TO: School District Superintendents
FROM: Jo Ann Malone, Ed.D., Executive Director
Office of Accreditation
SUBJECT: School Board Meeting Attendance Report
DATE: January 6, 2020

Pursuant to Miss. Code Ann. § 37-6-13, the School Board Meeting Attendance Annual Report is
due each year.

Please complete and sign the enclosed form with the name(s) of any board member who missed
twenty percent (20%) or more of the board meetings between January and December 2019. Please
return the completed form to Chris Haynes no later than February 7, 2020, even if you have no
members to report. Simply indicate this by writing “None”. The report form is also available
online at https://www.mdek12.org/OA/Accred.

As always, your cooperation and assistance are greatly appreciated. If the Office of Accreditation
can be of service to you at any time, please do not hesitate to call us at (601) 359-3764.

Enclosure
Copy: File
School Board Meeting Attendance
Annual Report for 2020

CITATION
Miss. Code Ann. § 37-6-13. Per diem allowance; expenses and mileage; meeting attendance requirements.

Subsection (2) (a) - If a member of a school board misses twenty percent (20%) or more of the meetings of the school board during a calendar year, except for absences caused by required military duty, the member must reimburse the school district that portion of the total salary paid to the member that year which is proportionate to the number of meetings missed by the member in relation to the total number of school board meetings held during that year. For purposes of this subsection, consideration may be given only to meetings of which public notice is required.

REPORT

(Please type or print all requested information)

Name of School District ______________________________ District Code ____________

Name of School Board President ______________________________

Name of board member(s) who missed twenty percent (20%) or more of the board meetings held during the preceding calendar year.

__________________________  ____________________________

__________________________  ____________________________

__________________________  ____________________________

IF NO BOARD MEMBER MISSED 20% OR MORE OF THE MEETINGS, INDICATE THIS BY COMPLETING THE INFORMATION ABOVE, AND WRITING "NONE" ON THE FIRST LINE. PLEASE SIGN, DATE, AND RETURN THE REPORT NO LATER THAN FEBRUARY 7, 2020.

__________________________  ____________________________

Board President Signature  Date

Email form to: jchaynes@mdek12.org
or mail form to:
Office of Accreditation
Attention: Chris Haynes
P.O. Box 771
Jackson, MS 39205-0771