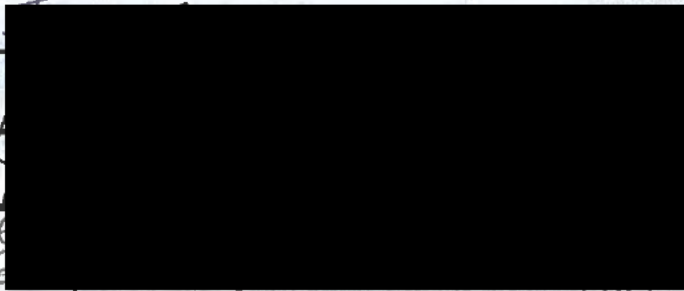
CANDIDATE RECOMMENDATION

POSITION: Social Studies (Teacher)

SCHOOL: Oswego East High School

INTERNAL APPLICANTS (all must be interviewed)
Name School

Interviewed by:



Ed Howerton

Ed Howerton

Ed Howerton

Ed Howerton

Ed Howerton

EXTERNAL APPLICANTS INTERVIEWED

Name School

Interviewed by:

RECOMMENDED CANDIDATE: Deryl Leubner (1.0) OHS Social Studies

REFERENCES CHECKED ON RECOMMENDED CANDIDATE

Name: _____ Position: _____ Checked by: _____ Date: _____

SIGNATURE OF PERSON MAKING THE EMPLOYMENT RECOMMENDATION:

Ed Howerton
Supervising Administrator

Date 11/12/103

Deryl Leubner

Kerry Foderaro
4275 Route 71
Oswego, IL 60543

October 12, 2003

Dear Dr. Foderaro:

I am writing to express my interest in transferring my teaching and coaching positions to Oswego East High School for the 2004-05 school year. I am currently a tenured teacher in Oswego District #308 in the Social Studies Department, and I am also the Head Swim Coach for both the girls' and boys' teams. As my resume indicates, I have experience in teaching at multiple grade levels, and I am well-versed in many areas of the Oswego Social Studies curricula. During my teaching experiences, I have taught under both traditional and block schedules, supervised student teachers, and developed new course curricula. I have also served as mentor to several new teachers who have joined our staff. On a personal level, I have sincere affection for the Oswego district and look forward to continuing to work with our talented staff.

In addition to my teaching duties, I wish to remain active in a coaching and supervisory capacity. I have extensive experience with aquatics programs as an athlete, a coach, and as an aquatics director. I am highly familiar with the complexities of current aquatics programs, and I have developed and maintained myriad contacts and relationships with coaches and directors at the local, regional, state and national levels.

If District #308 intends to employ an Aquatics Director, I respectfully request consideration as a candidate. My past experiences with aquatics programs, my personal athletic qualifications and my vision for Oswego's athletic programs at large set me apart from other candidates. I look forward to meeting with you at your convenience to further discuss any questions you may have. Thank you for your consideration.

Sincerely,

A handwritten signature in black ink, appearing to read 'Deryl Leubner', followed by a long horizontal flourish.

Deryl Leubner
Oswego High School

Deryl Leubner



Objective: To continue in my career as teacher and as a coach at the high school level.

Education: Masters of Education, Oliver University, Bourbonnais, IL
June 2001-June 2003
Bachelor of Science, Southern Illinois University, Carbondale, IL
Social Sciences Education
August 1988-June, 1993

Work

Experience:

- 1997-Present Tenured Teacher, Oswego Senior High School, Oswego, IL
- I have taught Social Studies at the Sophomore, Junior and Senior levels
 - I have developed and modified curricula for multiple courses
 - I have implemented a variety of teaching techniques, including cooperative learning, team teaching, reading and writing across the curriculum
 - I have taught under traditional and block schedules
 - I have performed planning and organizational tasks related to my discipline
 - I have administered the State and Federal Constitution exams
- 1997-2000 Summer School Social Studies, Oswego High School
- I have taught Political Science and administered the State and Federal Constitution exams
 - I have worked with students to adapt curricula to individual needs
 - I have taught students who wish to advance as well as those who need to remediate
- 1996-1997 Teacher, Marmion Military Academy, Aurora, IL
- I taught freshman level Social Studies courses
 - I taught Physical Education to all levels of classes
 - I have implemented a variety of teaching techniques, including cooperative learning, team teaching, reading and writing across the curriculum
- 1997 Aquatics Director, Hunters Green Country Club, Tampa, FL
- I coordinated and supervised the competitive swim program
 - I coordinated and supervised the lesson program
 - I was responsible for scheduling all pool usage
 - I was responsible for overseeing pool maintenance
- 1994-1996 Teacher, Tavares High School, Tavares, Florida
- I taught Social Studies courses at the Freshman, Sophomore and Junior levels
 - I taught under both a traditional and 4-Block schedule
 - I performed planning and organizational tasks related to my discipline
 - I acted as Freshman Class Sponsor and participated in related activities
 - I have implemented a variety of teaching techniques, including cooperative learning, team teaching, reading and writing across the curriculum

- 1993-1994 Teacher, Leesburg High School, Leesburg, Florida
- I taught Math, Science, and Social Studies courses at all levels
 - I performed planning and organizational tasks related to my discipline
 - I have taught under traditional and block schedules
 - I have implemented a variety of teaching techniques, including cooperative learning, team teaching, reading and writing across the curriculum

Coaching
Experience:

- 1997-Present Head Coach, Boys and Girls Swimming, Oswego High School
- I establish and maintain practice schedules
 - I develop training procedures and practices
 - I manage and maintain paperwork and programs
 - I work with athletes in an individual and group setting
 - I develop and maintain rapport with athletes to develop as individuals
 - I work with the administration at Both Oswego and East Aurora to establish a pool usage schedule
- 1997-Present Head Coach, West Suburban Dolphins, Oswego
- I establish and maintain practice schedules
 - I develop training procedures and practices
 - I work with athletes in an individual and group setting
 - I develop and maintain rapport with athletes to develop as individuals
 - I serve on the Board of Directors, overseeing all decisions regarding the function, direction, and goals of the team
- 1996-1997 Assistant Coach, Boys Swimming, Marmion Military Academy
- I developed and plan daily training procedures and practices
 - I worked with other coaches to develop and maintain program
 - I managed paperwork and statistics for individual groups
 - I worked with specialized groups to develop strength and maintain performance
- 1996-1997 Head Age Group Coach/ Assistant National Team Coach, Academy Bullets Swim Team, Aurora IL
- I established and maintained practice schedules
 - I developed training procedures and practices
 - I worked with athletes in an individual and group setting
 - I developed and maintained rapport with athletes to assist them in their growth as individuals
 - I work with other coaches to develop and maintain program
 - I was the program director for the Bullets learn-to-swim program (Swim America)

- 1993-1996 Head Coach, Triangle Area Golden Gators Swim Team, Eustis, Fl.
- I established and maintained practice schedules
 - I developed training procedures and practices
 - I managed and maintained paperwork and programs
 - I worked with athletes in an individual and group setting
 - I developed and maintained rapport with athletes to assist them in their growth as individuals
 - I organized and maintained transportation schedules for athletic competitions
 - I was responsible for promotion of the program
 - I maintained the financial records for the swim team
 - I was responsible for creating meet schedules and entering the team into appropriate competitions

Athletic Activities and Honors

- Helped coach Marmion Military Academy to a top five finish at Illinois State meet
- Coached IHSA State Qualifiers and Finalists
- Coached 10 Illinois Senior Championship finalists, 1997-present
- Coached 4 Illinois Age Group Champions, 1997-present
- Helped coach Academy Bullets to their first Junior National title, 1997
- Coached 10 Junior National Qualifiers, Finalists, and Champions, 1993-1997
- Coached 8 Florida Senior Championship finalists, 1993-1997
- Coached 7 Florida Age Group Championships finalists, 1993-1997
- Coached 6 Florida High School State Finalists, 1993-1996
- U.S. Open Champion, Team and Individual, 1993
- Member of Four Time National Champions Fort Lauderdale Swim Team, 1991-1993
- FINA World Ranked 50 Freestyle and 100 Freestyle, 1990-1993
- Senior National Finalist, 1990-1993
- Olympic Trials Qualifier, 1992
- Team Captain, SIU 1991-1992
- Most Valuable Swimmer, SIU 1992
- Pan-American, Pan-Pacific Trials Qualifier, 1991
- World Championships Trials Qualifier, 1991
- Five Time NCAA Division One All-American, 1989-1991
- United States Swimming All-American, 1990
- Most Improved Swimmer, SIU 1988
- Three Time YMCA All-American, 1988
- IHSA All-State 50 freestyle 1988
- IHSA State finalist 1987, 1988
- Former SIU School Record Holder

References available upon request

**TEACHER CANDIDATE
SUMMARY DATA SHEET**

Date 6/11/97

Name Daryl Leubner

Position Soc St. Teacher OHS

Experience creditable to salary schedule
Where _____ Years _____

Education
Institution _____ Degree/Hrs _____

Leesburg High School 1

S.I.U. BS

Twinsburg High School 2

Maumee 1

Certificates Held

Notes:

09.

Salary Schedule Placement

Teaching position

Soc St - OHS

Lane 1

Step 5

Salary 24,911.00

Extra curricular

Head Varsity Soccer Men

Cat 7

Year 2

Salary 2342.00

DATA_SHT.DOC

Women

2342.00

CANDIDATE RECOMMENDATION

OK
6/6/97

POSITION: ~~Deryl Luebner~~ SOCIAL STUDIES

SCHOOL: O.H.S.

INTERNAL APPLICANTS (all must be interviewed) Interviewed by:

Name

School

[REDACTED]

T.C.

EXTERNAL APPLICANTS INTERVIEWED

Interviewed by:

Name

School

[REDACTED]

T.C.

T.C.

T.C. / Craig Watson

RECOMMENDED CANDIDATE: Deryl LUEBNER

REFERENCES CHECKED ON RECOMMENDED CANDIDATE

Name:

Position:

Checked by:

Date:

Mickey Marks

Admin

T.C.

6/2

Kim Mullins

Admin

T.C.

6/6

SIGNATURE OF PERSON MAKING THE EMPLOYMENT RECOMMENDATION:

Judd M. Colver

Date 6, 6, 97

Supervising Administrator

CANDIDATE RECOMMENDATION

21
20

POSITION: VARSITY GIRLS SWIMMING COACH

SCHOOL: OSUNGBO HIGH SCHOOL

INTERNAL APPLICANTS (all must be interviewed) Interviewed by:
Name School

_____	_____
_____	_____
_____	_____

EXTERNAL APPLICANTS INTERVIEWED Interviewed by:
Name School

_____	_____
_____	_____
_____	_____

RECOMMENDED CANDIDATE: DERYL LOUBNER

REFERENCES CHECKED ON RECOMMENDED CANDIDATE

Name:	Position:	Checked by:	Date:
<u>Sue Mullen</u>	<u>Asst. Prin.</u>	<u>Tavarez High School Watson</u>	<u>6/19/96</u>

SIGNATURE OF PERSON MAKING THE EMPLOYMENT RECOMMENDATION:

Craig Watson Date 6/19/96
Supervising Administrator

PERSONNEL INFORMATION SHEET
CERTIFIED STAFF

SOCIAL SECURITY NO. [REDACTED]
(Mr. Mrs. Miss) Miss Leubner Deryl S
(Last) (First) (Middle) (Maiden or Previous)

STREET ADDRESS [REDACTED]
CITY [REDACTED] STATE IL ZIP CODE [REDACTED]
SEX M HOME PHONE [REDACTED] BIRTHDATE [REDACTED]
(M or F) MO DAY YR

ASSIGNMENT Oswego Sr High Teacher Social Studies
(Building) (Position - Teacher, Counselor, etc.) Grade or Subject Area

*** C E R T I F I C A T I O N ***

TYPE	ISSUE DATE	CERTIFICATE NUMBER	DESCRIPTION
<u>09</u>	<u>9-3-96</u>	<u>1542746</u>	<u>Social Studies A.S.</u>

*** E D U C A T I O N - Please list highest degree first ***

DEGREE	YEAR	UNIVERSITY/COLLEGE	MAJOR(S)	MINOR(S)
<u>BA</u>	<u>93</u>	<u>Southern Illinois</u>	<u>Ed</u>	

*** E X P E R I E N C E ***

Total Years Taught
in District 308 1
(Including current year)

Total Years Taught 2
in Illinois
(Including years in District 308)

Total Years Taught
Out of Illinois 3

AVAILABILITY QUESTIONNAIRE FOR PART-TIME EMPLOYMENT

Name Mr. Daryl Leubner Phone [REDACTED]
Mrs. [REDACTED] Area Code [REDACTED]
Miss [REDACTED]

Address [REDACTED]
Street or R.R. Number [REDACTED]
[REDACTED]
City [REDACTED] State [REDACTED] Zip Code [REDACTED]

1) Are you restricted to working only certain hours of the day? YES _____ NO ✓

If the answer is YES, indicate hours available: _____

2) Are you restricted to working only certain days of the week? YES _____ NO ✓

If the answer is YES, circle only the days available: M T W Th F

3) In which schools would you prefer to substitute? No preference

4) Grades or subjects which you prefer to substitute? No preference

5) Type of Certificate _____ Certificate # _____

6) College Major Social Studies College Minor _____

7) Are you a retired teacher receiving a pension from the Illinois Teachers'

Retirement System? YES _____ NO ✓

8) Do you plan to substitute in other school districts? YES ✓ NO _____

9) Are you interested in full-time employment if it becomes
available? YES ✓ NO _____

Signature: Daryl Leubner

Date: 6-30

PAYROLL INFORMATION SHEET

Womens Swim Coach 96/97. His WSI was reviewed
and seen by B. Postlewaite 7/2/96.

First Check Will Be _____

PERSONNEL OFFICE
OSWEGO COMMUNITY UNIT SCHOOL DISTRICT #308
P.O. Box 729
RT. #71
OSWEGO, ILLINOIS 60543

Oswego Community Unit School District #308 is in compliance with the U.S. Civil Rights Act of 1964 and Title IX Educational Amendment of 1972, Part 86. The school district provides equal employment opportunity to all individuals and does not discriminate on the basis of race, color, religion, national origin, age, handicap, ancestry or sex.

Applications are retained for six (6) months.

EMPLOYMENT APPLICATION - CERTIFIED PERSONNEL

Please Type or Print Personal Information.				DATE <u>5/23/96</u>
NAME <u>Leubner</u>	<u>Deryl</u>	<u>Scot</u>		
(LAST)	(FIRST)	(MIDDLE)	(MAIDEN)	
PRESENT ADDRESS <u>[REDACTED]</u>				
CITY <u>[REDACTED]</u>	STATE <u>[REDACTED]</u>	ZIP CODE <u>[REDACTED]</u>		
UNTIL _____ 19____ PHONE () _____				
PERMANENT ADDRESS <u>[REDACTED]</u>				
CITY <u>[REDACTED]</u>	STATE <u>[REDACTED]</u>	ZIP CODE <u>[REDACTED]</u>		
SOCIAL SECURITY NO. <u>[REDACTED]</u>		PHONE (708) <u>[REDACTED]</u>		
Do you hold current Illinois Certificates? _____ Type _____ Number _____				
Type _____ Number _____ Type _____ Number _____				
TELEPHONE: Work <u>[REDACTED]</u>				
Emergency <u>[REDACTED]</u> Name: <u>Nancy Leubner</u>				
DRIVER'S LICENSE NO.: <u>[REDACTED]</u>		ISSUING STATE: <u>[REDACTED]</u>		

Position Preferred

Please number 1,2,3 in order of preference

List Junior/Senior High
Subject(s) Preferred

_____ Kindergarten 2 Junior High (Grades 6-8)
_____ Grades 1-2-3 1 Senior High (Grades 9-12)
_____ Grades 4-5

1. Social Studies
2. History

If you are applying for a junior/senior high position (Gr. 6-12), what subjects are you qualified (18 semester hours/certificate endorsement) to teach?

Social Studies

If you are applying for a special education position, in what area are you qualified (certificate endorsement) to teach?

NOTE: Applicant should exercise the greatest care in preparing this form. Information given herein becomes a legal part of the employment contract in case of your election. Please do not omit any item. If your transcripts or credentials carry a different surname than you have given us, please indicate other name to assist district personnel in matching your papers with your file.

EDUCATION AND PROFESSIONAL TRAINING

Name of School, Location From Which You Graduated. Include High School, College and Post-Graduate Work in Order Taken	Years Attended	Semester Hours Credit	Degree or Diploma	MAJOR SUBJECT and Semester Hours Credit	MINOR SUBJECT and Semester Hours Credit
Duquoin Sr High School	1984-88				
Southern Illinois University at Carbondale	1988-93	129	B.S. Ed	Social Studies	

Total Semester Hours of college credit 129

STUDENT TEACHING

Name of teacher training institution: DuQuoin High School

Name of school where student teaching was done: DuQuoin High School

Address: _____

Name of cooperating teacher: Kathy West

Name of university supervisor: _____

Grade level or subject: 10-12

Dates: From 1/93 To 4/93 Semester Hours Earned: 12

PROFESSIONAL EXPERIENCE

Salary placement is based upon your listing of professional teaching experiences - DO NOT OMIT ANY !! Applicant must list **ALL** teaching/administrative experience beginning with the most recent. Do not state "refer to resume".

Elementary, junior high or senior high school (give name of school)	City, State	Position Grade or Subject	Dates	Year taught FT PT	
Tavares High School	Tavares FL	Social Studies 9-12	1994-1996	X	
Lersburg High School	Lersburg FL	5 th Math Science 9-12	1993-1994	X	

Professional References:

(Include here only persons who know of your work professionally, i.e., principals, supervisors, and superintendents with whom you have worked.)

Name

Present Office Address/Phone No.

Present Official Position

Bill Schulz[REDACTED]Head Swim Coach

DIRECTIONS: Please answer each of the questions given below as best you can. The space provided should be adequate, but if more space is needed, please attach additional pages.

1. What do you want to accomplish as a teacher? The most important goals I have as a teacher are to be a positive role model and to enrich the lives of as many students as possible.

2. How will (do) you go about finding out about student's attitudes and feelings about your class? In my opinion the best way to assess student's attitudes and feelings is to ask them. I have found that most children really want to express how they feel about most topics.

3. An experienced teacher offers you the following advice: "When you are teaching be sure to command the respect of your students immediately and all will go well." How do you feel about this? Any time an experienced teacher offers advice, it is wise to consider it. However, I believe respect has to be earned through your actions, not merely commanded.

4. How do you go about deciding what it is that should be taught in your class? Whenever possible, I would prefer to allow the students a great deal of input on the subject matter. Provided this input remains within the course description.

5. A parent comes to you and complains that what you are teaching his/her child is irrelevant to the child's needs. How would you respond? I would explain to the parent that the material is relevant, and it follows the curriculum goals set by the school. In addition, I would ask the parent for their help in teaching their child.

6. What do you think will (does) provide you the greatest pleasure in teaching? I receive the greatest satisfaction from the social interaction with the children.

7. When you have some free time, what do you enjoy doing the most? In my leisure time I enjoy watching and participating in various athletic events.

8. How do you go about finding what students are good at? One thing I have been that most students will tell you what they are good at. I will try and give an opportunity

9. Would you rather try a lot of way-out teaching strategies or would you rather try to perfect the approaches which work best for you? Explain your position.

I would like to know the up and down of the teaching strategies. I would like to know the best way to teach. I would like to know the best way to teach. I would like to know the best way to teach.

10. Do you like to teach with an overall plan in mind for the year, or would you rather just teach some interesting things and let the process determine the results? Explain your position. In my opinion, it is very important to have a yearly plan. This ensures the class will have guidance and general direction. However, this plan must be flexible enough to accommodate the changes and surprises that come with each school year.

11. A student is doing poorly in your class. You talk to the student, and the student tells you that you are the poorest teacher the student has ever met. What would you do?

The first thing I would do is ask the student why he/she felt that way. Secondly, I would explain to the student that learning is a two-way street. Finally, I would try to find a compromise between what the student feels is correct and what I feel is correct.

12. If there were absolutely no restrictions placed upon you, what would you most want to do in life? If there were no restrictions in this world I would prefer to coach swimming during the day, and spend the rest of the time with my large family.

I understand that any applicant who fails to provide requested employment or employer history which is material to the applicant's qualifications for employment or who provides statements which the applicant does not believe to be true may be guilty of a Class A Misdemeanor (P.A. 88-102). If employed, any misinformation, falsification or omissions will be sufficient cause for dismissal.

7-1-96

Date

[Signature]

Signature of Applicant

2/8/94

Devi
First

NAME: Leubner
Last



COMMUNITY UNIT
SCHOOL DISTRICT

World Class Schools Serving Caring Communities

To: Deryl Leubner (Via email to dleubner@sd308.org)

From: Kenneth L. Miller, Assistant Director of Human Resources

Date: October 13, 2016

RE: Your 2016-2017 Lane Change

Congratulations! Your lane change for the 2016-2017 School Year has been approved. This change will be reflected on the October 28, 2016 payroll and it will be retroactive to the beginning of the year.

Placement	Lane	Step	Annual Salary	Per-Paycheck Amount
Current Placement:	Masters + 32	Step 17	\$80,694.00	\$3,362.25
New Placement:	Masters + 47	Step 18	\$88,191.00	\$3,674.63

On October 28, 2016, you will also receive a separate paycheck that will reflect the following:

RETRO PAY: \$1,249.⁵⁰⁵²

This amount is the difference between your new salary placement and what you were paid from August 30, 2016 to October 15, 2016 based on your previous salary placement.

SALARY ADJ. TO 11-12: \$0.00

If you have any questions regarding your lane change, please feel free to contact me at (630) 636-3480 or at kmiller01@sd308.org.

Congratulations again on your lane change!

Kenneth Miller

*Assistant Director of
Human Resources*

DISTRICT ADMINISTRATIVE CENTER • 4175 ROUTE 71 • OSWEGO, IL 60543

P: (630) 636-3480 • F: (630) 636-3669 • E: kmiller01@SD308.ORG • WWW.SD308.ORG

*SWB
10/19*
KL 10/17/2016

[Back](#)[Print](#)

Lane Change Request

User Information

DERYL LEUBNER

[Profile](#)[Edit Profile](#)[User History](#)[Portfolio](#)[Lane Change Request](#)

Employee ID: [REDACTED]

Certificate ID: 1707009

Lane Change Masters + 32 or Certificate of Advanced Study Request

OSWEGO EAST HIGH SCHOOL Email: dleubner@sd308.org

Degree Information

Degree

School

Graduation

--- No Records ---

Salary Step Allocations for Masters + 47 or Doctorate

Salary Step	Credits	Activity Title	Date Complete	Start Date	End Date	Purpose
Masters + 47 or Doctorate	3.00	Designing Learning for the Common Core	08/13/2016	05/01/2016	07/31/2016	Salary Advancement
Masters + 47 or Doctorate	3.00	The Flipped Classroom	08/13/2016	05/01/2016	07/31/2016	Salary Advancement
Masters + 47 or Doctorate	3.00	Student Learning and the Brain	08/13/2016	05/01/2016	07/31/2016	Salary Advancement
Masters + 47 or Doctorate	3.00	The Vietnam War: History and Conflict	08/13/2016	05/01/2016	07/31/2016	Salary Advancement
Masters + 47 or Doctorate	3.00	Integrating the Arts for Teaching and Learning	08/13/2016	05/01/2016	07/31/2016	Salary Advancement

Used Credits: 15.00

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Request for Graduate Coursework Approval

NOTE: Requests for courses for advancement on the salary schedule must be submitted prior to the start of the course and all coursework must receive prior approval before salary schedule advancement will be granted.

General Info

User **DERYL LEUBNER**
Building **OSWEGO EAST HIGH SCHOOL**
Employee ID **[REDACTED]**
Submitted **4/20/2016 10:04 pm**
Marked Complete **8/13/2016 5:37 pm**

Dates **5/1/2016 to 7/31/2016**
Reference ID **D17417-A0-S-L52199447**

Basic Information

Is this part of a degree program? **NO**
Is this course required to remove
licensure/endorsement
deficiencies? ☒ **NO**
Is this course part of a Master's
program? If yes, please answer
the following question below. ☒ **NO**
If this course is part of Master's
program, what is the program
title?
What is your highest degree? **MASTERS**

Course Details

Course Number **EDUC 714Q**
Title of Course **Student Learning and the Brain**
Please describe the course as
given in the university catalog. **This course, drawing on neuropsychological research and educational experience, gives an understanding of the brain's learning processes. Before today's teachers and administrators can effectively match teaching practice to brain functioning, they must have a clearer understanding of how the brain, and especially that of developing students, functions.**
Website for Description **http://www.pdcourses.net/course_info.php?pid=143**
Please give your reason for
taking the course. **This course will help me more effectively plan and implement lessons geared toward authentic learning in the classroom.**

Dates of Course

When do you expect to BEGIN
this course? **5/1/2016**
When do you expect to
COMPLETE this course? **7/31/2016**

Name of Institution/Course Provider

Provider
Other Provider **University of LaVerne**

Semester Credit Hours

How many semester credit hours
do you expect to earn from this
course? **3.00**

IMPORTANT NOTES

Courses must be graduate level. Courses must improve a teacher's ability to perform his/her assigned duties and not duplicate previous training.

Signature section

By checking off the I agree
textbox below, I concur with the
information as submitted and this
will serve as my electronic
signature.

☒ I AGREE

Finish

Administrator's Section

Approval Summary

Administrator	Approval Type	Status	Date
Miller, Kenneth	PRIOR	COMPLETE	4/25/2016 8:51 am
Miller, Kenneth	FINAL	COMPLETE	9/9/2016 5:04 pm

Expenses

Description	Requested	Approved	Final
registration fee	\$0.00	-----	\$0.00
transportation	\$0.00	-----	\$0.00
tolls	\$0.00	-----	\$0.00
meals	\$0.00	-----	\$0.00
lodging	\$0.00	-----	\$0.00
other expenses	\$0.00	-----	\$0.00
Totals	\$0.00	\$0.00	\$0.00

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Request for Graduate Coursework Approval

NOTE: Requests for courses for advancement on the salary schedule must be submitted prior to the start of the course and all coursework must receive prior approval before salary schedule advancement will be granted.

General Info

User	DERYL LEUBNER
Building	OSWEGO EAST HIGH SCHOOL
Employee ID	
Submitted	4/20/2016 10:04 pm
Marked Complete	8/13/2016 5:38 pm
Dates	5/1/2016 to 7/31/2016
Reference ID	D17417-A0-S-L52199801

Basic Information

Is this part of a degree program?	NO
Is this course required to remove licensure/endorsement deficiencies?	✓ NO
Is this course part of a Master's program? If yes, please answer the following question below.	✓ NO
If this course is part of Master's program, what is the program title?	
What is your highest degree?	MASTERS

Course Details

Course Number	EDUC 715K
Title of Course	Integrating the Arts for Teaching and Learning
Please describe the course as given in the university catalog.	This course is about making your existing curriculum in Social Studies, Language Arts, Math, Science or Art much more interesting, fun, memorable, and enriching for both you and your students. You will learn how to integrate the Arts: visual arts, drama, literature, dance, and music into your existing lessons, even if you do not have a background in the Arts. Integrating the arts has proven successful for teaching and learning in both multicultural and multilingual settings.
Website for Description	http://www.pdcourses.net/course_info.php?pid=174
Please give your reason for taking the course.	This course will help me enrich my existing coursework with new approaches to lesson planning, teaching and assessment.

Dates of Course

When do you expect to BEGIN this course?	5/1/2016
When do you expect to COMPLETE this course?	7/31/2016

Name of Institution/Course Provider

Provider	
Other Provider	University of LaVerne

Semester Credit Hours

How many semester credit hours do you expect to earn from this course?	3.00
--	------

IMPORTANT NOTES

Courses must be graduate level. Courses must improve a teacher's ability to perform his/her assigned duties and not duplicate previous training.

Signature section

By checking off the I agree
textbox below, I concur with the
information as submitted and this
will serve as my electronic
signature.

☒ I AGREE

Finish

Administrator's Section

Approval Summary

Administrator	Approval Type	Status	Date
Miller, Kenneth	PRIOR	COMPLETE	4/25/2016 8:52 am
Miller, Kenneth	FINAL	COMPLETE	9/9/2016 5:04 pm

Expenses

Description	Requested	Approved	Final
registration fee	\$0.00	-----	\$0.00
transportation	\$0.00	-----	\$0.00
tolls	\$0.00	-----	\$0.00
meals	\$0.00	-----	\$0.00
lodging	\$0.00	-----	\$0.00
other expenses	\$0.00	-----	\$0.00
Totals	\$0.00	\$0.00	\$0.00

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Request for Graduate Coursework Approval

NOTE: Requests for courses for advancement on the salary schedule must be submitted prior to the start of the course and all coursework must receive prior approval before salary schedule advancement will be granted.

General Info

User	DERYL LEUBNER
Building	OSWEGO EAST HIGH SCHOOL
Employee ID	
Submitted	4/20/2016 10:04 pm
Marked Complete	8/13/2016 5:38 pm
Dates	5/1/2016 to 7/31/2016
Reference ID	D17417-A0-S-L52199468

Basic Information

Is this part of a degree program?	NO
Is this course required to remove licensure/endorsement deficiencies?	✓ NO
Is this course part of a Master's program? If yes, please answer the following question below.	✓ NO
If this course is part of Master's program, what is the program title?	
What is your highest degree?	MASTERS

Course Details

Course Number	EDUC 716W
Title of Course	The Vietnam War: History and Conflict
Please describe the course as given in the university catalog.	This course provides an extensive background about the Vietnam War, the relevant history of Southeast Asia, and the consequences of the conflict on the region. The text also covers the social, economic, ideological, diplomatic, and military aspects of the Vietnam War.
Website for Description	http://www.odcourses.net/course_info.php?pid=254
Please give your reason for taking the course.	I teach American History. This course furthers my knowledge base and strengthens my strategies to approach the teaching of this era in the classroom.

Dates of Course

When do you expect to BEGIN this course?	5/1/2016
When do you expect to COMPLETE this course?	7/31/2016

Name of Institution/Course Provider

Provider	
Other Provider	University of LaVerne

Semester Credit Hours

How many semester credit hours do you expect to earn from this course?	3.00
--	------

IMPORTANT NOTES

Courses must be graduate level. Courses must improve a teacher's ability to perform his/her assigned duties and not duplicate previous training.

Signature section

By checking off the I agree
textbox below, I concur with the
information as submitted and this
will serve as my electronic
signature.

☒ I AGREE

Finish

Administrator's Section

Approval Summary

Administrator	Approval Type	Status	Date
Miller, Kenneth	PRIOR	COMPLETE	4/25/2016 8:51 am
Miller, Kenneth	FINAL	COMPLETE	9/9/2016 5:05 pm

Expenses

Description	Requested	Approved	Final
registration fee	\$0.00	-----	\$0.00
transportation	\$0.00	-----	\$0.00
tolls	\$0.00	-----	\$0.00
meals	\$0.00	-----	\$0.00
lodging	\$0.00	-----	\$0.00
other expenses	\$0.00	-----	\$0.00
Totals	\$0.00	\$0.00	\$0.00

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Request for Graduate Coursework Approval

NOTE: Requests for courses for advancement on the salary schedule must be submitted prior to the start of the course and all coursework must receive prior approval before salary schedule advancement will be granted.

General Info

User **DERYL LEUBNER**
Building **OSWEGO EAST HIGH SCHOOL**
Employee ID **[REDACTED]**
Submitted **4/20/2016 10:03 pm**
Marked Complete **8/13/2016 5:37 pm**

Dates **5/1/2016 to 7/31/2016**
Reference ID **D17417-A0-S-L52199363**

Basic Information

Is this part of a degree program? **NO**
Is this course required to remove
licensure/endorsement
deficiencies? ☒ **NO**
Is this course part of a Master's
program? If yes, please answer
the following question below. ☒ **NO**
If this course is part of Master's
program, what is the program
title?
What is your highest degree? **MASTERS**

Course Details

Course Number **EDUC 717I**
Title of Course **The Flipped Classroom**
Please describe the course as
given in the university catalog. **In this course you will learn the difference between traditional and flipped-mastery learning, why
the flipped classroom works, what strategies are effective for flipping your classroom, how to
design a flipped classroom lesson plan, and what you need to flip your own classroom.**
Website for Description **http://www.pdcourses.net/course_info.php?pid=281**
Please give your reason for
taking the course. **It's geared toward 21st Century learning and our district has made this a focus, aligned with
Common Core.**

Dates of Course

When do you expect to BEGIN
this course? **5/1/2016**
When do you expect to
COMPLETE this course? **7/31/2016**

Name of Institution/Course Provider

Provider
Other Provider **University of LaVerne**

Semester Credit Hours

How many semester credit hours
do you expect to earn from this
course? **3.00**

IMPORTANT NOTES

Courses must be graduate level. Courses must improve a teacher's ability to perform his/her assigned duties and not duplicate previous training.

Signature section

By checking off the I agree
textbox below, I concur with the
information as submitted and this
will serve as my electronic
signature.

☒ I AGREE

Finish

Administrator's Section

Approval Summary

Administrator	Approval Type	Status	Date
Miller, Kenneth	PRIOR	COMPLETE	4/25/2016 8:50 am
Miller, Kenneth	FINAL	COMPLETE	9/9/2016 5:05 pm

Expenses

Description	Requested	Approved	Final
registration fee	\$0.00	-----	\$0.00
transportation	\$0.00	-----	\$0.00
tolls	\$0.00	-----	\$0.00
meals	\$0.00	-----	\$0.00
lodging	\$0.00	-----	\$0.00
other expenses	\$0.00	-----	\$0.00
Totals	\$0.00	\$0.00	\$0.00

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Request for Graduate Coursework Approval

NOTE: Requests for courses for advancement on the salary schedule must be submitted prior to the start of the course and all coursework must receive prior approval before salary schedule advancement will be granted.

General Info

User	DERYL LEUBNER
Building	OSWEGO EAST HIGH SCHOOL
Employee ID	
Submitted	4/20/2016 10:03 pm
Marked Complete	8/13/2016 5:37 pm
Dates	5/1/2016 to 7/31/2016
Reference ID	D17417-A0-S-L52199357

Basic Information

Is this part of a degree program?	NO
Is this course required to remove licensure/endorsement deficiencies?	<input checked="" type="checkbox"/> NO
Is this course part of a Master's program? If yes, please answer the following question below.	<input checked="" type="checkbox"/> NO
If this course is part of Master's program, what is the program title?	
What is your highest degree?	MASTERS

Course Details

Course Number	EDUC 717K
Title of Course	Designing Learning for the Common Core
Please describe the course as given in the university catalog.	This course offers K-12 teachers, and anyone else needing to understand Common Core, a variety of best practices and classroom delivery techniques for student mastery of the new standards.
Website for Description	http://www.pdcourses.net/course_info.php?pid=283
Please give your reason for taking the course.	It enhances and supports knowledge of Common Core practices and how to implement more complex lessons into the classroom.

Dates of Course

When do you expect to BEGIN this course?	5/1/2016
When do you expect to COMPLETE this course?	7/31/2016

Name of Institution/Course Provider

Provider	
Other Provider	University of LaVerne

Semester Credit Hours

How many semester credit hours do you expect to earn from this course?	3.00
--	------

IMPORTANT NOTES

Courses must be graduate level. Courses must improve a teacher's ability to perform his/her assigned duties and not duplicate previous training.

Signature section

By checking off the I agree
textbox below, I concur with the
information as submitted and this
will serve as my electronic
signature.

☒ I AGREE

Finish

Administrator's Section

Approval Summary

Administrator	Approval Type	Status	Date
Miller, Kenneth	PRIOR	COMPLETE	4/25/2016 8:50 am
Miller, Kenneth	FINAL	COMPLETE	9/9/2016 5:06 pm

Expenses

Description	Requested	Approved	Final
registration fee	\$0.00	-----	\$0.00
transportation	\$0.00	-----	\$0.00
tolls	\$0.00	-----	\$0.00
meals	\$0.00	-----	\$0.00
lodging	\$0.00	-----	\$0.00
other expenses	\$0.00	-----	\$0.00
Totals	\$0.00	\$0.00	\$0.00

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OSWEGO COMMUNITY UNIT SCHOOL DISTRICT 308
REQUEST FOR APPROVAL OF COURSE WORK (Only 1 class per form)
(All areas on this form must be completed or it will be returned to you)

DERYL LELUBNER OEHS 1/25/12
(Teacher's Name) Building Date Submitted

Social Studies
Subject Areas You Currently Teach

Is this course Direct Instruction or an ONLINE Course? (circle one)

Are you currently TENURE or NON-TENURE in District 308? (circle one)

All coursework must receive prior approval before salary schedule advancement will be granted.

Please complete this form in duplicate original for personnel file, duplicate will be returned.

1. Is this a graduate X or undergraduate _____ course? (Check one)
(Salary schedule credit will only be granted toward graduate level courses.)
2. Is this course required to remove certification deficiencies? Yes _____ No X
3. Have you previously taken training which this course duplicates? Yes _____ No X
4. Are you pursuing a graduate degree? Yes _____ No X
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. If you are in a MA program, have you provided your college acceptance letter into this Master's program as well as your list of core courses to Assoc. Supt for Admin? Yes _____ No _____
(If you answered 'No' when will we receive it?) _____
6. How many semester hours do you have toward earning your advanced degree? _____
7. How many semester hours do you have beyond your B.A. + _____ or M.A. + 15
8. How many semester hours do you expect to earn from this course? Sem. 3

Institution _____ Course No. _____ Title of Course _____ Dates of course (do NOT indicate ONLINE) _____

Univ. Laverne EDUC. 716G Bridging Culture 2/12 - 6-12
Gap / Poverty

9. Please describe the course as given in the college catalog.

10. Please give your reason for taking the course.

Salary Advancement
2-2-12 Jodel M. Colvin
(Date) Associate Supt. for Administrative Services

Important Note: Effective the 2009/2010 school year, teachers will only be allowed a maximum of 32 online hours beyond their Masters. Approval of this form does not necessarily guarantee credit toward salary movement if the maximum online hours (32) has been obtained.

[Signature]
Teacher signature (all forms must be signed)

COURSE APPROVAL REQUEST0910.DOC

10/6/2009

OSWEGO COMMUNITY UNIT SCHOOL DISTRICT 308
REQUEST FOR APPROVAL OF COURSE WORK (Only 1 class per form)
(All areas on this form must be completed or it will be returned to you)

DERYL LELBNER
(Teacher's Name)

OEHs
Building

1-25-12
Date Submitted

SOCIAL STUDIES
Subject Areas You Currently Teach

Is this course Direct Instruction or an ONLINE Course? (circle one)

Are you currently TENURE or NON-TENURE in District 308? (circle one)

All coursework must receive prior approval before salary schedule advancement will be granted.

Please complete this form in duplicate original for personnel file, duplicate will be returned.

1. Is this a graduate X or undergraduate _____ course? (Check one)
(Salary schedule credit will only be granted toward graduate level courses)
2. Is this course required to remove certification deficiencies? Yes _____ No X
3. Have you previously taken training which this course duplicates? Yes _____ No X
4. Are you pursuing a graduate degree? Yes _____ No X
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. If you are in a MA program, have you provided your college acceptance letter into this Master's program as well as your list of core courses to Assoc. Supt for Admin? Yes _____ No _____
(If you answered 'No' when will we receive it?) _____
6. How many semester hours do you have toward earning your advanced degree? _____
7. How many semester hours do you have beyond your B.A. + _____ or M.A. + 15
8. How many semester hours do you expect to earn from this course? Sem. 3

Institution _____ Course No. _____ Title of Course _____ Dates of course (do NOT indicate ONLINE) _____

Univ. Lakone EDUC 7160 ED + Reach 2/12 - 6/12

9. Please describe the course as given in the college catalog. 21st Century Skills

10. Please give your reason for taking the course.

Approved Disapproved 2-2-12
(Date)

Jodel M. Colvin
Associate Supt. for Administrative Services

Important Note: Effective the 2009/2010 school year, teachers will only be allowed a maximum of 32 online hours beyond their Masters. Approval of this form does not necessarily guarantee credit toward salary movement if the maximum online hours (32) has been obtained.

[Signature]
Teacher signature (all forms must be signed)
COURSE APPROVAL REQUEST 0910.DOC

OSWEGO COMMUNITY UNIT SCHOOL DISTRICT 308
REQUEST FOR APPROVAL OF COURSE WORK (Only 1 class per form)
(All areas on this form must be completed or it will be returned to you)

DERYL LEUBNER OEH 1-25-12
(Teacher's Name) Building Date Submitted

SOCIAL STUDIES
Subject Areas You Currently Teach

Is this course Direct Instruction or an ONLINE Course? (circle one)

Are you currently TENURE or NON-TENURE in District 308? (circle one)

All coursework must receive prior approval before salary schedule advancement will be granted.

Please complete this form in duplicate original for personnel file, duplicate will be returned.

1. Is this a graduate X or undergraduate _____ course? (Check one)
(Salary schedule credit will only be granted toward graduate level courses)
2. Is this course required to remove certification deficiencies? Yes _____ No X
3. Have you previously taken training which this course duplicates? Yes _____ No X
4. Are you pursuing a graduate degree? Yes _____ No X
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. If you are in a MA program, have you provided your college acceptance letter into this Master's program as well as your list of core courses to Assoc. Supt for Admin? Yes _____ No _____
(If you answered 'No' when will we receive it?) _____
6. How many semester hours do you have toward earning your advanced degree? _____
7. How many semester hours do you have beyond your B.A. + _____ or M.A. + 15
8. How many semester hours do you expect to earn from this course? Sem. 2

Institution _____ Course No. _____ Title of Course _____ Dates of course (do NOT indicate ONLINE) _____

Univ. of LaVerne EDUC. 713Q FOUNDING FATHERS 2/12 - 6/12

9. Please describe the course as given in the college catalog.

10. Please give your reason for taking the course.

Founding Fathers Created a Clinicue Nation
Therap & Struggles / Debates
Salary Advancement
2-2-12
(Date) Associate Supt. for Administrative Services

Important Note: Effective the 2009/2010 school year, teachers will only be allowed a maximum of 32 online hours beyond their Masters. Approval of this form does not necessarily guarantee credit toward salary movement if the maximum online hours (32) has been obtained.

Teacher signature (all forms must be signed)
COURSE APPROVAL REQUEST 010.DOC

OSWEGO COMMUNITY UNIT SCHOOL DISTRICT 308
REQUEST FOR APPROVAL OF COURSE WORK (Only 1 class per form)
(All areas on this form must be completed or it will be returned to you)

Devin Leubner DEHS 1-25-12
(Teacher's Name) Building Date Submitted

Social Studies
Subject Areas You Currently Teach

Is this course Direct Instruction or an ONLINE Course? (circle one)

Are you currently TENURE or NON-TENURE in District 308? (circle one)

All coursework must receive prior approval before salary schedule advancement will be granted.

Please complete this form in duplicate original for personnel file, duplicate will be returned.

1. Is this a graduate ☒ or undergraduate _____ course? (Check one)
(Salary schedule credit will only be granted toward graduate level courses.)
2. Is this course required to remove certification deficiencies? Yes _____ No ☒
3. Have you previously taken training which this course duplicates? Yes _____ No ☒
4. Are you pursuing a graduate degree? Yes _____ No ☒
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. If you are in a MA program, have you provided your college acceptance letter into this Master's program as well as your list of core courses to Assoc. Supt for Admin? Yes _____ No _____
(If you answered 'No' when will we receive it?) _____
6. How many semester hours do you have toward earning your advanced degree? _____
7. How many semester hours do you have beyond your B.A. + _____ or M.A. + 15
8. How many semester hours do you expect to earn from this course? Sem. 3

Institution _____ Course No. _____ Title of Course _____ Dates of course (do NOT indicate ONLINE) _____

Univ. LaVerne Educ 716E Modern Middle East 6/12 - 8/12

9. Please describe the course as given in the college catalog.
Middle East: Beyond oil, strategy & political conflict

10. Please give your reason for taking the course.

Salary Advancement
Approved 2-2-12 Jodel M. Colvin
(Date) Associate Supt. for Administrative Services

Important Note: Effective the 2009/2010 school year, teachers will only be allowed a maximum of 32 online hours beyond their Masters. Approval of this form does not necessarily guarantee credit toward salary movement if the maximum online hours (32) has been obtained.

[Signature]
Teacher signature (all forms must be signed)
COURSE APPROVAL REQUEST0910.DOC

OSWEGO COMMUNITY UNIT SCHOOL DISTRICT 308
REQUEST FOR APPROVAL OF COURSE WORK (Only 1 class per form)
(All areas on this form must be completed or it will be returned to you)

Deryl Leubner
(Teacher's Name)

GEHS
Building

1/25/12
Date Submitted

Social Studies
Subject Areas You Currently Teach

Is this course Direct Instruction or an ONLINE Course? (circle one)

Are you currently TENURE or NON-TENURE in District 308? (circle one)

All coursework must receive prior approval before salary schedule advancement will be granted.

Please complete this form in duplicate original for personnel file, duplicate will be returned.

1. Is this a graduate X or undergraduate _____ course? (Check one)
(Salary schedule credit will only be granted toward graduate level courses.)
2. Is this course required to remove certification deficiencies? Yes _____ No X
3. Have you previously taken training which this course duplicates? Yes _____ No X
4. Are you pursuing a graduate degree? Yes _____ No X
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. If you are in a MA program, have you provided your college acceptance letter into this Master's program as well as your list of core courses to Assoc. Supt for Admin? Yes _____ No _____
(If you answered 'No' when will we receive it?) _____
6. How many semester hours do you have toward earning your advanced degree? _____
7. How many semester hours do you have beyond your B.A. + _____ or M.A. + 15
8. How many semester hours do you expect to earn from this course? Sem. 3

Institution _____ Course No. _____ Title of Course _____ Dates of course (do NOT indicate ONLINE) _____

Univ. of LaVerne EMC 715N Lincoln the Principled President 6/12-8/12

9. Please describe the course as given in the college catalog.

Insights into Lincoln's Philosophies

10. Please give your reason for taking the course.

Approved Disapproved 2-2-12
(Date)

Jodel M. Colvin
Associate Supt. for Administrative Services

Important Note: Effective the 2009/2010 school year, teachers will only be allowed a maximum of 32 online hours beyond their Masters. Approval of this form does not necessarily guarantee credit toward salary movement if the maximum online hours (32) has been obtained.

[Signature]
Teacher signature (all forms must be signed)
COURSE APPROVAL REQUEST 0910.DOC

sk

OSWEGO COMMUNITY UNIT SCHOOL DISTRICT 308
REQUEST FOR APPROVAL OF COURSE WORK (Only 1 class per form)
(All areas on this form must be completed or it will be returned to you)

Deryl Leubner
(Teacher's Name)

OEHs
Building

1-25-12
Date Submitted

Social Studies
Subject Areas You Currently Teach

Is this course Direct Instruction or an ONLINE Course? (circle one)

Are you currently TENURE or NON-TENURE in District 308? (circle one)

All coursework must receive prior approval before salary schedule advancement will be granted.

Please complete this form in duplicate original for personnel file, duplicate will be returned.

1. Is this a graduate ☒ or undergraduate _____ course? (Check one)
(Salary schedule credit will only be granted toward graduate level courses.)
2. Is this course required to remove certification deficiencies? Yes _____ No ☒
3. Have you previously taken training which this course duplicates? Yes _____ No ☒
4. Are you pursuing a graduate degree? Yes _____ No ☒
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. If you are in a MA program, have you provided your college acceptance letter into this Master's program as well as your list of core courses to Assoc. Supt for Admin? Yes _____ No _____
(If you answered 'No' when will we receive it?) _____
6. How many semester hours do you have toward earning your advanced degree? _____
7. How many semester hours do you have beyond your B.A. + _____ or M.A. + 15
8. How many semester hours do you expect to earn from this course? Sem. 3

Institution	Course No.	Title of Course	Dates of course (do NOT indicate ONLINE)
-------------	------------	-----------------	--

Univ. Levee	EDUC 715P	Web 2.0	6/12 - 8/12
-------------	-----------	---------	-------------

9. Please describe the course as given in the college catalog.

10. Please give your reason for taking the course.

Salary Advancement
Approved/Disapproved 2-2-12 Jodel M. Colvin
(Date) Associate Supt. for Administrative Services

.....

Important Note: Effective the 2009/2010 school year, teachers will only be allowed a maximum of 32 online hours beyond their Masters. Approval of this form does not necessarily guarantee credit toward salary movement if the maximum online hours (32) has been obtained.

[Signature]
Teacher signature (all forms must be signed)
COURSE APPROVAL REQUEST 0110.DOC

yes

OSWEGO COMMUNITY UNIT SCHOOL DISTRICT 308
REQUEST FOR APPROVAL OF COURSE WORK (Only 1 class per form)
(All areas on this form must be completed or it will be returned to you)

DEPOL LEUBNER
(Teacher's Name)

OETHS
Building

6/30/10
Date Submitted

SOCIAL STUDIES
Subject Areas You Currently Teach

Is this course Direct Instruction or an ONLINE Course? (circle one)

Are you currently TENURE or NON-TENURE in District 308? (circle one)

All coursework must receive prior approval before salary schedule advancement will be granted.

Please complete this form in duplicate original for personnel file, duplicate will be returned.

1. Is this a graduate X or undergraduate _____ course? (Check one)
(Salary schedule credit will only be granted toward graduate level courses.)
2. Is this course required to remove certification deficiencies? Yes _____ No X
3. Have you previously taken training which this course duplicates? Yes _____ No X
4. Are you pursuing a graduate degree? Yes _____ No X
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. If you are in a MA program, have you provided your college acceptance letter into this Master's program as well as your list of core courses to Assoc. Supt for Admin? Yes _____ No _____
(If you answered 'No' when will we receive it?) _____
6. How many semester hours do you have toward earning your advanced degree? _____
7. How many semester hours do you have beyond your B.A. + _____ or M.A. + 9
8. How many semester hours do you expect to earn from this course? Sem. 3

Institution	Course No.	Title of Course	Dates of course (do NOT indicate ONLINE)
-------------	------------	-----------------	--

Univ. of Lake Erie 714 Z Self-directed Learning 7/10-8/10

9. Please describe the course as given in the college catalog.

Self-directed Learning in a classroom Setting

10. Please give your reason for taking the course.

Professional Development

Approved/Disapproved 7-8-10
(Date)

Jodel M. Colvin
Associate Supt. for Administrative Services

Important Note: Effective the 2009/2010 school year, teachers will only be allowed a maximum of 32 online hours beyond their Masters. Approval of this form does not necessarily guarantee credit toward salary movement if the maximum online hours (32) has been obtained.

[Signature]
Teacher signature (all forms must be signed)
COURSE APPROVAL REQUEST 0910.DOC

OSWEGO COMMUNITY UNIT SCHOOL DISTRICT 308
REQUEST FOR APPROVAL OF COURSE WORK (Only 1 class per form)
(All areas on this form must be completed or it will be returned to you)

Daniel Cohen
 (Teacher's Name) Building _____ Date Submitted _____

Senior Studies
 Subject Areas You Currently Teach

Is this course Direct Instruction or an ONLINE Course? (circle one)

Are you currently TENURE or NON-TENURE in District 308? (circle one)

All coursework must receive prior approval before salary schedule advancement will be granted.

Please complete this form in duplicate original for personnel file, duplicate will be returned.

- Is this a graduate or undergraduate course? (Check one)
 (Salary schedule credit will only be granted toward graduate level courses)
- Is this course required to remove certification deficiencies? Yes No X
- Have you previously taken training which this course duplicates? Yes No X
- Are you pursuing a graduate degree? Yes No X
 If "Yes", answer number 5 & 6. If "No", go to No. 7.
- If you are in a MA program, have you provided your college acceptance letter into this Master's program as well as your list of core courses to Assoc. Supt for Admin? Yes No
 (If you answered 'No' when will we receive it?) _____
- How many semester hours do you have toward earning your advanced degree? 0
- How many semester hours do you have beyond your B.A. + or M.A. + 0
- How many semester hours do you expect to earn from this course? Sem. 3

Institution	Course No.	Title of Course	Dates of course (do NOT indicate ONLINE)
<u>LaVerne University</u>	<u>711 R</u>	<u>The Cold War 1945-1991</u>	<u>Spring 2010 Nov-Dec</u>

- Please describe the course as given in the college catalog.
This course traces the C.S. with our final efforts which result in the US victory of in the Cold War
- Please give your reason for taking the course.
Enhance my understanding of the course

Approved/Disapproved 3/10/10
 (Date)

Jodel M. Colvin
 Associate Supt. for Administrative Services

Important Note: Effective the 2009/2010 school year, teachers will only be allowed a maximum of 32 online hours beyond their Masters. Approval of this form does not necessarily guarantee credit toward salary movement if the maximum online hours (32) has been obtained.

Teacher signature (all forms must be signed)
 COURSE APPROVAL REQUEST0910.DOC

OSWEGO COMMUNITY UNIT SCHOOL DISTRICT 308
REQUEST FOR APPROVAL OF COURSE WORK (Only 1 class per form)
(All areas on this form must be completed or it will be returned to you)

Donal Lechner
 (Teacher's Name)

CEHS
 Building

3/10/10
 Date Submitted

Social Studies
 Subject Areas You Currently Teach

Is this course Direct Instruction or an ONLINE Course? (circle one)

Are you currently TENURE or NON-TENURE in District 308? (circle one)

All coursework must receive prior approval before salary schedule advancement will be granted.

Please complete this form in duplicate original for personnel file, duplicate will be returned.

- Is this a graduate X or undergraduate _____ course? (Check one)
 (Salary schedule credit will only be granted toward graduate level courses)
- Is this course required to remove certification deficiencies? Yes _____ No X
- Have you previously taken training which this course duplicates? Yes _____ No X
- Are you pursuing a graduate degree? Yes _____ No X
 If "Yes", answer number 5 & 6. If "No", go to No. 7.
- If you are in a MA program, have you provided your college acceptance letter into this Master's program as well as your list of core courses to Assoc. Supt for Admin? Yes _____ No _____
 (If you answered 'No' when will we receive it?) _____
- How many semester hours do you have toward earning your advanced degree? 0
- How many semester hours do you have beyond your B.A. + _____ or M.A. + 0
- How many semester hours do you expect to earn from this course? Sem. 3

Institution	Course No.	Title of Course	Dates of course (do NOT indicate ONLINE)
<u>LaVerne University</u>	<u>EDUC 711A</u>	<u>The Cold War 1945-1945</u>	<u>Spring 2010 Mar-June</u>

- Please describe the course as given in the college catalog.
This course traces the initial period of the Cold War its origins worldwide & apparent permanent
- Please give your reason for taking the course.
Enhance my understanding of the Cold War

Approved/Disapproved 3/10/10
 (Date)

Jodel M. Colarini
 Associate Supt. for Administrative Services

Important Note: Effective the 2009/2010 school year, teachers will only be allowed a maximum of 32 online hours beyond their Masters. Approval of this form does not necessarily guarantee credit toward salary movement if the maximum online hours (32) has been obtained.

Teacher signature (all forms must be signed)
 COURSE APPROVAL REQUEST0910.DOC

OSWEGO COMMUNITY UNIT SCHOOL DISTRICT 308
REQUEST FOR APPROVAL OF COURSE WORK (Only 1 class per form)
(All areas on this form must be completed or it will be returned to you)

Deirdre Lubner
 (Teacher's Name)

DEITS
 Building

3/2/10
 Date Submitted

Social Studies
 Subject Areas You Currently Teach

Is this course Direct Instruction or an ONLINE Course? (circle one)

Are you currently TENURE or NON-TENURE in District 308? (circle one)

All coursework must receive prior approval before salary schedule advancement will be granted.

Please complete this form in duplicate original for personnel file, duplicate will be returned.

- Is this a graduate ✓ or undergraduate _____ course? (Check one)
 (Salary schedule credit will only be granted toward graduate level courses.)
- Is this course required to remove certification deficiencies? Yes _____ No 5
- Have you previously taken training which this course duplicates? Yes _____ No 5
- Are you pursuing a graduate degree? Yes _____ No 5
 If "Yes", answer number 5 & 6. If "No", go to No. 7.
- If you are in a MA program, have you provided your college acceptance letter into this Master's program as well as your list of core courses to Assoc. Supt for Admin? Yes _____ No _____
 (If you answered 'No' when will we receive it?) _____
- How many semester hours do you have toward earning your advanced degree? 0
- How many semester hours do you have beyond your B.A. + _____ or M.A. + 0
- How many semester hours do you expect to earn from this course? Sem. 3

Institution	Course No.	Title of Course	Dates of course (do NOT indicate ONLINE)
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<u>Laurie University</u>	<u>EDUC 7112</u>	<u>Terrorism: Roots causes & diversity</u>	<u>Spring 2010 Mar-June</u>
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- Please describe the course as given in the college catalog.
this course examines the roots, reasons, and varieties of Terrorism from an array of perspectives
- Please give your reason for taking the course.
This course will increase my understanding of the Post 9-11 world

Approved 3/10/10
 (Date)

Jodel M. Colvin
 Associate Supt. for Administrative Services

Important Note: Effective the 2009/2010 school year, teachers will only be allowed a maximum of 32 online hours beyond their Masters. Approval of this form does not necessarily guarantee credit toward salary movement if the maximum online hours (32) has been obtained.

Teacher signature (all forms must be signed)
 COURSE APPROVAL REQUEST 910.DOC

OSWEGO COMMUNITY UNIT SCHOOL DISTRICT 308
REQUEST FOR APPROVAL OF COURSE WORK (Only 1 class per form)
 (All areas on this form must be completed or it will be returned to you)

DERYL LEUBNER
 (Teacher's Name)

OSHS
 Building

8/26/10
 Date Submitted

SOCIAL STUDIES
 Subject Areas You Currently Teach

*Pr emailed
 approved
 from TC
 7/10*

Is this course Direct Instruction or an ONLINE Course? (circle one)

Are you currently TENURE or NON-TENURE in District 308? (circle one)

All coursework must receive prior approval before salary schedule advancement will be granted.

Please complete this form in duplicate original for personnel file, duplicate will be returned.

- Is this a graduate X or undergraduate _____ course? (Check one)
 (Salary schedule credit will only be granted toward graduate level courses.)
- Is this course required to remove certification deficiencies? Yes _____ No X
- Have you previously taken training which this course duplicates? Yes _____ No X
- Are you pursuing a graduate degree? Yes _____ No X
 If "Yes", answer number 5 & 6. If "No", go to No. 7.
- If you are in a MA program, have you provided your college acceptance letter into this Master's program as well as your list of core courses to Assoc. Supt for Admin? Yes _____ No X
 (If you answered 'No' when will we receive it?) _____
- How many semester hours do you have toward earning your advanced degree? _____
- How many semester hours do you have beyond your B.A. + _____ or M.A. + 15 (as of August 2010)
- How many semester hours do you expect to earn from this course? Sem. 3

Institution _____ Course No. _____ Title of Course _____ Dates of course (do NOT indicate ONLINE) _____

Univ. of LaVerne EDUC 710C The Multicultural Classroom 7/10 - 8/10

9. Please describe the course as given in the college catalog.

Diversity Study
 10. Please give your reason for taking the course.
Professional Development

Approved/Disapproved _____
 (Date) _____ Associate Supt. for Administrative Services

Important Note: Effective the 2009/2010 school year, teachers will only be allowed a maximum of 32 online hours beyond their Masters. Approval of this form does not necessarily guarantee credit toward salary movement if the maximum online hours (32) has been obtained.

Teacher signature (all forms must be signed)

COURSE APPROVAL REQUEST 10-000

10/6/2009

REQUEST FOR APPROVAL OF COURSEWORK

Daryl Leubner
(Teacher's Name)

CHS
Building

1-22-02
Date Submitted

All coursework must receive prior approval before salary schedule advancement will be granted. Please **complete this form in duplicate**: original for personnel file, duplicate will be returned.

1. Is this a graduate ☒ or undergraduate ☐ course? (Check one)
2. Is this course required to remove certification deficiencies? Yes ☐ No ☒
3. Have you previously taken training which this course duplicates? Yes ☐ No ☒
4. Are you pursuing a graduate degree? Yes ☒ No ☐
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. Has your graduate degree program been approved by your college advisor and placed on file with the Asst. Superintendent? Yes ☒ No ☐
6. How many semester hours do you have toward earning your advanced degree? 21
7. How many semester hours do you have beyond your B.A. + 21 or M.A. +
8. How many semester or quarter hours do you expect to earn from this course?
Sem. 3 Qtr.

9. (Please use a separate sheet for each course.)

Institution	Course No.	Title of Course	Semester or dates of course
<u>Olivet</u>	<u>707</u>	<u>Inclusion/</u> <u>Special Needs</u>	<u>4/2-6/1</u>

10. Please describe the course as given in the college catalog.

11. Please give your reason for taking the course.

Masters Degree
Approved/Disapproved 2/04/02
(Date)

[Signature]
Asst. Supt. for Administration

For office use only.

Transcript received

Posted on records

REQUEST FOR APPROVAL OF COURSEWORK

Deryl Leubner
(Teacher's Name)

OHS
Building

1-22-02
Date Submitted

All coursework must receive prior approval before salary schedule advancement will be granted. Please complete this form in duplicate: original for personnel file, duplicate will be returned.

1. Is this a graduate ✓ or undergraduate course? (Check one)
2. Is this course required to remove certification deficiencies? Yes No ✓
3. Have you previously taken training which this course duplicates? Yes No ✓
4. Are you pursuing a graduate degree? Yes ✓ No
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. Has your graduate degree program been approved by your college advisor and placed on file with the Asst. Superintendent? Yes ✓ No
6. How many semester hours do you have toward earning your advanced degree? 21
7. How many semester hours do you have beyond your B.A. + 21 or M.A. +
8. How many semester or quarter hours do you expect to earn from this course?
Sem. 3 Qtr.

9. (Please use a separate sheet for each course.)

Institution	Course No.	Title of Course	Semester or dates of course
<u>Olivet</u>	<u>706</u>	<u>Parental Involvement</u>	<u>1/22-3/21</u>

10. Please describe the course as given in the college catalog.

11. Please give your reason for taking the course.

Masters Degree

Approved Disapproved 2/4/02
(Date)

[Signature]
Asst. Supt. for Administration

For office use only.

Transcript received

Posted on records

REQUEST FOR APPROVAL OF COURSE WORK

Deryl Leubner
(Teacher's Name)

OHS
Building

10/5/01
Date Submitted

All coursework must receive prior approval before salary schedule advancement will be granted

Please complete this form in duplicate original for personnel file, duplicate will be returned

- 1 Is this a graduate ☒ or undergraduate ☐ course? (Check one)
- 2 Is this course required to remove certification deficiencies? Yes ☐ No ☒
- 3 Have you previously taken training which this course duplicates? Yes ☐ No ☒
- 4 Are you pursuing a graduate degree? Yes ☒ No ☐
If "Yes", answer number 5 & 6. If "No", go to No. 7.
- 5 Has your graduate degree program been approved by your college advisor and placed on file with the Asst. Superintendent? Yes ☒ No ☐
- 6 How many semester hours do you have toward earning your advanced degree? 15
- 7 How many semester hours do you have beyond your B.A. + 15 or M.A. +
- 8 How many semester or quarter hours do you expect to earn from this course?
Sem. Qtr.

9. (Please use a separate sheet for each course.)

Institution	Course No.	Title of Course	Semester or dates of course
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<u>Olivet U.</u>	<u>ED 704</u>	<u>Instructional Strategies: Models of Effective Teaching</u>	<u>9/12-10/27</u>
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10. Please describe the course as given in the college catalog.

11. Please give your reason for taking the course.

Approved/Disapproved Master Degree

(Date)

Kerry J. Johnson
Asst. Supt. for Administration

For office use only.

Transcript received

Posted on records

REQUEST FOR APPROVAL OF COURSEWORK

Deryl Leebner
(Teacher's Name)

OHS
Building

10-5-01
Date Submitted

All coursework must receive prior approval before salary schedule advancement will be granted. Please complete this form in duplicate: original for personnel file, duplicate will be returned.

1. Is this a graduate ☒ or undergraduate ____ course? (Check one)
2. Is this course required to remove certification deficiencies? Yes ____ No ☒
3. Have you previously taken training which this course duplicates? Yes ____ No ☒
4. Are you pursuing a graduate degree? Yes ☒ No ____
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. Has your graduate degree program been approved by your college advisor and placed on file with the Asst. Superintendent? Yes ☒ No ____
6. How many semester hours do you have toward earning your advanced degree? 15
7. How many semester hours do you have beyond your B.A. + 15 or M.A. + ____
8. How many semester or quarter hours do you expect to earn from this course?
total, for a, b + c Sem. 3 Qtr. ____

9. (Please use a separate sheet for each course.)
Institution _____ Course No. _____ Title of Course _____ Semester or
dates of course _____

Olivet U. 703b Collaborative Action 11/6-11/27
Research

10. Please describe the course as given in the college catalog.

11. Please give your reason for taking the course.

Master's Degree

Approved/Disapproved _____
(Date)

Kerry J. Folsom
Asst. Supt. for Administration

For office use only.

Transcript received _____

Posted on records _____

REQUEST FOR APPROVAL OF COURSEWORK

VERYL LEUBNER
(Teacher's Name)

048
Building

4-1701
Date Submitted

All coursework must receive prior approval before salary schedule advancement will be granted. Please **complete this form in duplicate**: original for personnel file, duplicate will be returned.

1. Is this a graduate ☒ or undergraduate ☐ course? (Check one)
2. Is this course required to remove certification deficiencies? Yes ☐ No ☒
3. Have you previously taken training which this course duplicates? Yes ☐ No ☒
4. Are you pursuing a graduate degree? Yes ☒ No ☐
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. Has your graduate degree program been approved by your college advisor and placed on file with the Asst. Superintendent? Yes ☒ No ☐
6. How many semester hours do you have toward earning your advanced degree? 9.0
7. How many semester hours do you have beyond your B.A. + 9.0 or M.A. +
8. How many semester or quarter hours do you expect to earn from this course?
Sem. 3 Qtr.

9. (Please use a separate sheet for each course.)			Semester or
<u>Institution</u>	<u>Course No.</u>	<u>Title of Course</u>	<u>dates of course</u>
<u>Olivet Univ.</u>	<u>ED 703A</u>	<u>Collaborative Action Research</u>	<u>7/23-8/13</u>

10. Please describe the course as given in the college catalog.

Above

11. Please give your reason for taking the course.

Masters Degree

Approved/Disapproved
(Date)

APR 19 2001

Gordon R. Balthazart
Asst. Supt. for Administration

For office use only.

Transcript received

Posted on records

REQUEST FOR APPROVAL OF COURSEWORK

Deryl Leubner
(Teacher's Name)

OHS
Building

5/17/99
Date Submitted

All coursework must receive prior approval before salary schedule advancement will be granted. Please **complete this form in duplicate**: original for personnel file, duplicate will be returned.

1. Is this a graduate X or undergraduate ____ course? (Check one)
2. Is this course required to remove certification deficiencies? Yes ____ No X
3. Have you previously taken training which this course duplicates? Yes ____ No X
4. Are you pursuing a graduate degree? Yes X No ____
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. Has your graduate degree program been approved by your college advisor and placed on file with the Asst. Superintendent? Yes ____ No X
6. How many semester hours do you have toward earning your advanced degree? 0
7. How many semester hours do you have beyond your B.A. + 0 or M.A. + ____
8. How many semester or quarter hours do you expect to earn from this course?
Sem. 3 Qtr. ____

9. (Please use a separate sheet for each course.)
Institution _____ Course No. _____ Title of Course _____ Semester or dates of course _____

Rockford College 514 Educational Foundations 6/6 - 7/9

10. Please describe the course as given in the college catalog.
Study of Educational Philosophies Foundations
11. Please give your reason for taking the course.

Credit toward Masters Degree

MAY 24 1999

Approved/Disapproved _____
(Date)

Gordon O. Scott
Asst. Supt. for Administration

For office use only.

Transcript received _____

Posted on records _____

REQUEST FOR APPROVAL OF COURSEWORK

Daryl Leubner
(Teacher's Name)

OHS
Building

4-23-99
Date Submitted

All coursework must receive prior approval before salary schedule advancement will be granted. Please **complete this form in duplicate**: original for personnel file, duplicate will be returned.

1. Is this a graduate ☒ or undergraduate ____ course? (Check one)
2. Is this course required to remove certification deficiencies? Yes ____ No ☒
3. Have you previously taken training which this course duplicates? Yes ____ No ☒
4. Are you pursuing a graduate degree? Yes ☒ No ____
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. Has your graduate degree program been approved by your college advisor and placed on file with the Asst. Superintendent? Yes ____ No ☒
6. How many semester hours do you have toward earning your advanced degree? ____
7. How many semester hours do you have beyond your B.A. + ____ or M.A. + ____
8. How many semester or quarter hours do you expect to earn from this course?
Sem. ____ Qtr. ____

9. (Please use a separate sheet for each course.)

Institution	Course No.	Title of Course	Semester or dates of course
-------------	------------	-----------------	-----------------------------

<u>Rockford</u>	<u>ED 580</u>	<u>PROSEAT TEACH</u>	<u>8/2-8/6</u>
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10. Please describe the course as given in the college catalog.

Development of Skillful classroom management

11. Please give your reason for taking the course.

Credit toward Masters Degree

APR 28 1999
Approved/Disapproved
(Date)

Jordan D. Southwaite
Asst. Supt. for Administration

For office use only.

Transcript received ____

Posted on records ____

REQUEST FOR APPROVAL OF COURSEWORK

Deryl Leubner
(Teacher's Name)

OHS
Building

4-23-99
Date Submitted

All coursework must receive prior approval before salary schedule advancement will be granted. Please **complete this form in duplicate**: original for personnel file, duplicate will be returned.

1. Is this a graduate ☒ or undergraduate ____ course? (Check one)
2. Is this course required to remove certification deficiencies? Yes ____ No ☒
3. Have you previously taken training which this course duplicates? Yes ____ No ☒
4. Are you pursuing a graduate degree? Yes ☒ No ____
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. Has your graduate degree program been approved by your college advisor and placed on file with the Asst. Superintendent? Yes ____ No ☒
6. How many semester hours do you have toward earning your advanced degree? ____
7. How many semester hours do you have beyond your B.A. + ____ or M.A. + ____
8. How many semester or quarter hours do you expect to earn from this course?
Sem. ____ Qtr. ____

9. (Please use a separate sheet for each course.)

Institution	Course No.	Title of Course	Semester or dates of course
Rockford Coll.	ED 582	Teaching through Learning Channels	6/14-6/18

10. Please describe the course as given in the college catalog.

Whole Brain Learning & teaching methods.

11. Please give your reason for taking the course.

Credit toward Masters Degree

Approved/Disapproved

APR 28 1999

(Date)

John D. Caldwell
Asst. Supt. for Administration

For office use only.

Transcript received _____

Posted on records _____

REQUEST FOR APPROVAL OF COURSEWORK

Daryl Leubner
(Teacher's Name)

OHS
Building

4-23-99
Date Submitted

All coursework must receive prior approval before salary schedule advancement will be granted. Please **complete this form in duplicate**: original for personnel file, duplicate will be returned.

1. Is this a graduate ☒ or undergraduate ____ course? (Check one)
2. Is this course required to remove certification deficiencies? Yes ____ No ☒
3. Have you previously taken training which this course duplicates? Yes ____ No ☒
4. Are you pursuing a graduate degree? Yes ☒ No ____
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. Has your graduate degree program been approved by your college advisor and placed on file with the Asst. Superintendent? Yes ____ No ☒
6. How many semester hours do you have toward earning your advanced degree? ____
7. How many semester hours do you have beyond your B.A. + ____ or M.A. + ____
8. How many semester or quarter hours do you expect to earn from this course?
Sem. ____ Qtr. ____

9. (Please use a separate sheet for each course.)

Institution	Course No.	Title of Course	Semester or dates of course
-------------	------------	-----------------	-----------------------------

Rockford	ED 589	Multiple Intelligences	8/9-13
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10. Please describe the course as given in the college catalog.

Schematic work, projects, portfolios, Live-event learning

11. Please give your reason for taking the course.

Credit toward Master's Degree
APR 28 1999 (Date)
Gordon D. Ostrowski (Signature)
Asst. Supt. for Administration

For office use only.

Transcript received ____

Posted on records ____

REQUEST FOR APPROVAL OF COURSEWORK

Deryl Leebner
(Teacher's Name)

OHS
Building

1-16-01
Date Submitted

All coursework must receive prior approval before salary schedule advancement will be granted. Please **complete this form in duplicate**: original for personnel file, duplicate will be returned.

1. Is this a graduate X or undergraduate ____ course? (Check one)
2. Is this course required to remove certification deficiencies? Yes ____ No X
3. Have you previously taken training which this course duplicates? Yes ____ No X
4. Are you pursuing a graduate degree? Yes X No ____
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. Has your graduate degree program been approved by your college advisor and placed on file with the Asst. Superintendent? Yes X No ____
6. How many semester hours do you have toward earning your advanced degree? 6.0
7. How many semester hours do you have beyond your B.A. + 6.0 or M.A. + ____
8. How many semester or quarter hours do you expect to earn from this course?
Sem. 3.0 Qtr. ____

9. (Please use a separate sheet for each course.)

Institution	Course No.	Title of Course	Semester or dates of course
<u>Olivet</u>	<u>ED 701</u>	<u>Current Issues/Technology</u>	<u>3/5-5/7</u>

10. Please describe the course as given in the college catalog.

11. Please give your reason for taking the course.

Masters Degree
Approved/Disapproved JAN 16 2001
(Date)

Jordan Boothwaite
Asst. Supt. for Administration

For office use only.

Transcript received _____

Posted on records _____

REQUEST FOR APPROVAL OF COURSEWORK

Deryl Leubner
(Teacher's Name)

OHS
Building

1-16-01
Date Submitted

All coursework must receive prior approval before salary schedule advancement will be granted. Please **complete this form in duplicate**: original for personnel file, duplicate will be returned.

1. Is this a graduate X or undergraduate ____ course? (Check one)
2. Is this course required to remove certification deficiencies? Yes ____ No X
3. Have you previously taken training which this course duplicates? Yes ____ No X
4. Are you pursuing a graduate degree? Yes X No ____
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. Has your graduate degree program been approved by your college advisor and placed on file with the Asst. Superintendent? Yes X No ____
6. How many semester hours do you have toward earning your advanced degree? 6.0
7. How many semester hours do you have beyond your B.A. + 6.0 or M.A. + ____
8. How many semester or quarter hours do you expect to earn from this course?
Sem. 3.0 Qtr. ____

(Please use a separate sheet for each course.)			Semester or
Institution	Course No.	Title of Course	dates of course
<u>Olivet</u>	<u>Ed 700</u>	<u>Motivation + Instruction</u>	<u>1-8-2-26</u>

10. Please describe the course as given in the college catalog. y

11. Please give your reason for taking the course.

Masters Degree
Approved/Disapproved JAN 16 2001
(Date)

Jordan Posthwaite
Asst. Supt. for Administration

For office use only.
Transcript received ____
Posted on records ____

REQUEST FOR APPROVAL OF COURSEWORK

DERYL LEUBNER
(Teacher's Name)

OHS
Building

4-17-01
Date Submitted

All coursework must receive prior approval before salary schedule advancement will be granted. Please **complete this form in duplicate**: original for personnel file, duplicate will be returned.

1. Is this a graduate ____ or undergraduate ____ course? (Check one)
2. Is this course required to remove certification deficiencies? Yes ____ No ☒
3. Have you previously taken training which this course duplicates? Yes ____ No ☒
4. Are you pursuing a graduate degree? Yes ☒ No ____
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. Has your graduate degree program been approved by your college advisor and placed on file with the Asst. Superintendent? Yes ☒ No ____
6. How many semester hours do you have toward earning your advanced degree? 9.0
7. How many semester hours do you have beyond your B.A. + 9.0 or M.A. + ____
8. How many semester or quarter hours do you expect to earn from this course?
Sem. 3 Qtr. ____

9. (Please use a separate sheet for each course.)			Semester or
Institution	Course No.	Title of Course	dates of course
<u>Olivet Univ.</u>	<u>ED 702</u>	<u>Learning Styles: Multiple Intelligences</u>	<u>5/14 - 7/16</u>

10. Please describe the course as given in the college catalog.

Above

11. Please give your reason for taking the course.

Master's Degree

Approved/Disapproved APR 17 2001
(Date)

Gordon Whitehouse
Asst. Supt. for Administration

For office use only.

Transcript received _____

Posted on records _____

REQUEST FOR APPROVAL OF COURSEWORK

Daryl Leubner
(Teacher's Name)

OHS
Building

8-30-00
Date Submitted

All coursework must receive prior approval before salary schedule advancement will be granted. Please **complete this form in duplicate**: original for personnel file, duplicate will be returned.

1. Is this a graduate ____ or undergraduate ____ course? (Check one)
2. Is this course required to remove certification deficiencies? Yes ____ No ☒
3. Have you previously taken training which this course duplicates? Yes ____ No ☒
4. Are you pursuing a graduate degree? Yes ☒ No ____
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. Has your graduate degree program been approved by your college advisor and placed on file with the Asst. Superintendent? Yes ____ No ☒ ^{yes}
6. How many semester hours do you have toward earning your advanced degree? 0
7. How many semester hours do you have beyond your B.A. + 0 or M.A. + ____
8. How many semester or quarter hours do you expect to earn from this course?
Sem. 3 Qtr. ____

9. (Please use a separate sheet for each course.)
Institution Course No. Title of Course Semester or dates of course

Olivet Univ. Ed 709 Effective Classroom Management 10-30

10. Please describe the course as given in the college catalog.
Effective Classroom Mgmt & Leadership Principles
11. Please give your reason for taking the course.
commonly applied by teachers

Masters
Approved SEP 06 2000
(Date)

Jordan R. Brouillette
Asst. Supt. for Administration

For office use only.
Transcript received ____
Posted on records ____

REQUEST FOR APPROVAL OF COURSEWORK

DERYL LEUBNER
(Teacher's Name)

ONS
Building

8/30/00
Date Submitted

All coursework must receive prior approval before salary schedule advancement will be granted. Please **complete this form in duplicate**: original for personnel file, duplicate will be returned.

1. Is this a graduate ☒ or undergraduate ☐ course? (Check one)
2. Is this course required to remove certification deficiencies? Yes ☐ No ☒
3. Have you previously taken training which this course duplicates? Yes ☐ No ☒
4. Are you pursuing a graduate degree? Yes ☒ No ☐
If "Yes", answer number 5 & 6. If "No", go to No. 7.
5. Has your graduate degree program been ^{Yes} approved by your college advisor and placed on file with the Asst. Superintendent? Yes ☐ No ☒
6. How many semester hours do you have toward earning your advanced degree? ^{NO} 0
7. How many semester hours do you have beyond your B.A. + 0 or M.A. + 0
8. How many semester or quarter hours do you expect to earn from this course?
Sem. 3 Qtr. 0

9. (Please use a separate sheet for each course.)

Institution	Course No.	Title of Course	Semester or dates of course
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<u>Olivet Univ.</u>	<u>ED 706</u>	<u>The High Performing Teacher</u>	<u>8-21-10-23</u>
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10. Please describe the course as given in the college catalog.

Examine the traits of high-performing teachers
- Emphasis on strategies & challenges

11. Please give your reason for taking the course.

Masters
Approved/Disapproved SEP 08 2000
(Date)

Gordon R. Silvestre
Asst. Supt. for Administration

For office use only.

Transcript received

Posted on records