



# INSTRUCTIONS FOR COMPLETING DONATED ADJUNCT PAPERWORK

Human Resources & Equal Employment Opportunity

Welcome to Hartnell College! This packet includes the forms necessary to process you as a new donated academic employee and therefore authorize you to begin service. You may not begin service until these forms are completed and returned to your hiring department. Please return all required forms in one single submission. The following should provide you with helpful information for completing your employment process.

## TASKS TO COMPLETE IMMEDIATELY

### Fingerprint Requirements - Request For Live Scan Service (Form BCII 8016):

The California Education Code requires that you be fingerprinted within 10 working days of service. *If you have already been fingerprinted for employment or donated teaching at Hartnell this may not apply to you.* Hartnell contracts with the Monterey County Sheriff's Office at 1414 Natividad Road in Salinas to take and submit your fingerprints at no charge to you.

Call the Sheriff's Office at 755-3716 for an appointment (expect an approximate two week wait time). Bring your Request for Live Scan Service form with the highlighted sections completed (see below for explanation of abbreviations) **and** a valid picture ID to your appointment. The Sheriff's Office will keep the original page of the form. Return the yellow copy immediately to your hiring department and retain the pink copy for your records.

AKA's: Other names (if any) you have used	POB: Place of Birth (City and State/Country)
HT: Height	SOC: Social Security Number
WT: Weight	CDL No: California Driver License Number
Misc. No.: Other identifying numbers (e.g., Driver's License Number from another State)	

### TB Requirements - TB Skin Test Authorization (Form HR-9):

The California Education Code requires that you provide proof that you are free of active tuberculosis through an examination performed within the past 60 days. If you are joining Hartnell directly from employment with another California educational institution where you had a TB test within the past four years, you may ask your former school to transfer your TB record to Hartnell.

WorkWell Health Services in Salinas has been contracted to administer your TB Skin Test or X-ray at Hartnell's expense. If you do not reside in Salinas, and/or your work schedule does not allow you an open window of opportunity to be tested by WorkWell, you may have your TB test performed by one of the alternative Doctors locations listed on the back of your TB Skin Test Authorization. Complete the information on the TB Skin Test Authorization form and be sure to refer to the back of the form for important information. Your TB Skin Test Authorization letter from the Human Resources Office must be presented at the time of testing or you will be charged for the testing.

Submit the results of your TB Test to your hiring department within 10 days of employment. Failure to submit your test results may result in withholding your paycheck or removal from your teaching assignment.

## FORMS FOR YOU TO COMPLETE AND RETURN

### Data Sheet for Donated Adjunct Instructors (Form HR-34):

Complete top portion of this form and refer to the bottom for a list of all documents to be completed and returned. Return this sheet with your Employment Paperwork

### Demographic Information (Form HR-36):

Complete and submit. This form is for required reporting purposes only. It will be kept confidential and separate from all employment information.

**Physician Designation Form (Form HR-20):**

This is for work related accidents or illnesses. If you *DO NOT* designate a doctor you *must* go to a listed Medical Panel provider for your first 30 days of treatment. If you *DO* designate a doctor, you may go to that doctor for treatment at any time - without having to wait the 30 days. **Your name, social security number, signature and completion of the Emergency Information are required regardless of whether or not a doctor is designated.** An informational packet regarding work injuries entitled “The Injured Worker” is included in your packet.

**Standards of Employment/Service Agreement (Form HR-16):**

Read and initial all four paragraphs. A Drug Free Workplace pamphlet has been included in your packet for your reading. Your signature must be made in the presence of your department representative or Human Resources.

**INFORMATION PROVIDED FOR YOU TO REVIEW AND RETAIN**

**AP & BP 3720**

**Basics of Workers’ Compensation**      Referred to on ‘*Physician Designation Form*’

**Drug Free Workplace Brochure**      Referred to on ‘*Standards of Employment/Service Agreement*’ Form

**New Health Insurance Marketplace Coverage**



# DATA SHEET FOR DONATED ADJUNCT INSTRUCTOR

Human Resources & Equal Employment Opportunity

- Dr.
- Mr.
- Ms.

\_\_\_\_\_  
 Last Name    First Name    MI

Address: \_\_\_\_\_

Street \_\_\_\_\_

\_\_\_\_\_  
 City    State    Zip

Home Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Sex:  Female  Male

Semester you will be teaching: Fall 20 \_\_\_\_\_ Spring 20 \_\_\_\_\_ Summer 20 \_\_\_\_\_

### AREA

- |   |   |   |                                       |
|---|---|---|---------------------------------------|
| <input type="checkbox"/> Fine Arts/Social Science/Language Arts | <input type="checkbox"/> Physical Education     | <input type="checkbox"/> Student Services | <input type="checkbox"/> Counseling   |
| <input type="checkbox"/> Math/Science/AHT                       | <input type="checkbox"/> Occupational Education | <input type="checkbox"/> Library          | <input type="checkbox"/> Theatre Arts |
| <input type="checkbox"/> Nursing                                | <input type="checkbox"/> King City Center       | <input type="checkbox"/> ALC              |                                       |

## RETURN WITH THE FOLLOWING FORMS - DEPARTMENT USE ONLY

- Fingerprints (Appointment Scheduled) \_\_\_/\_\_\_/\_\_\_ (or Taken) \_\_\_/\_\_\_/\_\_\_
- Valid Negative TB Report (Appointment Scheduled) \_\_\_/\_\_\_/\_\_\_ (or Taken) \_\_\_/\_\_\_/\_\_\_
- Demographic Information (*Form HR-36*)
- Physician Designation Form (*Form HR-20*)
- Standards of Employment/Service Agreement (*Form HR-16*)

Payroll     \_\_\_/\_\_\_/\_\_\_  
 Access     \_\_\_/\_\_\_/\_\_\_  
 MCOE     \_\_\_/\_\_\_/\_\_\_  
 Datatel    \_\_\_/\_\_\_/\_\_\_



# DEMOGRAPHIC INFORMATION (CONFIDENTIAL)

## Human Resources & Equal Employment Opportunity

The California Community College Chancellor's Office requires that we report summary data on all academic employees. This form will be kept confidential and separate from all employment information and will not be retained in your personnel file.

<b>Name:</b>	
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<b>Personal:</b>	<input type="checkbox"/> Female <input type="checkbox"/> Male	
	Are you a person with a disability?* <input type="checkbox"/> Yes <input type="checkbox"/> No	*As defined in the Americans with Disabilities Act of 1990, a disabled person is one who: (1) Has a physical or mental impairment which substantially limits one or more major life activities; (2) Has a record of such an impairment; or (3) Is regarded as having such impairment.
If yes, do you need any accommodation(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please contact the Human Resources Office for services.</i>		

<b>Heritage:</b>	<b>Are you Hispanic or Latino?</b> <input type="checkbox"/> Yes or <input type="checkbox"/> No	
	<input type="checkbox"/> Mexican, Mexican-American, Chicano <input type="checkbox"/> Central American <input type="checkbox"/> South American <input type="checkbox"/> Other Hispanic	
<b>Heritage:</b>	<b>What is your race / ethnicity? (Check one or more.)</b>	
	<input type="checkbox"/> Asian Indian <input type="checkbox"/> Japanese <input type="checkbox"/> Laotian <input type="checkbox"/> Vietnamese <input type="checkbox"/> Asian Other <input type="checkbox"/> American Indian / Alaskan Native <input type="checkbox"/> Hawaiian <input type="checkbox"/> Pacific Islander Other	<input type="checkbox"/> Chinese <input type="checkbox"/> Korean <input type="checkbox"/> Cambodian <input type="checkbox"/> Filipino <input type="checkbox"/> Black or African American <input type="checkbox"/> Guamanian <input type="checkbox"/> Samoan <input type="checkbox"/> White

<b>Veteran Status:</b>	<input type="checkbox"/> Veteran <input type="checkbox"/> Vietnam Veteran
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HARTNELL COLLEGE

# workers' compensation: Pre-Designation of Personal Physician

If you have health insurance and are injured on the job, you have the right to be treated immediately by your personal physician (M.D., D.O), or medical group, if you notify your employer, in writing, prior to the injury.

Per Labor Code 4600, to qualify as your pre-designated, personal physician, the physician must agree in writing to treat you for a work related injury, must have previously directed your medical care, and must retain your medical history and records. The physician must be a family practitioner, general practitioner, board certified or board eligible internist, obstetrician-gynecologist, or pediatrician. Your "personal physician" may be a medical group if it is a single corporation or partnership composed of licensed doctors of medicine or osteopathy which operates an integrated multi-specialty medical group providing comprehensive medical services predominantly for non-occupational illnesses and injuries.

This is an optional form that can be used to notify your employer of your personal physician. You may choose to use another form, as long as you notify your employer in writing prior to being injured on the job, and provide written verification that your personal physician meets the above requirements and agrees to be pre-designated.

If you do not provide advance written notification, verification, and agreement of your pre-designated personal physician, you will be treated by one of the District's designated workers' compensation medical providers.

**EMPLOYEE NAME:** \_\_\_\_\_ **LAST FOUR DIGITS OF SSN:** \_\_\_\_\_

I acknowledge receipt of this form and do not elect to pre-designate my personal physician at this time. I understand that I will receive medical treatment from my employers' medical provider. I understand that, at any time in the future, I can change my mind and provide written notification of my personal physician. I understand that the written notification must be on file prior to an industrial injury.

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

I elect to pre-designate that if I am injured on the job, I want to be treated by my personal physician\*:

Name of Physician or Medical Group: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address \_\_\_\_\_

\*This physician is my personal primary care physician who has previously directed my medical care and retains my medical history and records.

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

**\*A Personal Physician must be willing to be pre-designated to treat you for a workers' compensation injury. The remainder of this form is to be completed by your pre-designated physician and returned to your Employer.**

## PERSONAL PHYSICIAN ACKNOWLEDGEMENT

Per Labor Code 4600, to qualify, you must meet the criteria outlined above. You are not required to sign this form; however, if you or your designated employee does not sign it, other written documentation of the physicians' agreement to be pre-designated will be required, pursuant to Title 8, California Code of Regulations, section 9780.1(a)(3).

PERSONAL PHYSICIAN OR MEDICAL GROUP NAME: \_\_\_\_\_

I agree to treat the above named employee in the event of an industrial accident or injury. I meet the criteria outlined above. I agree to adhere to the Administrative Director's Rules and Regulations, Section 9785, regarding the duties of the employee-designated physician.

I do not agree to treat the above employee in the event of an industrial accident or injury.

I do not qualify as the employees' personal physician, I am not an M.D. or D.O., or I do not meet the criteria outlined above.

Physician Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Physician or Designated Employee of the Physician or Medical Group)

**Completed form must be returned to:  
Hartnell College, Human Resources Department  
Fax: 831.755.6937**



# STANDARDS OF EMPLOYMENT/SERVICE AGREEMENTS

Human Resources & Equal Employment Opportunity

I acknowledge my employment responsibilities with the Hartnell Community College District (HCCD) will bring me into contact with sensitive and confidential information. I understand that as a result of my access to the Colleague database and other HCCD resources, I am exposed to personal information about students, employees and other associates of HCCD. Such information may include, but may not be limited to their names, addresses, and contact information. I understand this information may be protected by privacy laws and is regarded as confidential by HCCD. My initials and signature below confirm my understanding that this information is protected by privacy laws and regarded as confidential by HCCD.

\_\_\_\_\_ Initial

My initials and signature below confirm my agreement to protect the personal privacy of employee, student and other individuals' records. I will prevent inappropriate or unnecessary disclosure of such records to unauthorized institutions, companies, groups, agencies, and individuals. I will collect and retain only such personal information as I may need to effectively conduct my duties for the District. I promise I will handle such information in a secure, confidential, and appropriate manner in accordance with relevant laws, regulations, policies and procedures. I understand that this agreement will be placed in my personnel file.

\_\_\_\_\_ Initial

HCCD is subject to the Federal Drug Free Workplace Act of 1998, in which HCCD is required to certify it will maintain a drug free workplace. As an employee of the District, my initials and signature below acknowledge that I am required to notify my supervisor, Human Resources, or the Superintendent/President of any conviction for a criminal drug statute violation occurring in the workplace within five days of such conviction. I am also required to read the HCCD Drug Free Workplace brochure. The Drug Free Workplace Act is also outlined in the Governing Board Policies. My initials and signature below acknowledges I have received, read, and understand the information in the brochure.

\_\_\_\_\_ Initial

My initials and signature below is also confirmation that I do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the Constitution of the State of California against all enemies, foreign and domestic; that I will bear true faith and allegiance to the Constitution of the United States and the Constitution of the State of California; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties upon which I am about to enter.

\_\_\_\_\_ Initial

I acknowledge that I have received and read a copy of the Hartnell Community College District Board Policy 3720 and Administrative Procedure 3720, Computer and Network Use. I recognize and understand these rules and regulations. I agree to abide by the standards set in the policy and procedure for the duration of my employment. I am aware that violations of this computer and network use policy and procedure may subject me to disciplinary action including, but not limited to, revocation of my network account up to and including prosecution for violation of state and/or federal law.

\_\_\_\_\_ Initial

Employee Name: \_\_\_\_\_

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

Date: \_\_\_\_\_

Taken and subscribed before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
Signature of Authorized HCCD Witness: \_\_\_\_

## HARTNELL COMMUNITY COLLEGE DISTRICT

### **AP 3720 Computer, Electronic Communication, and Network Use**

**References:** 17 U.S. Code Sections 101 et seq., Penal Code Section 502, Cal. Const., Art. 1 Section 1, Government Code Section 3543.1(b), Federal Rules of Civil Procedure, Rules 16, 26, 33, 34, 37, 45

In support of the College's mission of teaching, research, and public service, Hartnell provides computing, networking, and information resources to the campus community of students, faculty, and staff.

#### **Rights and Responsibilities**

Computers and networks can provide access to resources on and off campus, as well as the ability to communicate with other users worldwide. Such open access is a privilege, and requires that individual users act responsibly. Users must respect the rights of other users, respect the integrity of the systems and related physical resources, and observe all relevant laws, regulations, and contractual obligations.

Students, employees may have rights of access to information about themselves contained in computer files, as specified in federal and state laws. Files may be subject to search under court order. In addition, system administrators may access user files as required to protect the integrity of computer systems. For example, following organizational guidelines, system administrators may access or examine files or accounts that are suspected of unauthorized use or misuse, or that have been corrupted or damaged.

#### **Existing Legal Context**

All existing laws (federal and state) and District regulations and policies apply, including not only those laws and regulations that are specific to computers and networks, but also those that may apply generally to personal conduct. Misuse of computing, networking, or information resources may result in the restriction of computing privileges. Additionally, misuse can be prosecuted under applicable statutes. Users may be held accountable for their conduct under any applicable District or campus policies, procedures, or collective bargaining agreements. Complaints alleging misuse of campus computing and network resources will be directed to those responsible for taking appropriate disciplinary action. Reproduction or distribution of copyrighted works, including, but not limited to, images, text, or software, without permission of the owner is an infringement of U.S. Copyright Law and is subject to civil damages and criminal penalties including fines and imprisonment.

#### **Examples of Misuse**

Examples of misuse include, but are not limited to, the activities in the following list.

- a) Violation of Law. Any use of Hartnell's technology resources which is in violation of federal, state or local law, or which is in aid to or furtherance of the violation of federal, state or local law, is prohibited. This includes, but is not limited to, the violation of copyright and other intellectual property laws.
- b) Using a computer account that you are not authorized to use. Obtaining a password for a computer account without the consent of the account owner.
- c) Using the Campus Network to gain unauthorized access to any computer systems.
- d) Knowingly performing an act which will interfere with the normal operation of computers, terminals, peripherals, or networks.
- e) Knowingly running or installing on any computer system or network, or giving to another user, a program intended to damage or to place excessive load on a computer system or network. This includes but is not limited to programs known as computer viruses, Trojan horses, and worms.
- f) Attempting to circumvent data protection schemes or uncover security loopholes.
- g) Violating terms of applicable software licensing agreements or copyright laws.
- h) Deliberately wasting computing resources.
- i) Using electronic mail to harass others.
- j) Masking the identity of an account or machine.
- k) Posting materials on publically accessible information technology resources that violate existing laws or the District's codes of conduct.
- l) Attempting to monitor or tamper with another user's electronic communications, or reading, copying, changing, or deleting another user's files or software without the explicit agreement of the owner.
- m) Commercial Activities. Hartnell's technology resources exist for educational purposes and may not be used for any commercial activities for personal financial gain, whether on behalf of individuals or for-profit entities, unless expressly authorized by Hartnell in writing.
- n) Obscene Material. Accessing, uploading, downloading, transmitting, producing, storing or viewing of any obscene material is prohibited. Obscene material includes "harmful matter" as defined by California Penal Code section 313, meaning "matter, taken as a whole, which to the average person, applying contemporary statewide standards, appeals to the prurient interest, and is matter which, taken as a whole, depicts or describes in a patently offensive way sexual conduct and which, taken as a whole, lacks serious literary, artistic, political, or scientific value for minors."
- o) Food or Drink Prohibited. Users of Hartnell's technology resources generally accessible to the public, such as computer labs, may not possess or consume any food or drink, including water, while using such resources or within the immediate vicinity of the technology equipment.
- p) Defamatory/Harassing/Threatening Material. Creation or transmission of material which is defamatory, harassing or threatening toward another person is



prohibited. Using Hartnell's technology resources to violate the legal privacy rights of any individual is also prohibited.

Activities will not be considered misuse when authorized by appropriate District officials for security or performance testing.

### **Additional Use Policies**

The Computer Use Policy applies to use of all Hartnell Campus computing resources. Additional computer and network use policies and terms and conditions may be in place for specific electronic services offered by the campus. The Computer Use Policy applies to the use of Hartnell computers and networks for electronic communications. Users must familiarize yourselves with any of these when you agree to use these services.

### Authorized Use by Minors

Hartnell students under the age of eighteen, by accepting the benefits of authorized use of the District's technology resources, acknowledge that material inappropriate for minors is accessible on the Internet; that various wrongdoing, such as identity theft, invasion of privacy and fraud, may occur on the Internet, and that their use of the Internet may therefore expose them to a variety of risks of harm to person or property. By using Hartnell's technology resources, minors and their parents accept responsibility for any and all risks thereof and acknowledge that Hartnell shall not be responsible for any harm or damage resulting from such use.

### Web Pages

Hartnell College has established and presently maintains a web site which includes information regarding Hartnell's mission and purpose, courses, faculty and staff, students, and such other information and resources as the Hartnell administration determines is appropriate for inclusion (this includes a public listing of employee directory/contact information). The use of Hartnell technology resources for the creation of individual web pages, whether for official or personal purposes, shall be subject to the following requirements:

- a) **Establishing Official Web Pages.** The Hartnell administration may authorize a process for the creation and maintenance of official web pages by Hartnell faculty, staff, departments of the College, or student organizations. Official web pages must be approved by the designated Hartnell administrator and the content must be consistent with the general style and content of the Official Hartnell web site. The addition or modification of material to official web pages must also be approved by the designated Hartnell administrator prior to the posting of such content. Material appropriate for placement on official web pages includes administrative and academic information for specific departments or student organizations, faculty, staff or class information, or relevant reference information. Official pages must be served from officially

designated server platforms that the IT personnel has authorization and access to for maintenance or content management.

- b) Establishing Personal Web Pages. The Hartnell administration may authorize the creation and maintenance of personal web pages by students, faculty or staff. Personal web pages must be for educational purposes, including research, discussion, academic development, public service and other educational uses consistent with the mission of Hartnell, and must otherwise comply with the requirements of this technology use policy. The creation of personal web pages must be authorized by the appropriate administrator and proposed content may be reviewed for compliance with this policy. In addition to the requirement that the content of personal web pages comply with this policy, any sites to which the personal web page links must be consistent with this policy.
- c) Personal Web Page Disclaimer. Personal web pages must include the following notice: "This is a personal web page. Any opinions expressed on this page are not those of Hartnell College, nor does Hartnell guarantee the accuracy or appropriateness of any information contained on this page, nor any information linked to by this page."

#### Email Correspondence

Email correspondence between employees of the Hartnell CCD, between employees and students, and between employees and external entities (e.g., vendors, community members) directly related to performing job duties and conducting the business of the District must take place using the official @hartnell.edu email address. Communications between enrolled students and employees must utilize the @student.hartnell.edu email address. Hartnell College students should be directed to check @student.hartnell.edu email often for communication from the college and its employees. There are exceptions to this procedure such as when employees are contacted by past students who no longer use or prospective students who have not yet received their @student.hartnell.edu email address. There can also be occasional situations when communicating with the official Hartnell email address is not possible due to computer network outages or other circumstances.

Internet and E-mail access is a privilege, not a right, and activities that may be acceptable on your private account at home may not be acceptable when using your District-authorized service.

As a public institution, the Hartnell CCD is subject to the California Public Records Act (Government Code § 6250 et seq.). The PRA requires that all communications related to public business "regardless of physical form or characteristics, including any writing, picture, sound, or symbol, whether paper, magnetic or other media" be made available to the public. This means that any member of the public can request copies of email communications that have been produced by any employee or student of the District. There are exemptions for disclosure of public records and they generally include personnel records, investigative records, drafts, and material made confidential by other

state or federal statutes. Setting aside these few exemptions, the vast majority of email communications are available through a PRA request. Therefore, email communications among and between employees and/or students are not confidential or private. Placing a "confidential statement" at the end of an email does not control whether a communication is exempt from the PRA. Email communications related to HCCD business can be distributed and/or forwarded without permission of the sender.

When system problems occur, such as hardware or software failure or attacks by malicious users, the IT staff, who maintain the e-mail servers, are authorized to look at any information and any files on District computers that are necessary to solve the problems and to protect the systems and the information they contain. It is part of the system administrator's job to do this and to treat any information on the systems as confidential.

In addition to the authorized actions of the District's system administrator, e-mail can end up in the hands of computing staff if it was inaccurately addressed and if it could not be delivered.

#### Personal Use of Computer and Network Resources

Brief and occasional personal use of District computer and network resources is acceptable as long as it is not excessive or inappropriate, occurs during personal time (lunch or other breaks), and does not result in expense or harm to the District or otherwise violates District policy or procedure.

#### **Appropriate Use**

Hartnell extends to students, faculty, and staff the privilege to use its computers and network. When you are provided access to our campus network, you are enabled to send and receive electronic mail messages around the world, share in the exchange of ideas through electronic news groups, and use Web browsers and other Internet tools to search and find needed information.

The Internet is a very large set of connected computers, whose users make up a worldwide community. In addition to formal policies, regulations, and laws that govern your use of computers and networks, the Internet user community observes informal standards of conduct. These standards are based on common understandings of appropriate, considerate behavior that evolved in the early days of the Internet, when the internet was used mainly by an academic and highly technical community. The Internet now has a much wider variety of users, but the early codes of conduct persist, crossing boundaries of geography and government, in order to make using the Internet a positive, productive, experience. You are expected to comply with these informal standards and be a "good citizen" of the Internet.

## **Enforcement**

Penalties may be imposed under one or more of the following: California Education Code regulations, Hartnell regulations, California law, or the laws of the United States. Minor infractions of this policy or those that appear accidental in nature are typically handled informally by electronic mail or in-person discussions. More serious infractions are handled via formal procedures. In some situations, it may be necessary to suspend account privileges to prevent ongoing misuse while the situation is under investigation. Infractions by students may result in the temporary or permanent restriction of access privileges, notification of a student's academic advisor and/or referral of the situation to the Office of Student Affairs. Those by a faculty or staff member may result in referral to the department head or administrative officer. Offenses that are in violation of local, state, or federal laws may result in the restriction of computing privileges, and will be reported to the appropriate District and law enforcement authorities.

## **Reporting Misuse**

A user who asserts that the District or District personnel have violated this policy shall file a complaint with his or her immediate supervisor with a copy to Human Resources and a copy to the employee's bargaining unit in the event the alleged violator is an employee or Student Affairs in the event the violator is a student. The administration will contact the alleged violator to discuss the complaint. The supervisor/administrator of the complainant shall initiate an investigation if necessary and determine an appropriate remedy/resolution in consultation with the appropriate Vice President. In cases where the supervisor/administrator is part of the complaint, the complaint shall be filed with the next level of supervision for investigation and resolution and/or remedy. The complainant shall be informed in writing 1) of the initiation of the investigation, and 2) of its outcome as appropriate, with copies to the appropriate Vice President and the employee's case the correct bargaining unit. Complainants dissatisfied with the resolution/remedy have full recourse to relevant contractual protections and/or legal action

## **Dissemination and User Acknowledgment**

All users shall be provided copies of these procedures and be directed to familiarize themselves with them.

Students shall acknowledge acceptance of BP/AP 3720 electronically when accessing District computer and network resources. Employees shall acknowledge acceptance of BP/AP 3720 during the employment process.

## **Disclosure**

### *No Expectation of Privacy*

The District reserves the right to monitor all use of the District network systems and computers to assure compliance with these policies. Users should be aware that they have no expectation of privacy in the use of the District network and computer

resources. The District will exercise this right only for legitimate District purposes including, but not limited to, ensuring compliance with this procedure and the integrity and security of the system.

*Possibility of Disclosure*

Users must be aware of the possibility of unintended disclosure of communications.

*Retrieval*

It is possible for information entered on or transmitted via computer and communications systems to be retrieved, even if a user has deleted such information.

*Public Records*

The California Public Records Act (Government Code Sections 6250 et seq.) includes computer transmissions in the definition of “public record” and nonexempt communications made on the District network and computer must be disclosed if requested by a member of the public.

*Litigation*

Computer transmissions and electronically stored information may be discoverable in litigation.

See Board Policy 3720

Approved by the Superintendent/President: April 2, 2014

## Computer and Network Use Agreement

I have received and read a copy of the Hartnell Community College District Administrative Procedure 3720, Computer and Network Use, adopted by the Board of Trustees, and recognize and understand the guidelines.

I agree to abide by the standards set in the procedure for the duration of my employment and/or enrollment.

I am aware that violations of this Computer and Network Use Procedure may subject me to disciplinary action including, but not limited to, revocation of my network account up to and including prosecution for violation of State and/or Federal law.

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Signature

Date

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Name (Printed)

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# Chapter 1. The Basics of Workers' Compensation



## What is workers' compensation?

If you get hurt on the job, your employer is required by law to pay for workers' compensation benefits. You could get hurt by:

- **One event at work.** Examples: hurting your back in a fall, getting burned by a chemical that splashes on your skin, getting hurt in a car accident while making deliveries.  
or:
- **Repeated exposures at work.** Examples: hurting your hand, back, or other part of the body from doing the same motion over and over, losing your hearing because of constant loud noise.

Workers' compensation covers some, but not all, stress-related (psychological) injuries caused by your job. Also, workers' compensation may not cover an injury that is reported to the employer after the worker is told he or she will be terminated or laid off. For information about what is covered, use the resources in Chapter 10.

## What are the benefits?

They can include:

**Medical Care.** Paid for by your employer, to help you recover from an injury or illness caused by work. This includes doctor visits and other treatment services, tests, medicines, equipment, and travel costs reasonably necessary to treat your injury.

**Temporary Disability Benefits.** Payments if you lose wages because your injury prevents you from doing your usual job while recovering.

**Permanent Disability Benefits.** Payments if you don't recover completely and your injury causes a permanent loss of physical or mental function that a doctor can measure.

**Supplemental Job Displacement Benefit.** A voucher to help pay for retraining or skill enhancement if you are eligible to receive permanent disability benefits, your employer doesn't offer you work, and you don't return to work for your employer. This benefit is available for workers injured in 2004 or later. If your injury also occurred in 2013 or later and you received a Supplemental Job Displacement Benefit, you may also be eligible for an additional, one-time payment under the Return-to-Work Supplement Program.

**Death Benefits.** Payments to your spouse, children, or other dependents if you die from a job injury or illness.

For examples of workers' compensation payments, see p. 5.

## Can my regular doctor treat me if I get hurt on the job?

It depends on whether you tell your employer in **writing—before** you are injured—the name and address of your personal physician or a medical group. This is called “predesignating.” If you predesignate, you may see your personal physician or the medical group right after you are injured.

## How to predesignate

To predesignate your personal physician (if you are eligible to do so), you must notify your employer in writing. You may prepare your own written statement, use optional DWC Form 9783 provided by the Division of Workers' Compensation, or use a form provided by your employer. To download DWC Form 9783, go to [www.dir.ca.gov/dwc/forms.html](http://www.dir.ca.gov/dwc/forms.html).

**Note:** If your employer or the insurer has a contract with a health care organization (HCO), you must use a different form, discussed on the next page.

Make sure to include the following information:

1. Name of your employer
2. A statement that if you are hurt on the job, you designate your personal physician to provide medical care. Give the name, address, and phone number of your physician.
3. Your name
4. Your signature
5. Date

You can predesignate a doctor of medicine (MD) or doctor of osteopathy (DO) who treated you in the past and has your medical records. The doctor must be a general practitioner, internist, pediatrician, obstetrician-gynecologist, or family practitioner who is your primary care physician.

You cannot predesignate your personal chiropractor or acupuncturist, but if you give your employer the name of your personal chiropractor or acupuncturist in writing before you are injured, you may switch to this chiropractor or acupuncturist upon request, after you first see a doctor chosen by a claims administrator (a person who handles workers' compensation claims for your employer).

You may also predesignate a medical group if it meets the following criteria:

- Is composed of licensed doctors of medicine (MD) or doctors of osteopathy (DO)
- Offers and coordinates both primary care and care in other medical specialties
- Mostly treats medical conditions that are unrelated to work

You cannot predesignate unless the physician or medical group you predesignate agrees in advance to treat you for job injuries and illnesses. You can document the agreement by having the physician, an employee of the physician, or an employee of the medical group sign the predesignation form, or by some other form of documentation. Include the documentation when you give your employer the predesignation form or statement.

*If you predesignate, you may see your personal physician or medical group right after you are injured.*

## Can all workers predesignate?

No. You can predesignate only if, on your date of injury, you have health care coverage for medical conditions that are unrelated to work. If you do not have this coverage, you do not have a right to predesignate.



## Are there different rules for predesignating if my employer or the insurer has a contract with a health care organization (HCO)?

Yes. A health care organization (HCO) is an organization certified by the Division of Workers' Compensation to provide managed medical care to injured workers. If your employer or the insurer has a contract with an HCO, the employer or insurer must give you DWC Form 1194 within 30 days after your date of hire and at least once a year. You can use this form to predesignate your personal physician, personal chiropractor, or personal acupuncturist. You are not required to show that your doctor agreed to be predesignated. If you do not predesignate each time you are given this form, your employer will enroll you in the HCO and you will be treated in the HCO for job-related injuries.

## What should I do if I get hurt at work or develop a work-related medical problem?

**Report the injury or illness to your employer.** Make sure your supervisor or someone else in management knows as soon as possible. If your injury or illness developed gradually (like tendinitis or hearing loss), report it as soon as you learn or believe it was caused by your job. Reporting promptly helps avoid problems and delays in receiving benefits, including medical care. If your employer does not learn about your injury within 30 days, you could lose your right to receive workers' compensation benefits.

**Get emergency treatment if needed.** If it's an emergency, call 911 or go to an emergency room right away. Your employer must make sure that you have access to emergency treatment right away and may tell you where to go for treatment. Tell the medical staff that your injury or illness is job-related.

For more steps to take, see Chapter 2.

## How can I avoid getting hurt on the job?

It's best to prevent injuries before they happen. Employers in California are required to have an Injury and Illness Prevention Program. The program must include worker training, workplace inspections, and procedures for correcting unsafe conditions promptly. Learn about and participate in your employer's program. Report unsafe conditions to your employer and union, if you have one. If they don't respond, call Cal/OSHA, the state agency that enforces health and safety laws.

### Did you know?

- Medical care must be paid for by your employer if you get hurt on the job—whether or not you miss time from work.
- You may be eligible to receive benefits even if you are a temporary or part-time worker.
- You may be covered by workers' compensation as an employee even if you are called an "independent contractor."
- You don't have to be a legal resident of the United States to receive most workers' compensation benefits.
- You receive benefits no matter who was at fault for your job injury.
- You can't sue your employer for a job injury (in most cases).
- It's illegal for your employer to punish or fire you for having a job injury or for requesting workers' compensation benefits when you believe your injury was caused by your job.

## Workers' Compensation Benefits—Examples

### Temporary Total Disability Benefits

DATE OF INJURY	MINIMUM PAYMENTS	MAXIMUM PAYMENTS
2010	\$148.00 per week	\$986.69 per week
2011	\$148.00 per week	\$986.69 per week
2012	\$151.57 per week	\$1,010.50 per week
2013	\$160.00 per week	\$1,066.72 per week
2014	\$161.19 per week	\$1,074.64 per week
2015	\$165.49 per week	\$1,103.29 per week
2016	\$169.26 per week	\$1,128.43 per week

### Permanent Disability Benefits—Examples

The following are only examples. They apply to workers who earned more than \$435 per week before injury, and whose employer has fewer than 50 employees. The examples are not adjusted for age, occupation, or other factors causing disability (apportionment).

DISABILITY	INJURY IN 2005-12	INJURY IN 2013	INJURY IN 2014
Total loss of vision in one eye, normal vision in other eye	\$19,665.00 (total)	\$27,312.50 (total)	\$34,437.50 (total)
Amputation of index finger at middle joint	\$6,210.00 (total)	\$7,877.50 (total)	\$9,932.50 (total)

### Supplemental Job Displacement Benefits

DATE OF INJURY	MAXIMUM BENEFIT
2004–12	\$4,000 to \$10,000, depending on permanent disability rating
2013 or later	\$6,000

### Death—Examples involving three or more total dependents

The following are only examples. Benefits are also available if there are fewer than three total dependents, or if there are partial dependents.

#### Burial expenses:

Date of injury before 2013: up to \$5,000

Date of injury 2013 or later: \$10,000

#### Death benefits if there are three or more total dependents:

Date of injury 2006 or later: \$320,000 (total)

(Regardless of the amounts listed above, death benefits paid to a totally dependent child continue until the child reaches age 18. If the child is physically or mentally incapacitated, benefits continue until the child's death.)



# DRUG FREE WORKPLACE

**HARTNELL COLLEGE** is a drug and alcohol free campus, as required by law, and the possession, use, manufacture, or distribution of any illegal substance or alcohol is prohibited, and such prohibitions are strictly enforced.

## HARTNELL COLLEGE POLICY

The Hartnell College Board of Trustees, administration, faculty and staff are committed to maintaining a drug free workplace, and recognize that alcohol and other drug abuse is a serious threat to the health and welfare of employees and students. The District complies with the Drug Free Workplace Act of 1988, and the Drug Free Schools and Communities Act Amendments of 1989.

### Consequences

In the event that any individual is found to be in unlawful possession for use, distribution or sale of illicit drugs and/or alcohol as described by law (Sections 11350 to 11355, inclusive, 11366, 11368, 11377 to 11382, inclusive, and 11550 of the Health and Safety Code and Education Code Sections 87011, 88022) while on the Hartnell College campus or at any of its sanctioned functions, will be subject to immediate arrest or other disciplinary action as deemed necessary by the college. Such disciplinary action may include expulsion, termination, suspension, or referral for rehabilitation.

### Treatment Programs

In support of a drug and alcohol free work environment, the District provides an Employee Assistance Program, in conjunction with the health insurance and benefits plan, which provides alcohol and drug dependency counseling. Non-participating employees will be supplied with contact information for the many community agencies that provide drug and alcohol rehabilitation.

## WHERE TO GO FOR HELP

Referral agencies in the local area include, but are not limited to, the following list:

### Alcoholics Anonymous

Salinas 831-424-9874  
Monterey or 831-373-3713

### Community Hospital Recovery Center

Monterey 831-373-0924  
or 800-528-8080

### Sunrise House

Salinas 831-758-3302

### Beacon House

Pacific Grove 831-372-2334

### Sun Street Centers

Salinas 831-753-5150  
800-427-4794

### Therapy Associates

Salinas 831-424-5915

For a more detailed listing of referral agencies in Monterey County, please contact the Human Resources Office.

The Hartnell Community College District recognizes its responsibility to provide prevention and intervention educational programs for the promotion of an increased awareness of abuse and problems involved in chemical usage.

## CONTROLLED SUBSTANCES

Controlled substances are those defined in Education Code Sections 87011 and 88022. The following is a sample list of controlled substances. This is by no means comprehensive, but provides primary categories defined as controlled substances and one or more examples of each.

1. **Opiates** including:
  - a. Benzethidine
  - b. Methadone
  - c. Propiram
2. **Opium derivatives including:**
  - a. Codeine
  - b. Heroin
  - c. Morphine
3. **Hallucinogenic substances including:**
  - a. Lysergic acid diethylamide
  - b. Mescaline
  - c. Peyote
  - d. Marijuana
4. **Depressants including:**
  - a. Methaqualone
  - b. Alcohol
5. **Stimulants on the central nervous system, including isomers:**
  - a. Cocaine
  - b. Methamphetamine or derivatives
6. **Any narcotic not specifically prescribed by a physician.**

## DANGERS OF DRUGS & ALCOHOL

The dangers of abusing controlled substances to individuals include, but are not limited to, the following possible effects:

- Increased susceptibility to illness.
- Possibility of malnutrition.
- Increased tolerance for psychological dependence.
- Higher propensity to have accidents.
- Involvement in crime.
- Disturbed sleep patterns.
- Tiredness.
- Hallucinations.
- Difficulty getting along with others.
- Dramatic changes in personality; wide mood swings.
- Loss of memory.
- Death from overdose.

## EFFECTS IN THE WORKPLACE

The effects upon the workplace of controlled substance abuse include poor job performance, behavioral problems, and eventual job loss. Characteristics of drug use on the job include:

- Increase in number of errors.
- Being late to work more frequently.
- Difficulty in recalling instructions.
- Frequent absence.
- Extended breaks and lunch periods.
- Altercations with fellow employees.
- Unusual or frequent on-the-job accidents.
- Frequent off-the-job problems.
- Noticeable changes in behavior.
- Unexplained losses and thefts.
- Poor moral.

### Non-Discrimination

Hartnell College does not discriminate on the basis of race, sex, color, religion, national origin, age, handicap, or disabled veteran status in the provision of educational services and programs or in the employment process, pursuant to Federal and State statutes and regulations pertaining to unlawful discrimination.



# New Health Insurance Marketplace Coverage Options and Your Health Coverage

Form Approved  
OMB No. 1210-0149  
(expires 1-31-2017)

## PART A: General Information

When key parts of the health care law take effect in 2014, there will be a new way to buy health insurance: the Health Insurance Marketplace. To assist you as you evaluate options for you and your family, this notice provides some basic information about the new Marketplace and employment-based health coverage offered by your employer.

### What is the Health Insurance Marketplace?

The Marketplace is designed to help you find health insurance that meets your needs and fits your budget. The Marketplace offers "one-stop shopping" to find and compare private health insurance options. You may also be eligible for a new kind of tax credit that lowers your monthly premium right away. Open enrollment for health insurance coverage through the Marketplace begins in October 2013 for coverage starting as early as January 1, 2014.

### Can I Save Money on my Health Insurance Premiums in the Marketplace?

You may qualify to save money and lower your monthly premium, but only if your employer does not offer coverage, or offers coverage that doesn't meet certain standards. The savings on your premium that you're eligible for depends on your household income.

### Does Employer Health Coverage Affect Eligibility for Premium Savings through the Marketplace?

Yes. If you have an offer of health coverage from your employer that meets certain standards, you will not be eligible for a tax credit through the Marketplace and may wish to enroll in your employer's health plan. However, you may be eligible for a tax credit that lowers your monthly premium, or a reduction in certain cost-sharing if your employer does not offer coverage to you at all or does not offer coverage that meets certain standards. If the cost of a plan from your employer that would cover you (and not any other members of your family) is more than 9.5% of your household income for the year, or if the coverage your employer provides does not meet the "minimum value" standard set by the Affordable Care Act, you may be eligible for a tax credit.<sup>1</sup>

**Note:** If you purchase a health plan through the Marketplace instead of accepting health coverage offered by your employer, then you may lose the employer contribution (if any) to the employer-offered coverage. Also, this employer contribution—as well as your employee contribution to employer-offered coverage—is often excluded from income for Federal and State income tax purposes. Your payments for coverage through the Marketplace are made on an after-tax basis.

### How Can I Get More Information?

For more information about your coverage offered by your employer, please check your summary plan description or contact Louann Raras, HR Specialist: (e-mail) LRaras@hartnell.edu or (tele) 831.755.6706.

The Marketplace can help you evaluate your coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit [HealthCare.gov](http://HealthCare.gov) for more information, including an online application for health insurance coverage and contact information for a Health Insurance Marketplace in your area.

<sup>1</sup> An employer-sponsored health plan meets the "minimum value standard" if the plan's share of the total allowed benefit costs covered by the plan is no less than 60 percent of such costs.

## PART B: Information About Health Coverage Offered by Your Employer

This section contains information about any health coverage offered by your employer. If you decide to complete an application for coverage in the Marketplace, you will be asked to provide this information. This information is numbered to correspond to the Marketplace application.

3. Employer name Hartnell Community College District		4. Employer Identification Number (EIN) 77-0086025	
5. Employer address 411 Central Avenue		6. Employer phone number 831.755.6706	
7. City Salinas	8. State Ca	9. ZIP code 93901	
10. Who can we contact about employee health coverage at this job? Alma Arriaga, Benefits and Leaves Analyst			
11. Phone number (if different from above)		12. Email address aarriaga@hartnell.edu	

Here is some basic information about health coverage offered by this employer:

- As your employer, we offer a health plan to:

All employees. Eligible employees are:

Some employees. Eligible employees are:

All Regular, Full-Time employees

- With respect to dependents:

We do offer coverage. Eligible dependents are:

Domestic Partners, Married Spouses, Children under age 26

We do not offer coverage.

If checked, this coverage meets the minimum value standard, and the cost of this coverage to you is intended to be affordable, based on employee wages.

\*\* Even if your employer intends your coverage to be affordable, you may still be eligible for a premium discount through the Marketplace. The Marketplace will use your household income, along with other factors, to determine whether you may be eligible for a premium discount. If, for example, your wages vary from week to week (perhaps you are an hourly employee or you work on a commission basis), if you are newly employed mid-year, or if you have other income losses, you may still qualify for a premium discount.

If you decide to shop for coverage in the Marketplace, [HealthCare.gov](https://www.healthcare.gov) will guide you through the process. Here's the employer information you'll enter when you visit [HealthCare.gov](https://www.healthcare.gov) to find out if you can get a tax credit to lower your monthly premiums.