

Resolution # 8-1

WHEREAS, County policies and procedures require both the assigned oversight committee and the Finance Committee to approve all requests to apply for grants from Federal and State agencies, as well as grants from all other entities; and,

WHEREAS, County policies and procedures require that the acceptance of grants of \$30,000 or more must be approved by the full County Board;

WHEREAS, the Department of Sangamon County Child Advocacy Center wishes to apply for and accept an a grant from Illinois Department of Children and Family Services for the Child Advocacy program in the amount of approximately \$296,556.91; and

WHEREAS, this grant will allow Sangamon County Child Advocacy Center to provide coordinated investigations into child abuse; and

WHEREAS, as documented by the approval of this resolution, the Finance Committee has approved the Sangamon County Child Advocacy Center Department's request to apply for the FY26 DCFS grant and the committee recommends that the County Board approve the acceptance of this grant, if awarded by Illinois Department of Children and Family Services.

NOW, THEREFORE, BE IT RESOLVED that the Sangamon County Board, in session this 10 day of June, 2025, approves the acceptance of the FY26 DCFS grant, which is detailed above, if the grant is awarded to the County by Illinois Department of Children and Family Services. The County Administrator is authorized to sign required grant documents to execute the agreement for this grant.

ATTEST:

County Clerk

Chairman, Sangamon County Board

Approved by the Finance Committee May 27, 2025

FILED

MAY 28 2025

Don Hays
Sangamon County Clerk

[Signature], Chairman

SANGAMON COUNTY - GRANT APPROVAL FORM

Requesting Department: Sangamon County Child Advocacy Center

Grant Program Title: FY26 DCFS

This request is for: ☐ a new grant ☒ renewal or extension of an existing grant

Grantor: Department of Children and Family Services

Brief description of the grant program and its benefits to Sangamon County:

This grant assists the Sangamon County Child Advocacy Center in coordinating investigations into child abuse for Sangamon, Menard, Christian and Logan Counties.

Anticipated Grant Revenue Amount: \$296,556.91

Are matching funds required? ☐ Yes ☒ No

If yes, please state the amount and the source of matching funds:

If this grant is approved, will any new personnel be hired: ☒ Yes ☐ No

If Yes, please indicate the number and cost of personnel:

1 employee - \$61,000

Are there any *indirect* costs or *legal* requirements associated with this grant (i.e., increased workload on existing staff, requirements to continue specific programs after grant periods, etc.): ☐ Yes ☒ No

If Yes, please provide details. Include attachment if needed:

	Current FY	Current FY + 1	Current FY + 2
Number of Employees	8		
Personnel Costs (in dollars)	\$207,624.27		
Fringe Benefit Cost	\$54,315.32		
Other Costs (Equipment, etc)	\$34,617.32		
Total Cost	\$296,556.91		

Requested by: 

(Department Head Signature)

Date: 05/20/2025

Resolution # 9-1

WHEREAS, County policies and procedures require both the assigned oversight committee and the Finance Committee to approve all requests to apply for grants from Federal and State agencies, as well as grants from all other entities; and,

WHEREAS, County policies and procedures require that the acceptance of grants of \$30,000 or more must be approved by the full County Board;

WHEREAS, the Department of Sangamon County Child Advocacy Center wishes to apply for and accept an a grant from Illinois Criminal Justice Authority for the Child Advocacy program in the amount of approximately \$233,203; and

WHEREAS, this grant will allow Sangamon County Child Advocacy Center to provide coordinated investigations into child abuse; and

WHEREAS, as documented by the approval of this resolution, the Finance Committee has approved the Sangamon County Child Advocacy Center Department's request to apply for the VOCA grant and the committee recommends that the County Board approve the acceptance of this grant, if awarded by Illinois Criminal Justice Authority.

NOW, THEREFORE, BE IT RESOLVED that the Sangamon County Board, in session this 10 day of June, 2025, approves the acceptance of the VOCA grant, which is detailed above, if the grant is awarded to the County by Illinois Criminal Justice Authority. The County Administrator is authorized to sign required grant documents to execute the agreement for this grant.

ATTEST:

County Clerk

Chairman, Sangamon County Board

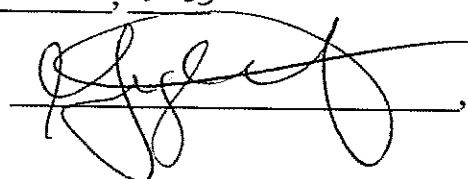
Approved by the Finance Committee

FILED

MAY 28 2025

Kim F.
Sangamon

May 27, 2025

, Chairman

9-2

SANGAMON COUNTY - GRANT APPROVAL FORM

Requesting Department: Sangamon County Child Advocacy Center

Grant Program Title: FY26 VOCA Grant

This request is for: ☐ a new grant ☒ renewal or extension of an existing grant

Grantor: Illinois Criminal Justice Authority

Brief description of the grant program and its benefits to Sangamon County:

This grant assists the Sangamon County Child Advocacy Center in coordinating investigations into child abuse for Sangamon, Menard, Christian and Logan Counties.

Anticipated Grant Revenue Amount: \$233,203.00

Are matching funds required? ☐ Yes ☒ No

If yes, please state the amount and the source of matching funds:

If this grant is approved, will any new personnel be hired: ☐ Yes ☒ No

If Yes, please indicate the number and cost of personnel:

Are there any **indirect** costs or **legal** requirements associated with this grant (i.e., increased workload on existing staff, requirements to continue specific programs after grant periods, etc.): ☐ Yes ☒ No

If Yes, please provide details. Include attachment if needed:

	Current FY	Current FY + 1	Current FY + 2
Number of Employees	7		
Personnel Costs (in dollars)	\$183,104.00		
Fringe Benefit Cost	\$35,726.00		
Other Costs (Equipment, etc)	\$14,373.00		
Total Cost	\$233,203.00		

Requested by: 

(Department Head Signature)

Date: 05/20/2025

Resolution # 10-1

WHEREAS, County policies and procedures require both the assigned oversight committee and the Finance Committee to approve all requests to apply for grants from Federal and State agencies, as well as grants from all other entities; and,

WHEREAS, County policies and procedures require that the acceptance of grants of \$30,000 or more must be approved by the full County Board;

WHEREAS, the Department of Community Resources wishes to apply for and accept an a grant from Illinois Department of Commerce and Economic Opportunity for the Weatherization Grant #25-221038 program in the amount of approximately \$628,554.00; and

WHEREAS, this grant will allow Community Resources to provide Weatherization services to Sangamon and Macon County residents; and

WHEREAS, as documented by the approval of this resolution, Community Resource Committee and the Finance Committee have approved the Community Resources Department's request to apply for the Weatherization grant #25-221038 grant and the committees recommend that the County Board approve the acceptance of this grant, if awarded by _____.

NOW, THEREFORE, BE IT RESOLVED that the Sangamon County Board, in session this 10 day of June, 2025, approves the acceptance of the Weatherization grant #25-221038 grant, which is detailed above, if the grant is awarded to the County by Illinois Department of Commerce and Economic Opportunity. The County Administrator is authorized to sign required grant documents to execute the agreement for this grant.

ATTEST:

County Clerk

Chairman, Sangamon County Board

Approved by the Community Resource Committee May 27, 2025.

Les J. Cant, Chairman

Approved by the Finance Committee _____.

FILED

MAY 28 2025

Don H. Hays
Sangamon County Clerk

_____, Chairman

16-2

SANGAMON COUNTY - GRANT APPROVAL FORM

Requesting Department: Community ResourcesGrant Program Title: Weatherization Grant # 25-221038This request is for: ☐ a new grant ☒ renewal or extension of an existing grantGrantor: Illinois Department of Commerce and Economic Opportunity

Brief description of the grant program and its benefits to Sangamon County:

Weatherization Services for Sangamon and Macon County resident's homes.

Anticipated Grant Revenue Amount: \$628,554.00Are matching funds required? ☐ Yes ☒ No

If yes, please state the amount and the source of matching funds:

If this grant is approved, will any new personnel be hired: ☐ Yes ☒ No

If Yes, please indicate the number and cost of personnel:

Are there any *indirect* costs or *legal* requirements associated with this grant (i.e., increased workload on existing staff, requirements to continue specific programs after grant periods, etc.): ☐ Yes ☒ No

If Yes, please provide details. Include attachment if needed:

	Current FY	Current FY + 1	Current FY + 2
Number of Employees	7		
Personnel Costs (in dollars)	100,536		
Fringe Benefit Cost	35,998		
Other Costs (Equipment, etc)	492,020		
Total Cost	628,554		

Requested by: 

(Department Head Signature)

Date: 05/23/2025

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MAY 23 2025

Andy Goleman
SANGAMON COUNTY AUDITOR

Resolution # 11-1

WHEREAS, County policies and procedures require both the assigned oversight committee and the Finance Committee to approve all requests to apply for grants from Federal and State agencies, as well as grants from all other entities; and,

WHEREAS, County policies and procedures require that the acceptance of grants of \$30,000 or more must be approved by the full County Board;

WHEREAS, the Department of Community ResourcesWeatherization wishes to apply for and accept an a grant from Illinois Department of Commerce and Economic Opportunity for the Weatherization Grant # 26-251038 program in the amount of approximately \$365,951.00; and

WHEREAS, this grant will allow Community ResourcesWeatherization to provide Weatherization services for Sangamon and Macon County residents; and

WHEREAS, as documented by the approval of this resolution, Community Resource Committee and the Finance Committee have approved the Community ResourcesWeatherization Department's request to apply for the Weatherization grant # 26-251038 grant and the committees recommend that the County Board approve the acceptance of this grant, if awarded by Illinois Department of Commerce and Economic Opportunity.

NOW, THEREFORE, BE IT RESOLVED that the Sangamon County Board, in session this 10 day of June, 2025, approves the acceptance of the Weatherization grant # 26-251038 grant, which is detailed above, if the grant is awarded to the County by Illinois Department of Commerce and Economic Opportunity. The County Administrator is authorized to sign required grant documents to execute the agreement for this grant.

ATTEST:

County Clerk

Chairman, Sangamon County Board

Approved by the Community Resource Committee May 27, 2025

Les D. Constan, Chairman

Approved by the Finance Committee, _____

FILED
MAY 28 2025

Don May
Sangamon County Clerk

_____, Chairman

11-2

SANGAMON COUNTY - GRANT APPROVAL FORM

Requesting Department: Community Resources

Grant Program Title: Weatherization Grant # 26-251038

This request is for: ☐ a new grant ☒ renewal or extension of an existing grant

Grantor: Illinois Department of Commerce and Economic Opportunity

Brief description of the grant program and its benefits to Sangamon County:

Weatherization Services for Sangamon and Macon County resident's homes.

Anticipated Grant Revenue Amount: \$365,951.00

Are matching funds required? ☐ Yes ☒ No

If yes, please state the amount and the source of matching funds:

If this grant is approved, will any new personnel be hired: ☐ Yes ☒ No

If Yes, please indicate the number and cost of personnel:

Are there any *indirect* costs or *legal* requirements associated with this grant (i.e., increased workload on existing staff, requirements to continue specific programs after grant periods, etc.): ☐ Yes ☒ No

If Yes, please provide details. Include attachment if needed:

	Current FY	Current FY + 1	Current FY + 2
Number of Employees	7		
Personnel Costs (in dollars)	60,024		
Fringe Benefit Cost	21,008		
Other Costs (Equipment, etc)	284,919		
Total Cost	365,951		

Requested by: 

(Department Head Signature)

Date: 05/23/2025

RECEIVED
2660

MAY 23 2025

Andy Goleman
SANGAMON COUNTY AUDITOR

12-1

AN INTERGOVERNMENTAL COOPERATION AGREEMENT BETWEEN SANGAMON COUNTY AND CAPITAL TOWNSHIP

This Agreement made this 10th day of June, 2025 by and between Sangamon County (County), an Illinois unit of local government and Capital Township (Township), an Illinois unit of local government to procure, install, and pay for a comprehensive, fully integrated public sector property tax system and computer assisted mass appraisal solution. This Agreement made by authority of Article 7, Section 10 of the Illinois Constitution and Section 5 of the Illinois Intergovernmental Cooperation Act (5 ILCS 20/1 et seq.

BACKGROUND

The Parties desired for the County to procure written, sealed RFP responses to provide a comprehensive, fully integrated public sector specific Property Tax System solution. This Request for Proposal (RFP) stated the overall scope of products and services desired, software functionality, and desired vendor qualifications.

A separate RFP for a new CAMA (computer assisted mass appraisal) system, in a joint RFP process with Capital Township, was issued concurrently. A proposal for both RFPs was allowed and response was selected by the County that clearly stated that the vendor also submitted a proposal for the other RFP. The County reviewed the proposals both together and separately, but ultimately awarded a contract to a vendor that met both the County's and Township's needs for software and services that will allow each Party to meet its statutory obligations to assess the values of real properties, which ultimately is required for the distribution of property tax bills.

The joint County and Township RFP process was completed, and the System is presently being installed. The County moved forward with the RFP process, and is now in the installation process, including the Township as a partner in this venture in good faith based upon the prior discussions and negotiations with the Township Supervisor and due to the Township Board's expressed desire to be included in order to meet its statutory requirement to perform assessments on real property within the Township boundaries, which are simultaneously located within the County's boundaries.

AGREEMENT

The Parties now agree to the following terms:

1. County followed all applicable competitive bidding requirements and awarded a contract for a purchase of a Property Tax System Solution to the bidder ("Contractor") who best met the County's needs.
2. County followed all applicable competitive bidding requirements and awarded a contract for a purchase of a CAMA (computer assisted mass appraisal) system to the bidder ("Contractor") who best met the Township's needs.

FILED

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3. The Contract(s) included a Property Tax System for the County and a CAMA (computer assisted mass appraisal) system for the Township.
4. The County is responsible for the costs due under the contract for the Property Tax System.
5. The Township will be responsible for the costs due under the contract for the CAMA (computer assisted mass appraisal) system, including payments to be made on the in the following timeframes and amounts:
 - a. Payments for maintenance of the System not to exceed \$75,000 per year, which shall be made in payments or a lump sum as authorized by the Township Supervisor;
 - b. Payments for the training for, and purchase and installation of, the System not to exceed \$250,000 in the current fiscal year, which shall be made in payments or a lump sum as authorized by the Township Supervisor;
 - c. Payments for the training for, and purchase and installation of, the System not to exceed \$250,000 in the 2026 fiscal year, which shall be made in payments or a lump sum as authorized by the Township Supervisor; and
 - d. The combined payments for the training for, and purchase and installation of, the System for the combined 2025 and 2026 fiscal years, or beyond, shall not exceed \$550,000.
6. All extra work orders or changes in the plans involving the CAMA shall be subject to the Township's prior approval.
7. All extra work orders or changes in the plans involving the Property Tax System shall be subject to the County's prior approval.
8. If the Township identifies any deficiencies in the Contractor's work, County will assist the Township in its efforts to ensure a correction of those deficiencies.
9. If the County identifies any deficiencies in the Contractor's work, Township will assist the County in its efforts to ensure a correction of those deficiencies.
10. Both Parties shall not be responsible or liable to the other or to any other entity for any claims, damages, demands, judgments, fines, penalties, expenses, actions, or causes of actions of any kind or character arising out of or by reason of the negligent performance of any work by the other as provided in this Agreement, and each party further agrees to defend at its sole cost and expense any action or proceeding commenced for the purpose of asserting any claim of whatsoever character arising in connection with or by virtue of performance of its own work.

11. All extra work orders or changes in the plans involving the CAMA shall be subject to the Township's prior approval.
12. All extra work orders or changes in the plans involving the Property Tax System shall be subject to the County's prior approval.
13. Miscellaneous.
 - a. Illinois law will govern this Agreement.
 - b. Any changes to Agreement must be in writing and signed by both Parties.
 - c. Paragraph headings are for convenience only and in no way define or limit the scope and content of this Agreement.
 - d. No delay or failure by either party to enforce or exercise any rights or remedies under this Agreement shall constitute a waiver of such right or remedy, nor shall any single or partial exercise of a right or remedy preclude any other or further exercise of rights and remedies.
 - e. This Agreement may be executed in multiple counterparts and by use of counterpart signature pages, but all such counterparts shall constitute but one and the same agreement. Signature pages bearing facsimile signatures shall be effective for purposes of binding the parties to this Agreement. This Agreement shall bind and inure to the benefit of the Parties to this Agreement and their respective successors and assigns, provided this paragraph shall not permit any assignment contrary to this Agreement.
14. The term of this Agreement shall be 3 years from the date of the last of the Parties to approve this Agreement. This Agreement shall automatically renew for a 3-year term unless either of the Parties notifies the other's chief executive or administrator in writing within 60 days of the expiration of the term that it wishes to renegotiate the terms of this Agreement. Due to the statutorily required nature of the services performed via the use of the System, each Party may only terminate this Agreement in writing with 30 days' notice to the other Party if the applicable Party's statutory requirements to perform the described services are deleted or substantially diminished by legislative action, or otherwise if both Parties mutually agree in writing to terminate this Agreement.

[Signature Page Follows]

The Parties have executed this Agreement in multiple originals on the date last written above.

Sangamon County

Capital Township

By: _____ Signature By: _____ Signature

Title: _____ Title: _____

Approved by the _____ Building and Grounds Committee _____ June 2, 2025 _____

Ram Deppa, Chairman

ATTEST:

Chairman, Sangamon County Board

County Clerk

Resolution # 13-1

WHEREAS, County policies and procedures require both the assigned oversight committee and the Finance Committee to approve all requests to apply for grants from Federal and State agencies, as well as grants from all other entities; and,

WHEREAS, County policies and procedures require that the acceptance of grants of \$30,000 or more must be approved by the full County Board; and,

WHEREAS, the Springfield-Sangamon County Regional Planning Commission on behalf of Sangamon County wishes to apply for and accept a grant from the Illinois Emergency Management Agency (IEMA)/Federal Emergency Management Agency (FEMA) in the amount of approximately \$85,000.00; and,

WHEREAS, this grant will allow the Springfield-Sangamon County Regional Planning Commission to facilitate the completion of an update to the Sangamon County Multi-jurisdictional Natural Hazardous Mitigation Plan; and,

WHEREAS, the update to the plan ensures that local jurisdictions are prepared to address and mitigate natural hazards that occur within the County; and,

WHEREAS, the update to the plan also contributes to the ability of jurisdictions in Sangamon County to obtain federal funding for other significant projects; and,

WHEREAS, as documented by the approval of this resolution, the Finance Committee has approved the Springfield-Sangamon County Regional Planning Commission's request to apply for the IEMA/FEMA grant on behalf of the County and the committee recommends that the County Board approve the acceptance of this grant, if awarded.

NOW, THEREFORE, BE IT RESOLVED that the Sangamon County Board, in session this 10th day of June 2025, approves the acceptance of the IEMA/FEMA grant, which is detailed above. The Executive Director of the Springfield-Sangamon County Regional Planning Commission is authorized to sign the required grant documents to execute the agreement for this grant.

ATTEST:

County Clerk

Chairman, Sangamon County Board

Approved by the Finance Committee June 10, 2025

_____, Chairman

FILED

JUN 05 2025


Sangamon County Clerk

SANGAMON COUNTY - GRANT APPROVAL FORM

Requesting Department: Regional Planning Commission on behalf of County

Grant Program Title: Sang. Co. Multi-jurisdictional Natural Hazard Mitigation Plan Update

This request is for: ☒ a new grant ☐ renewal or extension of an existing grant

Grantor: FEMA/Dept. of Homeland Security through IL Emergency Management Agency.

Brief description of the grant program and its benefits to Sangamon County:

Dates of grant: 1/1/2026 - 1/1/2029

Update of the Sangamon County Multi-jurisdictional Natural Hazards Mitigation Plan, which expires in 2028.

Anticipated Grant Revenue Amount: \$85,000.00

Are matching funds required? ☒ Yes ☐ No

If yes, please state the amount and the source of matching funds:

\$21,250.00

Local Match (in-kind)

If this grant is approved, will any new personnel be hired: ☐ Yes ☒ No

If Yes, please indicate the number and cost of personnel:

Are there any **indirect** costs or **legal** requirements associated with this grant (i.e., increased workload on existing staff, requirements to continue specific programs after grant periods, etc.): ☐ Yes ☒ No

If Yes, please provide details. Include attachment if needed:

	Current FY	Current FY + 1	Current FY + 2
Number of Employees			
Personnel Costs (in dollars)			
Fringe Benefit Cost			
Other Costs (Equipment, etc)			
Total Cost			

Requested by:



(Department Head Signature)

Date: 06/04/25

Resolution # 14-1

WHEREAS, County policies and procedures require both the assigned oversight committee and the Finance Committee to approve all requests to apply for grants from Federal and State agencies, as well as grants from all other entities; and,

WHEREAS, County policies and procedures require that the acceptance of grants of \$30,000 or more must be approved by the full County Board;

WHEREAS, the Department of Public Health wishes to apply for and accept an a grant from Illinois Department of Human Services for the Early Intervention Grant program in the amount of approximately \$1,306,867.11; and

WHEREAS, this grant will allow Public Health to provide evaluation and assessment for infants and toddlers birth to three who have developmental delays; and

WHEREAS, as documented by the approval of this resolution, Public Health Committee and the Finance Committee have approved the Public Health Department's request to apply for the Early Intervention grant and the committees recommend that the County Board approve the acceptance of this grant, if awarded by Illinois Department of Human Services.

NOW, THEREFORE, BE IT RESOLVED that the Sangamon County Board, in session this 10th day of June, 2025, approves the acceptance of the Early Intervention grant, which is detailed above, if the grant is awarded to the County by Illinois Department of Human Services.

The County Administrator is authorized to sign required grant documents to execute the agreement for this grant.

ATTEST:

County Clerk

Chairman, Sangamon County Board

Approved by the Public Health Committee June 4, 2025

[Signature], Chairman

Approved by the Finance Committee June 10, 2025

RECEIVED
2660
FILED

MAY 22 2025

JUN 05 2025

_____, Chairman

[Signature]
Sangamon County Clerk

Andy Goleman

14-2

SANGAMON COUNTY - GRANT APPROVAL FORM

Requesting Department: Public Health

Grant Program Title: Early Intervention

This request is for: ☐ a new grant ☒ renewal or extension of an existing grant

Grantor: Illinois Department of Human Services

Brief description of the grant program and its benefits to Sangamon County:

The Early Intervention Program is a statewide program for the evaluation and assessment of infants and toddlers ages birth to three, as well as the provision of services for those who have a qualifying disability or diagnosis, a 30 percent delay in development in one or more of the five developmental domains, or who are at risk of developmental delays.

Anticipated Grant Revenue Amount: \$1,306,867.11

Are matching funds required? ☐ Yes ☒ No

If yes, please state the amount and the source of matching funds:

If this grant is approved, will any new personnel be hired: ☒ Yes ☐ No

If Yes, please indicate the number and cost of personnel:

We received approval in May to add 2 additional staff for this grant due to increasing caseloads. The additional staff salary and fringe will be 100% grant funded.

Are there any **indirect** costs or **legal** requirements associated with this grant (i.e., increased workload on existing staff, requirements to continue specific programs after grant periods, etc.): ☐ Yes ☒ No

If Yes, please provide details. Include attachment if needed:

	Current FY	Current FY + 1	Current FY + 2
Number of Employees			
Personnel Costs (in dollars)			
Fringe Benefit Cost			
Other Costs (Equipment, etc)			
Total Cost			

Requested by: _____


(Department Head Signature)

Date: 05/13/2025

RECEIVED
2660

MAY 22 2025

Andy Goleman
SANGAMON COUNTY AUDITOR

Resolution # 15-1

WHEREAS, County policies and procedures require both the assigned oversight committee and the Finance Committee to approve all requests to apply for grants from Federal and State agencies, as well as grants from all other entities; and,

WHEREAS, County policies and procedures require that the acceptance of grants of \$30,000 or more must be approved by the full County Board;

WHEREAS, the Department of Public Health wishes to apply for and accept an a grant from Illinois Department of Public Health for the Illinois Breast & Cervical Cancer Program program in the amount of approximately \$240,283.00; and

WHEREAS, this grant will allow Public Health to provide breast and cervical screenings to uninsured or underinsured women; and

WHEREAS, as documented by the approval of this resolution, Public Health Committee and the Finance Committee have approved the Public Health Department's request to apply for the Illinois Breast & Cervical Cancer Program grant and the committees recommend that the County Board approve the acceptance of this grant, if awarded by Illinois Department of Public Health.

NOW, THEREFORE, BE IT RESOLVED that the Sangamon County Board, in session this 10th day of June, 2025, approves the acceptance of the Illinois Breast & Cervical Cancer Program grant, which is detailed above, if the grant is awarded to the County by Illinois Department of Public Health. The County Administrator is authorized to sign required grant documents to execute the agreement for this grant.

ATTEST:

County Clerk

Chairman, Sangamon County Board

Approved by the Public Health Committee June 4, 2025

FILED
Approved by the Finance Committee June 10, 2025
_____, Chairman

JUN 05 2025

Don Hays
Sangamon County Clerk

_____, Chairman

152

SANGAMON COUNTY - GRANT APPROVAL FORM

Requesting Department: Public Health

Grant Program Title: Illinois Breast & Cervical Cancer

This request is for: ☐ a new grant ☒ renewal or extension of an existing grant

Grantor: Illinois Department of Public Health

Brief description of the grant program and its benefits to Sangamon County:

To provide breast screenings to uninsured/underinsured women ages 40-64 and cervical screenings to uninsured or underinsured women ages 21-64 living in our assigned counties. Outreach efforts will be on women 50-64 years old who need a mammogram and women who have rarely or never been screened for cervical cancer.

Anticipated Grant Revenue Amount: \$240,283.00

Are matching funds required? ☐ Yes ☒ No

If yes, please state the amount and the source of matching funds:

If this grant is approved, will any new personnel be hired: ☐ Yes ☒ No

If Yes, please indicate the number and cost of personnel:

Are there any **indirect** costs or **legal** requirements associated with this grant (i.e., increased workload on existing staff, requirements to continue specific programs after grant periods, etc.): ☐ Yes ☒ No

If Yes, please provide details. Include attachment if needed:

	Current FY	Current FY + 1	Current FY + 2
Number of Employees			
Personnel Costs (in dollars)			
Fringe Benefit Cost			
Other Costs (Equipment, etc)			
Total Cost			

Requested by: _____

(Department Head Signature)

Date: 05/21/2025

RECEIVED
2660

MAY 22 2025

Andy Goleman
SANGAMON COUNTY AUDITOR

Resolution # 16-1

WHEREAS, County policies and procedures require both the assigned oversight committee and the Finance Committee to approve all requests to apply for grants from Federal and State agencies, as well as grants from all other entities; and,

WHEREAS, County policies and procedures require that the acceptance of grants of \$30,000 or more must be approved by the full County Board;

WHEREAS, the Department of Circuit Clerk wishes to apply for and accept an a grant from Illinois Department of Healthcare and Family Services for the IV-D child support orders program in the amount of approximately \$41,753.00; and

WHEREAS, this grant will allow Circuit Clerk to provide child support orders to be entered into the State Child Support System (KIDS); and

WHEREAS, as documented by the approval of this resolution, Courts Committee and the Finance Committee have approved the Circuit Clerk Department's request to apply for the IV-D Child Support grant and the committees recommend that the County Board approve the acceptance of this grant, if awarded by Illinois Department of Healthcare and Family Services.

NOW, THEREFORE, BE IT RESOLVED that the Sangamon County Board, in session this 10th day of June, 2025, approves the acceptance of the IV-D Child Support grant, which is detailed above, if the grant is awarded to the County by Illinois Department of Healthcare and Family Services. The County Administrator is authorized to sign required grant documents to execute the agreement for this grant.

ATTEST:

County Clerk

Chairman, Sangamon County Board

Approved by the Courts Committee June 5, 2025

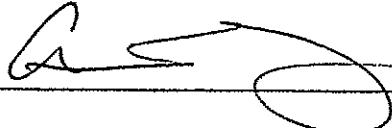
Approved by the Finance Committee June 10, 2025

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MAY 16 2025

FILED

JUN 06 2025



Chairman
Sangamon County Clerk

16-2

SANGAMON COUNTY - GRANT APPROVAL FORM

Requesting Department: Circuit Clerk

Grant Program Title: IV-D (Healthcare and Family Services)

This request is for: ☐ a new grant ☒ renewal or extension of an existing grant

Grantor: Illinois Department of Healthcare and Family Services

Brief description of the grant program and its benefits to Sangamon County:

A grant for reimbursement of \$21.00 per Title IV-D child support order entered into the State's Child Support System (KIDS).

Anticipated Grant Revenue Amount: \$41,753.00

Are matching funds required? ☐ Yes ☒ No

If yes, please state the amount and the source of matching funds:

If this grant is approved, will any new personnel be hired: ☐ Yes ☒ No

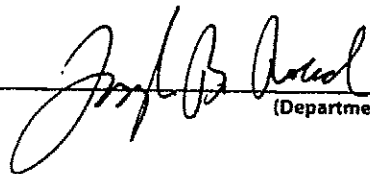
If Yes, please indicate the number and cost of personnel:

Are there any **indirect** costs or **legal** requirements associated with this grant (i.e., increased workload on existing staff, requirements to continue specific programs after grant periods, etc.): ☐ Yes ☒ No

If Yes, please provide details. Include attachment if needed:

	Current FY	Current FY + 1	Current FY + 2
Number of Employees			
Personnel Costs (in dollars)			
Fringe Benefit Cost			
Other Costs (Equipment, etc)			
Total Cost			

Requested by:



(Department Head Signature)

Date:

5-8-25

FILED

JUN 06 2025

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2660

MAY 29 2025

Don Hays
Sangamon County Clerk

INTERGOVERNMENTAL AGREEMENT
BETWEEN

THE COUNTY OF COOK

ON BEHALF OF THE JUVENILE TEMPORARY DETENTION CENTER AND THE OFFICE
OF THE CHIEF JUDGE

AND THE COUNTY OF SANGAMON

ON BEHALF OF THE SANGAMON COUNTY COURT SERVICES

Andy Goleman
SANGAMON COUNTY AUDITOR

This Intergovernmental Agreement ("Agreement") is made between the County of Sangamon, Illinois, a body corporate and politic (hereinafter referred to as "Sangamon County") on behalf of the Sangamon Court Services, and the County of Cook, Illinois, a body corporate and politic (hereinafter collectively referred to as "Cook County"), on behalf of the Office of the Chief Judge of the Circuit Court of Cook County (hereinafter referred to as "OCJ") and the Juvenile Temporary Detention Center ("JTDC"), pursuant to the authority granted by the Illinois Constitution of 1970, Article VII, Section 10; the Intergovernmental Cooperation Act (5 ILCS 220/1 et seq).

WHEREAS, the Constitution of the State of Illinois of 1970, Article VII, Section 10, provides that units of local government may contract or otherwise associate among themselves to obtain or share services and to exercise, combine, or transfer any power or function in any matter not prohibited by law or by ordinance and may use their credit, revenues, and other resources to pay costs related to intergovernmental activities;

WHEREAS, the Intergovernmental Cooperation Act, 5 ILCS 220/1, *et seq.*, provides that any power or powers, privileges or authority exercised, or which may be exercised by a unit of local government may be exercised and enjoyed jointly with any other unit of local government;

WHEREAS, the Sangamon County and the Cook County are public agencies within the meaning of the Intergovernmental Cooperation Act (5 ILCS 220/2);

WHEREAS, 55 ILCS 75/1 et seq, entitled the County Shelter Care and Home Detention Act, the Cook County and the Sangamon County are authorized to establish, support and maintain a detention home for the care and custody of delinquent minors;

WHEREAS, 55 ILCS 75/3 provides that OCJ has administrative control over the budget of the JTDC, subject to the approval of the Cook County Board;

WHEREAS, 55 ILCS 75/9 provides that counties may enter into binding agreements regarding accepting and placing minors in need of shelter care or detention;

WHEREAS, 55 ILCS 75/9.3 provides that Sangamon County may expend tax receipts for detention services pursuant to an agreement with the Cook County;

WHEREAS, the Sangamon County is desirous of utilizing the available housing for minors in need of detention;

WHEREAS, JTDC has available space for housing additional minors in need of detention;

WHEREAS, pursuant to the Juvenile Court Act, 705 ILCS 405/5, the CIRCUIT COURT FOR THE FOURTH JUDICIAL CIRCUIT and the DESIGNATED COURT SERVICES STAFF

(hereinafter, referenced as "Authorized Sangamon County Official") are authorized to request detention services for juveniles in a secure detention facility;

WHEREAS, pursuant to Cook County Code Sec. 2-952, Cook County may enter into an agreement with other governmental units such as Sangamon County.

NOW THEREFORE, in consideration of the mutual covenants and conditions contained herein, the undersigned do agree to the following terms and conditions.

1. Incorporation of Recitals. The foregoing recitals are incorporated herein as provision hereof.
2. The Agreement shall commence upon execution by the Parties and shall remain in effect until November 30, 2025.
3. Provision of Detention Services for Minors

3.1 JTDC agrees to provide temporary custody, specifically housing and detention services ("Housing") for minors authorized by JTDC, pursuant to the needs of Sangamon County, while remaining in compliance with all statutory requirements as delineated in Illinois Criminal Law and Procedures, the Illinois Juvenile Court Act, and all standards promulgated by the Administrative Office of Illinois Courts (AOIC), Illinois Department of Juvenile Justice (IDJJ) and under the Prison Rape Elimination Act (PREA). This includes NOT detaining status offenders and/or contempt of court offenders whose detainment originates from status offenses in accordance with the Juvenile Court Act.

3.2 All housing provided by JTDC shall be at the Juvenile Temporary Detention Center ("JTDC") at 1100 S Hamilton, Chicago, IL 60612.

3.3 In the event that a Sangamon County juvenile offender presents with a mental health or medical condition that requires specialized inpatient treatment, in line with AOIC standards, JTDC shall refuse intake for the minor until the minor is determined to be stabilized by a qualified mental health or medical professional, and whose aftercare or follow-up treatment is appropriate for detention in a juvenile facility, as more fully addressed in Section 7.4 in this Agreement.

4. COMMUNICATION BETWEEN COOK AND SANGAMON COUNTY

4.1 Prior to admission, an Authorized Sangamon County Official or sworn peace officer shall contact the JTDC for screening purposes and provide the following information:

- (a) A court order authorizing the detention of the minor.

(b) All health care and mental health information shall be provided to Cermak Health Services medical and mental health personnel providing services to JTDC in keeping with all applicable regulations and statutes.

(c) Contact information for the detained minor's parent(s) and/or guardian(s).

(d) Any information regarding the juvenile in custody, pertinent to ensuring the safety, security and welfare of the detained minor (e.g. alleged or underlying offense(s), criminal history, and immediate medical and/or mental health care issues).

(e) Information regarding the date, time, and place of the detained minor's next court hearing.

(f) Date and time of next court hearing, and whether the hearing will be in person (including name of transporting agency) or virtual.

4.2 The following ongoing information shall be exchanged between the JTDC Center and Sangamon County during the course of the Sangamon County juvenile's detention at the JTDC:

(a) JTDC shall provide Sangamon County with timely information, as soon as is practical thereafter, regarding any extraordinary or unusual occurrences involving any minor detained by Sangamon County at the JTDC, including but not limited to: death, regardless of cause; escape or attempted escape; attempted suicide; serious injury to include accidental or self-inflicted; a medical emergency requiring emergency services outside of JTDC; assaultive behavior by or toward the minor; ongoing or significant disregard for the rules and regulations of the JTDC by the minor; any incidents involving the minor which result in the filing of a police report or placement of the minor on individual programming.

(b) In the case of the escape or attempted escape of a Sangamon County minor detained in the JTDC, JTDC shall notify the Sheriffs of Cook and Sangamon County promptly, so that they may use all reasonable means to recapture the minor. The date of such escape and the return to custody must be reported in writing to the Sheriff of Sangamon County within forty-eight (48) hours of said escape.

(c) Sangamon County shall provide JTDC with information on any upcoming court hearings and/or scheduled release dates for any minors detained by Sangamon County.

(d) Sangamon County shall provide JTDC with any subsequent information regarding the juvenile in custody, including serious mental health concerns or behaviors that could pose a risk to staff or other detained minors.

4.3 The contacts persons to receive the information under this section are:

JTDC: _____

Email: _____ Phone: _____

Sangamon County: _____

Email: _____ Phone: _____

5. SCOPE OF DETENTION SERVICES: JTDC shall provide minors with detention services as provided for in the Juvenile Court Act of 1987 (705 ILCS 405), all other governing statutes, and all detention regulations promulgated by the IDJJ, AOIC, and PREA Standards. Services offered to minors housed for Sangamon County shall be commensurate to services offered to all other minors housed by JTDC.

6. TRANSPORTATION OF MINORS

An Authorized Sangamon County Official, or the appropriate arresting agency's designated law enforcement official, pursuant to the established policies of Sangamon County, shall provide for transportation of minors to and from JTDC for initial admission. Thereafter, an Authorized Sangamon County Official shall provide transportation of minors to and from JTDC for scheduled off-site health care services, court-ordered furloughs, IDJJ commitments, residential placement dispositions and court hearings. Sangamon County is custodian of the minor when providing transportation. Except for emergency situations, an Authorized Sangamon County Official will provide notice to JTDC one day prior to any transport. In the case of non-scheduled off-site medical care services, such as emergency hospital care, JTDC shall provide such transportation as is necessary for the juvenile to receive such care. For the expense and staffing of such trip, Sangamon County shall compensate JTDC for mileage (current IRS rate) and any other transportation expenses incurred (i.e. tolls, parking, etc.), and additionally, for off-site staffing coverage required for the minor, at an hourly rate of \$100; if the transport occurs on a holiday, the rate will be \$150 per hour.

7. HEALTH CARE SERVICES

7.1 JTDC shall provide basic health care services as outlined by IDJJ and AOIC standards. In accordance with AOIC standards, all residents will receive a physical examination within seven (7) days of return from their detention hearing.

7.2 The parent(s)/guardian(s)/minor's medical insurance shall pay for any health care services received at a facility outside of JTDC and this includes any emergency health care services deemed necessary by JTDC. The parent(s)/guardian(s)/minor's medical insurance shall pay for any prescribed medications. With the assistance of Sangamon County, JTDC shall coordinate with the parent(s) or guardian(s) to obtain insurance information. In the event the minor is not covered by medical insurance, Sangamon County shall be responsible and bear

any and all expenses arising from any prescribed medications or medical services provided to the minor at a facility outside of the JTDC. As between JTDC and Sangamon County, Sangamon County shall become the responsible party and bear any and all payments of outstanding medical bills but shall retain any rights it may have to seek reimbursement from the minor, the minor's parent(s)/guardians(s), any insurance carrier, or any other responsible party.

7.3 In the event a minor detained for Sangamon County is admitted for hospitalization for emergency health care services, JTDC will immediately notify Sangamon County Court Services (or other person authorized by the Chief Judge of the Circuit Court). Sangamon County shall compensate JTDC for mileage (current IRS rate) and any other transportation expenses incurred (i.e. tolls, parking, etc.), and additionally, for off-site staffing coverage required for the minor, at an hourly rate of \$100; if the transport occurs on a holiday, the rate will be \$150 per hour as more fully addressed in Section 8 in this Agreement.

7.4 The parties agree that the intent of juvenile detention is to house delinquent minors pending court proceedings; it is not to be used in lieu of treatment for minors in need of mental health treatment such as psychological services or specialized medical care. Minors who require mental health treatment at a level of care higher than an outpatient setting are not appropriate for detention. These minors will need to obtain the proper treatment in the appropriate medical or mental health care facility and be medically and/or psychologically stable before they are accepted for detention. Should a minor be deemed in need of inpatient mental health care services, specialized medical care or in need of services outside the scope of juvenile detention, as determined by a Licensed Practitioner of the Healing Arts with a valid clinical license in the state of Illinois, JTDC will require that the minor be removed from the facility within 72 hours, with all costs of transportation assumed by Sangamon County. Should the minor not be removed within 72 hours, Sangamon County agrees to pay a per diem rate of \$500/day in consideration for increased level of care required for the subject minor.

8. FEES AND PAYMENT

8.1 As consideration for the foregoing, Sangamon County agrees to provide compensation to JTDC for the following detention services:

- (a) Per diem fee: The amount of \$520 per day, per minor, for occupied detention beds. JTDC shall provide an invoice to Sangamon County by the tenth day of the month reflecting services provided during the previous month. Sangamon County shall remit payment within 60 days after receipt of such invoice.
- (b) Transport fees: Any out-of-building transport provided by JTDC for Sangamon County will be in the amount of \$100 per hour; if the transport occurs on a holiday, the rate will be \$150 per hour. Transport to IDJJ will require a flat rate of \$100.
- (c) Medical fees: Sangamon County will be included in JTDC per diem fee for all lab fees, X-rays and prescription medications.

9. INSURANCE; GOVERNMENTAL IMMUNITY

9.1 Cook County, as a government entity, is self-insured.

9.2 Notwithstanding anything to the contrary set forth elsewhere in this Agreement, neither party has, and in no event shall either party be construed to have, waived any rights or defenses of governmental immunity that either party may have with respect to any matters arising out of this Agreement or performance hereunder.

10. EFFECTIVE DATE, AMENDMENT, MODIFICATION AND RENEWAL: This Agreement shall become effective upon the date of acceptance by all parties hereto. This Agreement may be amended with written consent of all parties hereto and, provided a need continues to exist, may be renewed for a period not to exceed two (2) years for each renewal. This Agreement may be cancelled by any party hereto upon sixty (60) days written notice to all parties.

11. APPLICABLE LAW: This Agreement shall be interpreted and enforced under the laws of the State of Illinois, and the parties agree that the venue for any legal proceedings between them shall be the Circuit Court of Cook County, State of Illinois.

12. FINAL AGREEMENT OF PARTIES: This writing constitutes the final expression of the agreement of the parties. It is intended as a complete and exclusive statement of the terms of this Agreement, and it supersedes all prior and concurrent promises, representation, negotiations, discussions and agreements that may have been made in connection with the subject matter hereof. No modification or termination of this Agreement shall be binding upon the parties hereto unless the same is in writing and appropriately executed.

13. NOTICES: Any Notice given pursuant to a preceding Section of this Agreement shall be sent by United States Mail, postage prepaid, addressed to respective party at the address set forth on the signature page hereof or to such other address as the parties may designate in writing from time to time.

Sangamon County: Sangamon County State's Attorney, 200 S. Ninth St.,
Room 402, Springfield, IL 62701

JTDC: General Counsel, Juvenile Temporary Detention Center, 1100 S
Hamilton, Chicago, IL 60612

Cook County: Cook County State's Attorney, 69 W. Washington, 32nd
Floor, Chicago, IL 60602.

14. AUTHORIZATION: Sangamon County and JTDC, OCJ, and Cook County represent that all necessary acts have been taken to authorize and approve this Agreement in accordance with applicable law and this Agreement, when executed

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by the parties hereto, shall constitute a binding obligation of Sangamon County and Cook County, legally and enforceable at law and equity against both.

- 15. SEVERABILITY CLAUSE: If any provision of this Agreement is held to be invalid, that provision shall be stricken from this Agreement and the remaining provisions shall continue in full force and effect to the fullest extent possible.
- 16. RULES AND REGULATIONS: It is agreed by and between the parties hereto that Sangamon County minors confined to the JTDC pursuant to this Agreement are subject to the rules and regulations of the JTDC and the privileges or restrictions attaching thereto, and are subject to no other rules and regulations or the granting of any privileges attaching to the Sangamon County Jail.
- 17. NON-DISCRIMINATION: JTDC agrees that no Sangamon County minor confined in the JTDC under the terms of this contract shall on the grounds of age, gender, race, color, religion or national origin be subjected to discrimination in any manner relating to their confinement.
- 18. PREA Compliance: As of the date of execution of this AGREEMENT, the JTDC Superintendent has adopted and the JTDC is in substantial compliance with the national standards to prevent, detect, and respond to sexual abuse and sexual harassment as outlined in the applicable provisions of the Prison Rape Elimination Act (PREA) 28 C.F.R. Parts 115.5 through 28 C.F.R. 115.405 including monitoring to ensure compliance with said standards.
- 19. EXECUTION: This Agreement may be executed in counterparts (including facsimile signatures), each of which shall be deemed to be an original and both of which shall constitute one and the same Agreement.

IN WITNESS WHEREOF, the undersigned duly authorized officers have subscribed their names on behalf of Sangamon County, Sangamon County Court Services, OCJ, JTDC, and Cook County.

COUNTY OF COOK

Toni Preckwinkle, President

Date: _____

Acknowledged:

Timothy Evans, Chief Judge
Circuit Court of Cook County Illinois

Date: _____

Superintendent, JTDC

Date: _____

Approved as to Form

State's Attorney

Date: _____

COUNTY OF SANGAMON

Sangamon County Board

Date: _____

Name: _____

Title: _____

Acknowledged:

Kent Holsopple
Director
Sangamon County Court Services
200 S. 9th St., Rm. 308
Springfield, IL 62701
Kent.holsopple@sangamonil.gov

Date: _____

RESOLUTION NO. 18-1

WHEREAS, Sangamon County supports a healthy work-life balance; and

WHEREAS, The County recognizes the importance of families spending critical time together, particularly when they have welcomed a newborn or adopted a child into their home; and,

WHEREAS, Caring for children is rewarding and important, but can also be emotionally and fiscally challenging for families; and

WHEREAS, The County wants to lessen the financial burden on families, while at the same time provide a critical opportunity for parents to bond with their child; and,

NOW, THEREFORE, BE IT RESOLVED by the members of the Sangamon County Board on this 10th day of June, 2025, that the Board approves the Maternity-Paternity Policy for Sangamon County Employees.

Chairman, Sangamon County Board

ATTEST:

County Clerk

Approved by the Finance Committee June 10, 2025 _____,

Chairman

FILED

JUN 06 2025

Don / Kray
Sangamon County Clerk

Sangamon County Maternity/Paternity/Adoption Leave (MPAL) Policy

I. POLICY

Sangamon County supports a proper balance between work and family. This leave is intended to provide employees necessary time and financial support to adjust to the addition of one or more new family members during the important period immediately following birth or adoption. Sangamon County will provide up to:

(4) weeks of paid maternity/paternity/adoption leave to employees following the birth of an employee's child or the placement of a child with an employee in connection with adoption. The purpose of paid maternity/paternity/adoption leave is to enable the employee to care for and bond with a newborn or newly adopted child. This policy will run concurrently with leave provided by the Family and Medical Leave Act (FMLA), whenever FMLA is available. This policy will be in effect for births or adoptions occurring on or after June 11th, 2025.

II. ELIGIBILITY

To be eligible, an employee must be an actively working and full time employee. Part time and temporary employees are not eligible for this benefit. Employees on leave due to a work-related injury, as deemed and approved for benefits by the County's worker's compensation insurance carrier, will not be eligible for this leave. In addition, employees must meet one of the following criteria:

- Have given birth to a child.
- Have adopted a child (the child must be age 17 or younger). The adoption of a spouse's child is excluded from this policy.
- Be the parent and/or legal guardian of the child born, adopted, or placed.
- Must have worked for Sangamon County at least 6 months

III. AMOUNT, TIME FRAME, & DURATION OF PAID PARENTAL LEAVE

- Eligible employees will receive a maximum of 4 weeks of paid parental leave per birth or placement of a child/children. Days must be taken in consecutive, full day increments. The fact that a multiple birth, adoption or placement occurs (e.g., the birth of twins or adoption of siblings) does not increase the 4-week total amount of paid parental leave granted for that event. In addition, in no case will an employee receive more than 4 weeks of paid parental leave in a rolling 12-month period, regardless of whether more than one birth or adoption event occurs within that 12-month time frame.
- In the event that the newborn child is placed in the Neonatal Intensive Care Unit (NICU) upon birth, an employee may defer paid maternity/paternity/adoption leave until the newborn child is released from the NICU, upon request with supporting documentation.
- If both parents are eligible employees and work in the same department, the time off must be staggered in order to avoid any possible disruptions in office operations.

- Each week of paid parental leave is compensated at 100 percent of the employee's regular, straight-time weekly pay. Paid parental leave will be paid on a biweekly basis on regularly scheduled pay dates.
- Approved paid maternity/paternity/adoption leave must be taken immediately following the birth or adoption a child.
- Upon termination of the individual's employment, he or she will not be paid for any unused paid maternity/paternity/adoption leave for which he or she was eligible.

IV. COORDINATION WITH OTHER POLICIES

- Paid maternity/paternity/adoption leave taken under this policy must run concurrently with leave under the Family and Medical Leave Act (FMLA); thus, any leave taken under this policy that falls under the definition of circumstances qualifying for leave due to the birth or placement of a child due to adoption will be counted toward the 12 weeks of available FMLA leave in a rolling 12-month period. All other requirements and provisions under the FMLA will apply. In no case will the total amount of leave—whether paid or unpaid— granted to the employee under the FMLA exceed 12 weeks during the 12-month FMLA period. Please refer to the Family and Medical Leave policy for further guidance on FMLA.
- After the paid maternity/paternity/adoption leave is exhausted, the balance of FMLA leave (if applicable) may be compensated through the employee's use of employee's own accrued but unused sick leave, vacation, personal days and compensatory time. Upon exhaustion of employee's own sick leave, vacation, personal days and compensatory time, any remaining leave will be unpaid unless receiving disability benefits. Please refer to the Family and Medical Leave Policy for further guidance on the FMLA.
- Sangamon County will maintain all benefits for employees during the paid maternity/paternity/adoption leave period in the same manner as if they were taking any other paid leave, such as vacation or sick leave.
- If a holiday occurs while the employee is on paid maternity/paternity/adoption leave, such day will be charged to holiday pay; however, such holiday will not extend the total paid parental leave entitlement beyond 4 calendar weeks.
- In the event of a miscarriage, regular employees and regular part-time employees, shall not be entitled to paid maternity/paternity/adoption leave under this policy. Such employees shall be entitled to Bereavement Leave as defined in the Sangamon County Employee Manual or as provided in the employee's collective bargaining agreement, if applicable.

V. PROCEDURE

To apply for maternity/paternity/adoption leave:

Contact your supervisor/Department Head/Elected Official who will work with The Human Resources Department to ensure qualifying criteria are met.

1. Employees who adopt children must submit documentation (court records, adoption agency forms, attorney briefs, etc.) to Human Resources upon availability to the adoptive parent(s).
2. Maternity/Paternity/Adoption Leave paperwork must be submitted no later than the 26th week of the pregnancy or and as soon as documentation is available for adoptive parent(s).

Human Resources will coordinate with the respective department and payroll to ensure time is entered and tracked correctly. Maternity/Paternity/Adoption leave will run concurrently with Family Medical Leave whenever Family Medical Leave is available.