

Employment Contract HURON PUBLIC SCHOOLS #2-2

EMPLOYMENT CONTRACT

Huron School District No. 2-2, Huron, South Dakota

01/10/2025

Macy Sternhagen

YOU ARE HEREBY OFFICIALLY NOTIFIED, that you have been elected as a **Teacher** in the Huron School District No. 2-2, whose address is City of Huron on the annual salary basis of **\$28,211** for the school term, or the remaining part thereof, of the designated number of teaching days, inclusive of days arranged for preschool planning, beginning **01/09/2025** and subject to the calendar, or modifications of the same, as adopted by the Board of Education. The salary is to be paid the twentieth day of each of the twelve calendar months.

Your election is subject to the school laws of the State of South Dakota and to the salary schedule and contractual elements rules and regulations of the Board of Education of the Huron School District No. 2-2, which are hereby by reference, incorporated in and made a part of this contract as though set forth herein at length, subject to the right of said Board to terminate the contract for cause, to be determined upon by the Board, and subject to your right to resign upon giving thirty (30) days notice thereof, in writing to said Board within 15 days of issuance of contract.

It is further contracted and agreed that your failure to complete the term of employment prescribed herein for any cause, including but not limited to dismissal or resignation, constitutes a financial damage to the Huron School District No. 2-2 and that from the nature of the case it might be impractical or difficult to fix the actual damage. **THEREFORE**, it is understood and agreed that your failure to complete the term provided herein shall result in the following liquidated damages: failures occurring May 15 through May 31 for the ensuing year, damages shall be assessed at \$250.00. For breaking a contract June 1 through June 10, damages shall be assessed at \$500.00, for breaking of a contract June 21 through June 30, \$1000.00. For breaking a contract July 1 through July 31, damages shall be assessed at \$2,000.00 and breaking of contract August 1 and for the duration of the first semester, damages shall be assessed at \$3,000.00. Damages will be assessed at \$1,500.00 for breaking of a contract anytime during the 2nd semester. The Board reserves the right to request the Department of Education to suspend the employee's certification for one year in lieu of monetary damages in accordance with SDCL 13-42-9. Employees who are not full-time employees of the district shall be assessed damages at a percentage which matches their percent of employment.

It is further understood and agreed that resignations shall not become effective until approved by the Board of Education at the next meeting following receipt of said resignation. Further, it is hereby agreed that you will pay to the Huron School District No. 2-2, or the Huron School District No. 2-2 will withhold or appropriate

from any monies owed by them to you, and you hereby authorize such withholding or appropriation, the appropriate sum herein above set forth as liquidated damages due to your failure to complete said term.

This agreement becomes a binding contract when signed by the employee and the Board of Education.

Hired January 2025 with 0 years of teaching experience. Starting salary \$28,211 is 90.5 days in second semester x \$311.73 daily pay. Agreeing to this contract includes the following: Teachers new to the District are expected to work an additional 5 days beginning August 11. During this time, the teacher will receive appropriate training in District programs and will have time to become adequately prepared for the new school year.

ΒA

Base Contract: \$28,211

***CONTRACT MUST BE SIGNED AND RETURNED TO THE SUPERINTENDENT'S OFFICE BY 01/13/2025

TO THE BOARD OF EDUCATION OF THE HURON SCHOOL DISTRICT NO. 2-2 CITY OF HURON, BEADLE COUNTY, SOUTH DAKOTA

I hereby accept the position mentioned in the foregoing contract of hiring in the Public Schools of Huron, South Dakota, at the salary and upon and under the terms and conditions of the above and foregoing contract and have carefully read said contract and am fully informed as to the contents. I agree to attend such pre-school planning days as are scheduled exclusive of the designated number of contract days. "I clearly understand that it is my responsibility to be fully certified with the State of South Dakota for the duration of this contract. I accept that my pay will cease on October 1, and my employment may be terminated or suspended without pay until such time that I meet the certification requirements of the job."

Employee Signature	Date
Macy Sternhagen	01/10/2025 09:06 am
Chairman of School District Board Signature	Date
Tim Van Berkum	01/10/2025 01:48 pm
Business Manager of School District Signature	Date
Kelly Christopherson	01/10/2025 01:48 pm



SCHOOL DISTRICT

INTENT TO APPLY FOR GRANT FUNDING

Any person or group applying for grant funds is expected to complete this form prior to submitting any grants or
requesting funds that will impact the Huron School District.
Date: 1/13/25 Contact Person: Called Wackler
Group Applying: Hum Destruction Inagination
Name of Funder: United Way Contact Person Jen Brage
Name of Funder: United Way Contact Person Jen Brage
Amount to be Requested: 53000 Funder's Submission Due Date: April 1025
Project Focus: youth STEAM based activity
Project Focus:
Are any follow up reports required?YesNo If yes, when are they due?
Is any District funding, resource, or in-kind commitment required now or in the future? YesNo
If yes, please list by dollar amount and/or in-kind service/support. Please be specific.
Please note:
A copy of this request with signatures will be returned to the contact person above when the application is reviewed, allowing the application to proceed.
Signature: 25 Building/Department Administrator Date
Signature: Sinde Shietz 1-13-25
Linda J Pietz, Director of Curriculum, Instruction & Assessment Date Signature:
Presented to School Board:



INTENT TO APPLY FOR GRANT FUNDING

Any person or group applying for grant funds is expected to complete this form prior to submitting any grants or requesting funds that will impact the Huron School District.

Date: 1/13/25 Contact Person: Callee Machine

Group Applying: the too Destroation Imagination	
Name of Grant/Award: HYLC	
Name of Funder: HYLC Contact Person Heid + 10160 rty	
Amount to be Requested: F750 Funder's Submission Due Date: Fe 6 14, 2025	
Project Focus: 1/84/h 57 FAM achiety	
How awarded amount received? Full amount up front Reimbursement	
Are any follow up reports required? Yes No If yes, when are they due?	
Is any District funding, resource, or in-kind commitment required now or in the future? YesNo_X	
If yes, please list by dollar amount and/or in-kind service/support. Please be specific.	
 Please note: Each school/individual will be responsible for submitting and following through on the grant application process unless other arrangements have been made. A copy of the completed grant application must be available upon request. The person or group applying will need to submit the following documentation to the business offices:	
A copy of this request with signatures will be returned to the contact person above when the application is reviewed, allowing the application to proceed.	
Signature: Waiy Must 1-13-25 Building/Department Administrator Date	
Signature: 13-25 Linda J Pietz, Director of Curriculum, Instruction & Assessment Date	
Signature: Alla Massess Manager Date	
Presented to School Board:	



INTENT TO APPLY FOR GRANT FUNDING

Any person or group applying for grant funds is expected to complete this form prior to submitting any grants or requesting funds that will impact the Huron School District. Contact Person: Callee Wacketer Group Applying: Human Destruction Imagination Name of Grant/Award: theron Community Foundation Name of Funder: theron Community Foundation Contact Person Steve Gocks Project Focus:

Standard Achvity

Project Focus:

Reimbursement Amount to be Requested: \$3000 Funder's Submission Due Date: March Are any follow up reports required? X Yes ____ No If yes, when are they due? Lo days post according Is any District funding, resource, or in-kind commitment required now or in the future? If yes, please list by dollar amount and/or in-kind service/support. Please be specific. Please note: o Each school/individual will be responsible for submitting and following through on the grant application process unless other arrangements have been made. o A copy of the completed grant application must be available upon request. o The person or group applying will need to submit the following documentation to the business offices: o If and when the grant is awarded, a copy of the award letter. o If any follow-up reports are required, a copy of the report. A copy of this request with signatures will be returned to the contact person above when the application is reviewed. allowing the application to proceed. Waiz Mulding/Department Administrator Linda J Pietz, Director of Curriculum, Instruction & Assessment Kelly Christopherson, Business Manager

Presented to School Board:



INTENT TO APPLY FOR GRANT FUNDING

Any person or group applying for grant funds is expected to complete this form prior to submitting any grants or requesting funds that will impact the Huron School District.

requesting rands that with impact the i	
Date: 1-13-2025 Contact Person: Jolene Kone	echne
Group Applying: Huron School District	
Name of Grant/Award: ELA – SD	
Name of Funder: SD DOE Contact	Person Patti Lager
Amount to be Requested: \$\frac{\pmu}{\pmu} \frac{\pmu}{\pmu} \frac{\pmu}{\pmu}{\pmu} \frac{\pmu}{\pmu} \frac{\pmu}{\pmu} \frac{\pmu}{\pmu}	Date: approx. March 14
Amount to be Requested: \$\frac{\pmu tv}{\pmu} \frac{\pmu tv}{\pmu} \frac{\pmu tv}{\pmu} \frac{\pmu tv}{\pmu} \frac{\pmu tv}{\pmu tv} \frac{\pmu tv}{\p	- across SD - improving literacy
How awarded amount received? Full amount up	front Reimbursement
Are any follow up reports required? Yes No _ If yes,	when are they due? <u>Un Known</u>
Is any District funding, resource, or in-kind commitment required no	ow or in the future? YesNo
If yes, please list by dollar amount and/or in-kind service/support.	Please be specific.
Please note: Each school/individual will be responsible for submitting and process unless other arrangements have been made. A copy of the completed grant application must be avai The person or group applying will need to submit the following lifting and process unless of the grant is awarded, a copy of the award lifting and process. 	lable upon request. ng documentation to the business offices: d letter.
A copy of this request with signatures will be returned to the contact	
Signature: Allowing the application to Building/Department Administrator	1/13/2025 Date
Signature: Linda Proty	1/13/2025
Linda J Pietz, Director of Curriculum, Instruction & Asso	essment Date
Signature: Kelly Christopherson, Business Manager	Date
Presented to School Board:	