## RESOLUTION

County Executive, County		
Printed Name/S	Signature	<del> </del>
(	executed this Resolution effective as of	·
- -	County Board of Commis	
IN WITNESS	WHEREOF, the undersigned, as County Executive o	
	Board of Education has declared its intent to continue its support of these employees.	s monetary
	HER RESOLVED, we are assured that the	
	Administration retain on the state-sponsored insurance pemployees of the County Board of Educat least 25 hours per week and have been employed by the twelve (12) months.	lan those ucation who work
	<b>EFORE, BE IT RESOLVED,</b> that theBoard of Commissioners does hereby request that Benef	
1	we support the Board in its desire to allow its bus drivers employees, and other support staff who work at least 25 to continue to participate in the Local Education Plan	hours per week
	we recognize that the Board wishes to retain these employeetirement, health, and life insurance benefits; and	byees by offering
	we recognize the difficulty in finding and training emplo positions; and	yees to fill these
	he Commissioners recognize that bus drivers, cafeteria support staff are an essential part of the school system;	
that this Resolut	ion be entered in the minute books.	
	hereby adopt the following resolutions by unanimous	