

Auxiliary Services Mobile Unit

Form SF-239 Instructions

ERI and Severance for Public School District Personnel Requisition Instructions

Section I Complete all header information as requested.

Section II Complete all information for the ERI or Severance being requested.

1. List the name of each Auxiliary Services person for whom you are requesting reimbursement for costs incurred for payment of early retirement and severance.
2. Indicate the name of the non-public school where the individual worked in the Auxiliary Services Program. If the person worked in more than one, identify each school.
3. Indicate the IRN of the non-public school listed in section 2.
4. Indicate the years of employment first in the district and secondly in the Auxiliary Services Program.
5. Indicated the total payment made to each person for whom reimbursement is requested.
6. Indicate the percentage of time worked in the Auxiliary Services Program by each of the persons listed in section 1. To determine percent of time, divide the number of years worked in the Auxiliary Services Program by the total number of years worked in the district listed in section 3.
7. Multiply section 4 by the percentage in section 5 to indicate the reimbursement being requested of the payment made for early retirement and severance.

Section III Ensure all applicable signatures are on the form for initial request before submitting form to the area coordinator.

ODE Section Area coordinator will verify all math is correct on Form SF-239. If correct, sign Form SF-239 for approval.

The area coordinator shall submit the approved Form SF-239 to the mobile unit payment administrator via email at schoolfinance@education.ohio.gov.

The mobile unit payment administrator will process the request for payment in accordance with ODE fiscal policy.