

STAMFORD PUBLIC SCHOOLS
Office of Grants & Funded Programs

Kronos Implementation Guidelines

All grants funded after school staff will be paid through Kronos. Please adhere to the following guidelines to insure a smooth after school payroll transition.

Fill out the **Kronos Staff and Program form** (in this packet)

- a. Indicate name of staff
- b. Employee#
- c. Indicate if staff member needs a Kronos card
- d. Indicate Program/name of grant
- e. Indicate position of staff member i.e. Teacher, Para Educator
- f. Indicate projected number of hours:
 - a) work times
 - b) total hours per day
 - c) total hours per week

2. Submit the signed **Kronos Staff and Program form** to Cheryl Poltrack in the Grants & Funded Office **two (2) weeks prior to start of program.** Staff **MUST NOT** begin working until Kronos cards are received and/or re-activated.
3. Designate a Kronos editor at your school who will be responsible for approving and signing off on the before/after school staff Kronos following the Kronos payroll schedule

Kronos cards will be distributed to your staff following the submission of the **Kronos Staff and Program form** to the Grants office. (HR will distribute Kronos cards) Staff **MUST NOT** begin working until Kronos cards are received and/or re-activated. **Kronos cards may be reused** – ask teachers to keep them.

4. You **must** fill out this form for each and every staff member working in after school programs
5. Fill out the form for additional staff members throughout the year
6. Remind staff that Kronos cards must be kept in their possession and they are responsible for swiping their own card. Kronos cards must be kept from year to year.
7. Administrator/Program Coordinator must notify Yves LaFleur & Cheryl Poltrack via email when a staff member does not swipe.
8. Substitute Teachers (not contractual) or Para Educators Subs may not work for before/after-school programs.
9. Return all forms to Cheryl Poltrack, Grants & Funded Programs



Stamford Public Schools
EXCELLENCE IS THE POINT.

STAMFORD PUBLIC SCHOOLS
Office of Grants & Funded Programs

Fax to 203-977-4128

KRONOS STAFF AND PROGRAMS FORM

School: _____ Fax #: _____ Date: _____

Administrator: _____

Kronos Editor: _____

Name of Staff	Employee #	Need Kronos Card? Y/N	Program / Name of Grant	Position***	Projected Work Times	Projected Total Hrs. Per day	Projected Total Hrs. Per week
<i>Marie Underwood</i>	<i>999999</i>	<i>N</i>	<i>Working w/Databases ESH</i>	<i>Teacher/Tutor/ ParaEducator ***</i>	<i>2:55 – 4:55</i>	<i>2</i>	<i>10.5</i>

*** Substitute Teachers (not contractual) or Para Educators Subs may not work for before/after-school programs.
Staff **MUST NOT** begin working until Kronos cards are received and/or re-activated.

School Administrator Signature _____

Grants & Funded Program Approval/date _____

*****Forms must be submitted 2 weeks PRIOR to start of programs**