



Thornton Fractional
HIGH SCHOOL DISTRICT 215
BURNHAM • CALUMET CITY • LANSING • LYNWOOD

June 18, 2025
Special Board of Education Meeting

5:00 PM

Thornton Fractional Center for Academics & Technology
1605 Wentworth Ave.
Calumet City, IL 60409

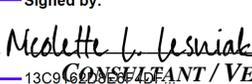
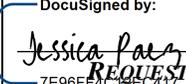
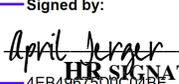
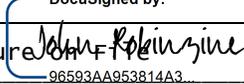
1. **Call to Order/Roll call**
2. **Pledge**
3. **Public Comment**
4. **Closed Session to discuss appointment, employment, compensation, discipline, performance, or dismissal of specific employee(s), specific independent contractors, specific volunteers, or District legal counsel**
5. **Consent**
 - A. Approve Personnel Report
 - B. Approve vendor contract for Nicolette Lesniak
6. **Superintendent Resignation/Separation Agreement**
7. **Adjourn**

PERSONNEL REPORT
JUNE 18, 2025

1. It is recommended that the Board of Education approve the **2025-2026 employment contract** for **Tara Sconza**, Business Manager.

Consultants/Vendors must not provide goods or services without an approved purchase order.

AUTHORIZATION FOR CONSULTANT / VENDOR SERVICES
 Superintendent / Board approval required for services **\$1,000 or over.**
 Principal / Director of Finance approval required for one time services **under \$1,000.**

Requested by: Jessica Paez	Title/Department: Student Services Department
Requisition Number: 000	Campus: Administration
Vendor Name: Nicolette L. Lesniak Address: 8118 Jefferson Avenue, Munster, IN. 46321 Phone: 773-401-1338 Email: Nicolettelesniak@icloud.com	Name, phone and email of person(s) performing the service, if different than vendor:
<u>Service to be performed:</u> Start of school year preparation.	
<u>Agreed length of service / estimated hours/rate of pay:</u> Consultation hourly rate of \$68.98, not to exceed 80 hours. (\$5,518.40)	
<u>Total contract amount (not to exceed):</u> 5,518.40	
IF APPLICABLE, ATTACH CONTRACT FOR BOARD / SUPERINTENDENT APPROVAL (OVER \$1,000)	
WILL VENDOR BE IN DIRECT CONTACT WITH STUDENTS? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> IF YES, THEN THE VENDOR MUST BE FINGERPRINTED BY HUMAN RESOURCES PRIOR TO THE START DATE. HAVE THE VENDOR CONTACT HR AT 708-585-2310. ALL CONSULTANTS MUST HAVE A COMPLETED W-9 ATTACHED TO THE REQUISITION BEFORE SUBMITTING THIS FORM.	
<u>REQUIRED SIGNATURES:</u>	
ARE YOU EMPLOYED IN A TRS POSITION AT ANOTHER DISTRICT? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Nicolette L. Lesniak _____ CONSULTANT / VENDOR	Signed by:  _____ CONSULTANT / VENDOR SIGNATURE DATE: 06-11-2025
DocuSigned by:  _____ REQUESTER SIGNATURE DATE: 06-11-2025	Signed by:  _____ HR SIGNATURE DATE: 06-11-2025
_____ PRINCIPAL SIGNATURE DATE:	DocuSigned by:  _____ BUSINESS OFFICE SIGNATURE DATE: 06-11-2025
Signature on File  _____ SUPERINTENDENT APPROVAL DATE: 06-11-2025	Signature on File _____ BOARD OF EDUCATION APPROVAL DATE:

Your request has been Approved

 06-12-2025