

**Fond du Lac School District
Office of Human Resources**

MEMORANDUM

TO: Michael Gerlach, Director of Business Services
FROM: Marisa Lombardo, Director of Human Resources
DATE: May 15, 2025
RE: Retirement

Jeffrey Fleig, superintendent for the Fond du Lac School District, has submitted his notification of retirement by the end of the 2024-25 fiscal year, with a specific date yet to be determined. His salary should be paid out in full through the June 30, 2025, contract date.

Because he will be at least 55 years of age and has been employed in the Fond du Lac School District for two continuous years, he is eligible for hospital/medical and dental insurance equal to that provided for active teachers, for a period of two (2) consecutive years immediately following retirement or to Medicare eligibility, assuming that the Medicare benefit is that which is generally enjoyed on the basis of age (65) rather than a more limited benefit triggered by a disability, whichever occurs first.

The premium for such insurance shall be paid by the District at the same rate as is paid for active employees, as set forth in the Management Plan, for the first year. During the second year of eligibility, the District shall pay the rate that was paid during the first year.

In addition, Jeff is to be paid out for 25 unused vacation days at his per diem rate.

Please make the necessary payroll and benefit arrangements.

ML:es

cc: Personnel File

Employee Name	Jeffrey Fleig	Position	Superintendent
School or Department	District Office	Employee Group	Administrators
Reason for Separation	Retirement	Reason for resignation	
Date of Notification of Resignation / Retirement	6/30/2025	Last Day of Work	6/30/2025
Personal Mailing Address	[REDACTED]	Personal Phone Number	[REDACTED]
Personal email Address	[REDACTED]		
Certification	Click here to indicate understanding of and agreement with the statement above.		

Date Received: _____ Received By: _____

<input type="checkbox"/> Changed Employee Type <input type="checkbox"/> Inactivated in Frontline <input type="checkbox"/> Open vacancy added in Aesop	<input type="checkbox"/> Added to resigned/retired spreadsheet <input type="checkbox"/> Sent exit survey <input type="checkbox"/> Staffing sheet updated	<input type="checkbox"/> Removed from evaluations <input type="checkbox"/> Removed from license lists <input type="checkbox"/> Removed from Vector <input type="checkbox"/> Term Date added
Amounts Outstanding		
Liquidated Damages <input type="checkbox"/> N/A <input type="checkbox"/> Amount owed <input type="checkbox"/> Paid in full <input type="checkbox"/> Payment Plan	Tuition Reimbursement <input type="checkbox"/> N/A <input type="checkbox"/> Amount owed <input type="checkbox"/> Paid in full <input type="checkbox"/> Payment Plan	Signing Bonus <input type="checkbox"/> N/A <input type="checkbox"/> Amount owed <input type="checkbox"/> Paid in full <input type="checkbox"/> Payment Plan

Contacts:



pennsylvania
DEPARTMENT OF EDUCATION

Verification of Experience Form PDE 338 V

(Refer to instructions included with this form.)

Section I – Applicant Information (please print or type)

Last Name: Fleig First Name: Jeffrey Middle Initial: _____

Pennsylvania Personnel ID (PPID): 9831682

Current Address: _____

City/State/Zip Code: _____

Please list all former name(s) beginning with the most recent:

LAST	FIRST	MIDDLE/INITIAL

Section II – School District/Institution Information

Public or Private School District or Institution Name: Fond du Lac School District

Address: 72 W 9th St

City/State/Zip Code: Fond du Lac, WI 54935

Phone: 920-929-2900 Extension: _____

Email address of contact person: lombardom@fonddulac.k12.wi.us

Section III – Satisfactory Professional Educator Experience (to be completed by employer)

① Beginning Date of Service: 07/01/2021 Full-Time
(MM/DD/YYYY)

Ending Date of Service: 05/27/2025 Part-Time _____
(MM/DD/YYYY) Hours per Week

Position Held: Superintendent
(e.g., Teacher, Counselor, Supervisor, Principal, Superintendent)

If Teacher, indicate subject area and grade span: _____
(e.g., Art PK-12, Math 9-12, Grade 3)

2. Beginning Date of Service: _____ Full-Time
(MM/DD/YYYY)

Ending Date of Service: _____ Part-Time _____
(MM/DD/YYYY) Hours per Week

Position Held: _____
(e.g., Teacher, Counselor, Supervisor, Principal, Superintendent)

If Teacher, indicate subject area and grade span: _____
(e.g., Art PK-12, Math 9-12, Grade 3)

Name: Jeffrey Fleig PPID: 9831682

School District or Institution Name: Fond du Lac School District

Section III – Continued from Page 1

3. Beginning Date of Service: _____ (MM/DD/YYYY) Full-Time
Ending Date of Service: _____ (MM/DD/YYYY) Part-Time _____ Hours per Week

Position Held: _____
(e.g., Teacher, Counselor, Supervisor, Principal, Superintendent)

If Teacher, indicate subject area and grade span: _____
(e.g., Art PK-12, Math 9-12, Grade 3)

4. Beginning Date of Service: _____ (MM/DD/YYYY) Full-Time
Ending Date of Service: _____ (MM/DD/YYYY) Part-Time _____ Hours per Week

Position Held: _____
(e.g., Teacher, Counselor, Supervisor, Principal, Superintendent)

If Teacher, indicate subject area and grade span: _____
(e.g., Art PK-12, Math 9-12, Grade 3)

Section IV – Affidavit

I verify this record omits leaves of absence, all information is complete and correct according to the official records of the designated school district or institution, the listed service was evaluated and deemed satisfactory, and the designated school district or institution is not aware of a specific good moral character issue(s) that indicates the applicant does not possess the personal qualities that warrant issuance of the requested certificate. (If the school district or institution is aware of a specific good moral character issue(s) that indicates the applicant does not possess the personal qualities that warrant issuance of the requested certificate, a statement of explanation must be attached to this form.)

Marisa Lombardo 03/09/2026
Signature of Chief School Administrator Date

Marisa Lombardo - Director of Human Resources
Printed Name & Title



Work Experience Verification

EMPLOYEE INFORMATION

Jeffrey First Name	Fleig Last Name	[Redacted] Last 4 Digits of SSN	[Redacted] Date of Birth
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Employment Verification and Employer Information sections of this form must be completed by the employee's current or previous human resources or personnel director, school district superintendent, charter or private school administrator or equivalent and submitted directly to the State Board of Education. Third party verification will not be accepted. Forms completed or altered by the applicant will not be accepted.

EMPLOYMENT VERIFICATION. Indicate the employee's position(s) held below (examples: *principal, school counselor, teacher, office manager*).

07/2021 to 06/2025 Start to End Dates (MM/YYYY to MM/YYYY)	Superintendent Position or Title	 Job Description (or attach additional document)
 Start to End Dates (MM/YYYY to MM/YYYY)	 Position or Title	 Job Description (or attach additional document)
 Start to End Dates (MM/YYYY to MM/YYYY)	 Position or Title	 Job Description (or attach additional document)

COMPLETE FOR TEACHING EXPERIENCE ONLY. LIST ALL TEACHING ASSIGNMENTS PER SCHOOL YEAR. Use separate rows only to indicate changes in employment status or teaching assignments. If the position held was *special education teacher*, please indicate the special population served (examples: *gifted, mild/moderate*).

 School Year	 Subject Area(s) or Special Population(s)	 Grade Level(s)
 School Year	 Subject Area(s) or Special Population(s)	 Grade Level(s)
 School Year	 Subject Area(s) or Special Population(s)	 Grade Level(s)
 School Year	 Subject Area(s) or Special Population(s)	 Grade Level(s)

EMPLOYER INFORMATION. Do not return this form to the applicant. Email completed form to Educator.Licensure@SBOE.Ohio.Gov OR mail to Office of Educator Licensure and Effectiveness; William Green Building; 30 W. Spring Street, 12th Floor; Columbus, Ohio 43215.

Fond du Lac School District Name of Employing School, District, Organization or Business	920-906-6502 Office Phone Number
72 W 9th Street Office Street Address	Fond du Lac, WI 54935 City, State, Zip Code
Director of Human Resources Title of Authorized Official	lombardom@fonddulac.k12.wi.us Email Address of Authorized Official
Manisa Lombardo Name of Authorized Official (Print or Type)	 Signature of Authorized Official
	05/22/2025 Date of Signature



Soczka, Halle <soczkah@fonddulac.k12.wi.us>

Superintendent Vacation Payout

1 message

Soczka, Halle <soczkah@fonddulac.k12.wi.us>

Mon, Jun 3, 2024 at 10:21 AM

To: MICHAEL GERLACH <gerlachm@fonddulac.k12.wi.us>

Hello Mike,

Per Dr. Fleig's superintendent contract, he should be paid out for 10 days of unused vacation for 2023-24 at the per diem rate. I have verified that he has the eligible unused days. Please add this pay to his June 14, 2024 paycheck if possible.

Thank you,
Halle

Halle B. Soczka | Fond du Lac School District
Executive Assistant to the Superintendent
920-906-6502 | soczkah@fonddulac.k12.wi.us
72 West Ninth Street | Fond du Lac, WI 54935



SEPARATION AGREEMENT

This Separation Agreement (the "Agreement") is made by and between the Board of Education of the Fond du Lac School District (the "Board") and Dr. Jeff Fleig ("Administrator").

WHEREAS, Administrator desires, through this Agreement, to move up his scheduled retirement date of June 30, 2025, to the date this Agreement becomes effective and finalize his separation from employment with the Board and accept the terms of this Agreement.

NOW, THEREFORE, the parties to this Agreement, in consideration of the mutual promises herein contained and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, agree as follows:

1. **ADMINISTRATOR'S RETIREMENT.** Administrator has requested to retire earlier from all service to the Board and the School District than the previously scheduled retirement date of June 30, 2025. The Board hereby waives any notice requirements, and accepts and approves Administrator's earlier retirement date, which will be the date this Agreement becomes effective ("Retirement Date"). If this Agreement is not revoked pursuant to Section 11, this Agreement becomes effective the day after the revocation period ends (the "Effective Date") Administrator agrees to fully and faithfully perform all assigned contractual obligations for the Board until this Agreement comes effective.
2. **CONSIDERATION.** As consideration to this Agreement, the Board agrees to pay the remainder of Administrator's salary under his 2023-2025 Administrator Contract. This compensation shall be paid out on May 30, 2025, in three separate direct deposits of \$7,965.88 each from payroll and shall be subject to all withholding and reporting required by law, including state and federal income taxes.
3. **EMPLOYMENT REFERENCE.** If the District is contacted by Administrator's prospective employers, the inquiry will be responded to by the Board President, Katie Moder, who shall provide a positive reference highlighting the Academic accomplishments of the District by way of the Administrator's service to the Board and District.
4. **OTHER BENEFITS.** In accordance with the Administrator's 2023-2025 contract and plans referenced therein:
 - a. **Retirement Insurance.** Administrator's health and dental insurance will end on June 30, 2025. The Administrator shall be eligible for the health, hospitalization, and dental insurance described under Administrator's Contract and supplemented by the current Administrator Management Plan for a period of two years ending June 30, 2027. All coverage under this Section is conditioned on Administrator's timely payment of the employee portion of such coverage. Administrator and any beneficiaries shall be eligible for all other continuation coverage as required by law.
 - b. **Tax Sheltered Annuity/Deferred Compensation.** The Administrator shall receive the remainder of his TSA benefit contribution in the amount of One Thousand Three Hundred and Sixty-Three Dollars and Sixty cents (\$1,363.60) on May 30, 2025, and

shall be subject to all withholding and reporting required by law, including state and federal income taxes.

- c. Automobile Expenses. The Administrator shall receive the remainder of his transportation stipend in the amount of Five Hundred Twenty-Five Dollars and Zero cents (\$525.00) on May 30, 2025, and shall be subject to all withholding and reporting required by law, including state and federal income taxes.
 - d. Vacation. The Administrator shall receive a payout of his unused vacation time (25 days as of 5.15.2025) in the amount of Eighteen Thousand Three Hundred and Twelve Dollars and Twenty-Five cents (\$18,312.25) on May 30, 2025, and shall be subject to all withholding and reporting required by law, including state and federal income taxes.
5. SATISFACTION OF BENEFITS. Administrator acknowledges and agrees that there are no other wages, amounts, obligations or other benefits due Administrator from the Board. The benefits in Sections 2-4 constitute full satisfaction of any and all payments or benefits to which Administrator was or is entitled. Administrator hereby fully waives any right that Administrator has or may have to any further payments or benefits from the Board.
6. GENERAL WAIVER AND RELEASE. In consideration of the Board's obligations and promises under this Agreement and for such other and valuable consideration received (which Administrator acknowledges to be greater, in their totality, than any benefits due him absent this Agreement), Administrator irrevocably and unconditionally does hereby fully and forever discharge and release the Board and the School District, which includes all departments and agencies, and of the foregoing's past and present employees, officers, officials, agents, representatives, insurers, and attorneys, from any and all actions, causes of action, claims, demands, damages (including but not limited to punitive damages), costs, expenses, attorneys' fees, and compensation on account of, of any nature whatsoever or in any way growing out of any and all known and unknown damage resulting to or to result from any action by the Board, anticipated and unanticipated, foreseen or unforeseen, arising out of or relating to the parties' employment relationship, the termination of the parties' employment relationship, and any steps taken by the Board to take any adverse employment action whatsoever against Administrator which arose on or before the date of execution of this Agreement.

This scope of this release and waiver of claims includes, but is not limited to: (1) any claim that the Board committed any statutory or violation or other wrong with respect to Administrator relating to or arising out of his employment with the Board or otherwise; and (2) any claim arising under any federal, state or local law, regulation or ordinance, whether codified or not, governing or otherwise relating to discrimination in employment, wrongful discharge, the breach of an express or implied contract of employment or other governmental statute including, but not limited to, the Family and Medical Leave Act of 1993; Title VII of the Civil Rights Act of 1964, as amended; 42 U.S.C. § 1981; the Equal Pay Act, as amended; the Genetic Information Nondiscrimination Act ("GINA"); the Consolidated Omnibus Budget Reconciliation Act of 1985 ("COBRA"); the Employee Retirement Income Security Act, as amended ("ERISA"), the Americans with Disabilities Act ("ADA") and Sections 503 and 504 of the Rehabilitation Act of 1973; the Fair Labor Standards Act; the Wisconsin Fair Employment Act, as amended; the Wisconsin Family and Medical Leave Act; the Municipal

Employment Relations Act and/or the Wisconsin Wage Claims, Payments and Collections Law, § 109.01, *et. seq.*

7. ADEA WAIVER. Without limiting the foregoing, Administrator also specifically agrees and represents that he is waiving and releasing the Board from and against any and all claims related to his alleged employment or separation from alleged employment arising under the Age Discrimination in Employment Act of 1967, that in exchange for the waiver and release of those claims, Administrator is receiving consideration in addition to anything of value to which he is already entitled, that Administrator is not waiving any claims or rights that may arise after the effective date of this Agreement, and that, if applicable, Administrator has consulted with an attorney of her choice prior to executing this Agreement regarding the content of the Agreement and the legal rights waived hereunder.
 8. UNEMPLOYMENT COMPENSATION. For purposes of this Section, the Administrator agrees Administrator's retirement was a voluntary retirement and understands Administrator may not be entitled to any unemployment compensation benefits.
 9. NON-ASSIGNMENT AND COVENANT NOT TO SUE. Administrator affirms that he has not filed or caused to be filed, and is presently not a party to, any lawsuits, or initiated any other administrative proceedings against the Board. Administrator further covenants and agrees that he owns any and all claims against the Board and that he has not assigned or otherwise transferred all or any portion of any claim or right against the Board to any person or entity. In exchange for the consideration in Section 2, Administrator further promises and covenants not to sue the Board with respect to any claim released by this Agreement. Administrator further agrees that he has not and will not file or permit to be filed on her behalf any claim such as those released herein. Nothing in this Agreement shall interfere with Administrator's right to file a charge, cooperate or participate in an investigation or proceeding conducted by any federal or state regulatory or law enforcement agency. In any event, Administrator hereby forever gives up all rights to receive any benefit, monetary or otherwise, from any charge or complaint filed concerning Administrator's employment or separation from employment with the Board, regardless of who files it.
 10. CONSIDERATION PERIOD. Administrator will have twenty-one (21) calendar days from the date he receives this Agreement to consider its terms and decide whether to sign it. This period is designed to allow her time to consult with his attorney, or anyone else whose advice he may need or want. The execution of this Agreement prior to the expiration of the twenty-one (21) calendar day period does not negate the fact that Administrator had the full twenty-one (21) calendar day period for consideration of this Agreement. If this Agreement is not signed by Administrator prior to the conclusion of the twenty-one (21) calendar day period, the Board's offer Administrator, as contained in this Agreement, shall expire.
- The parties agree that this Agreement has been provided to Administrator on May 15, 2025.
11. REVOCATION. After signing this Agreement, Administrator will have seven (7) calendar days to revoke it. Any revocation should be in writing and delivered to Katie Moder, School Board President, by no later than the end of the seventh (7th) calendar day of the revocation period. Administrator understands and agrees that, should Administrator exercise this right of

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revocation, Administrator will not be entitled to any payment, benefit or other consideration under this Agreement except those benefits described in Section 4. If this Agreement is not revoked pursuant to this Section, this Agreement becomes effective the day after the revocation period ends (the "Effective Date").

12. CONFIDENTIALITY. Except as required by law, including but not limited to Wisconsin's Public Records Law, Wis. Stat. § 19.31 et seq., the parties agree that they will keep the terms, and amounts of this Agreement completely confidential and, except as provided in this section, that they will not disclose any information concerning this Agreement to anyone except immediate family members, tax advisors or accountants, legal counsel, and such other persons as are necessary to carry out the Agreement, and provided that any such persons agree to keep this information confidential.
13. MUTUAL NON-DISPARAGEMENT. The Board and Administrator agree that neither will make any statements regarding each other, either now or at any time in the future, concerning Administrator's employment with the District or separation from employment which could reasonably be viewed as disparaging or in any way reflecting negatively on the reputation of the other unless otherwise required by law.
14. NO ADMISSION OF LIABILITY. The parties' participation in this Agreement is not to be construed as an admission of any wrongdoing or liability whatsoever by or on behalf of Administrator, the Board, or the Board's employees, insurers, attorneys, officials, Board officers, or agents.
15. NON-PRECEDENT SETTING. The parties agree this Agreement is the product and result of unique facts and circumstances. This Agreement shall not serve as a precedent for any party with regard to any other circumstances or claims.
16. COMPLETE AGREEMENT & AMENDMENT. This Agreement represents the full and final agreement between the Parties, superseding any oral, written, or other agreement between the parties concerning Administrator's employment with and voluntary retirement from the Fond du Lac School District. The Parties agree that this Agreement shall not be modified or amended unless both Parties agree in writing.
17. ADMINISTRATOR ACKNOWLEDGEMENT. Administrator acknowledges that the Board has not provided Administrator any advice, or made to Administrator any representation, regarding the application federal or, state tax laws as they might apply to this Agreement or the benefits provided hereunder. Administrator further states and agrees that he has read this Agreement, that he has had the opportunity to have it fully explained to him by an attorney or other representative or advisor, that he fully understands its final and binding effect, and that the only promises made to him to sign this Agreement are those stated in this Agreement, and that he is signing this Agreement-freely and voluntarily.
18. RETURN OF PROPERTY. Administrator agrees to return to Board all of Board's property in Administrator's possession, including, but not limited to, any keys, employee ID, and electronic equipment on or prior to Administrator's last day of employment. Administrator

further agrees to provide all codes, passwords, usernames, or other identification or information necessary to access any of Board's computer files, email account, voicemail systems, and other systems and accounts belonging to Board.

- 19. **NON-WAIVER OF RIGHTS.** The failure of either party to insist, in any one or more instances, upon performance of the terms or conditions of this Agreement shall not be construed as a waiver or a relinquishment of any right granted hereunder or of the future performance of any such term, covenant or condition.
- 20. **GOVERNING LAW & SEVERABILITY.** The Parties agree that the construction and interpretation of this Agreement shall be governed by the laws of the State of Wisconsin. The Parties understand and agree that the provisions of this Agreement shall be deemed severable, and the invalidity or unenforceability of any one or more of the provisions or clauses shall not affect the validity or enforceability of the other provisions or clauses hereof.
- 21. **SUCCESSORS.** This Agreement shall be binding upon and inure to the benefit of and shall be enforceable by and against Administrator, and Administrator's heirs and beneficiaries.
- 22. **COUNTERPARTS.** This Agreement may be executed in counterparts and shall be as effective as if executed on one document. Facsimile signatures shall be as effective and valid as original signatures. This Agreement shall be only valid and binding upon the signatures of all parties.

IN WITNESS WHEREOF, Administrator and the Board have signed this Agreement to be effective as provided herein above.

ADMINISTRATOR:

Jeff Fleig
Jeff Fleig, Ph.D.

Date: 5-16-25

FOND DU LAC SCHOOL DISTRICT:

Katie Moder
Katie Moder, Board President

Date: 5-19-25