

**Mountain View School District**  
**11748 State Route 106**  
**Kingsley, Pennsylvania 18826-9778**

Elementary School Office (570) 434-2181  
High School Office (570) 434-2501  
Superintendent/Business Office (570) 434-2180  
Fax (570) 434-2404

**DATE:** September 10, 2018  
**TO:** Interested Adult Education Instructors  
**FROM:** Karen K. Voigt, Superintendent  
**SUBJECT:** Fall Adult Education Classes

Preparations are being made for the adult education program in the district. Plans are to again vary the nights so that more people will have access to the programs being offered. Classes will be held at the Mountain View High School and/or the Mountain View Elementary School beginning Monday, September 17, 2018. The number of hours for each class will vary depending on the amount of materials to be offered. If you are interested in teaching a class in the adult program, or if you know of anyone who might be interested, please complete this form and return it to my office by 2:00 P.M., Friday, September 14, 2018. Please note: **If I do not have a returned form from you by this date, you will not be able to teach the class.**

There are a number of people in the community who also may have unique talents, which they could use for instructing in our adult program. If you are aware of individuals who may be willing to participate, please give them a copy of this application form or refer their names to me so that I may contact them.

The district will operate classes at a maximum of 3 hours per week for 10 weeks.

Thank you again for your assistance in making the adult education program a success again this year.  
\*\*\*\*\*

PROPOSED COURSE (please list specific name that is to be used in advertising) \_\_\_\_\_ NAME OF INSTRUCTOR \_\_\_\_\_

Special Considerations: (i.e. student number, day of week preferred, location, materials, etc.)

Maximum class size \_\_\_\_\_ Room Request \_\_\_\_\_

If registration exceeds maximum size, do you wish to form two separate classes?

Starting and ending times of class(s) \_\_\_\_\_

Day of the week (circle days available)-Monday, Tuesday, Wednesday, Thursday, Friday, Saturday, Sunday

Special materials needed

Other Considerations \_\_\_\_\_

# ADULT EDUCATION

## Guidelines FALL 2018

**REGISTRATION:** Registration must take place before attending any class. Registration will be taken over the phone by the secretary to the superintendent prior to the beginning date of classes.

**CLASS SCHEDULE:** Classes will be scheduled for a maximum of 3 hours per week for 10 weeks. Classes may be held in the high school and/or elementary school buildings.

**CLASS SIZE:** Classes may not be held for fewer than **nine (9)** participants in each course. If a course is split into two nights because of a large class size, there must be a minimum of nine participants in each class.

**TUITION:** Fall 2018 - **\$20.00** tuition will be charged for a 10 week class with no refunds. (**\$20.00 for 10 classes**)

**RECEIPTS:** Tuition money and receipts may be left with a custodian to give to secretary or leave in mailbox. **Receipts are to include name, complete address and phone number of the adult student.**

**STUDENTS:** Adults will be given preference for enrollment. Students will be enrolled on a first come/first serve basis if there are available openings.

**SUPPLIES:** Participants will be invoiced by the instructor and reimburse the school district for district supplies utilized. Charges will include such district items as lumber for furniture projects, clay for ceramic molds, and paint for art projects. All funds collected by the instructor are to be turned in to the superintendent's secretary. Charges will not be made for group supplies such as computer paper. Class items supplied by the instructor will be invoiced by the instructor and reimbursed directly to the instructor.

**INSTRUCTOR PAYMENT:** At the end of the class the superintendent's office must have the attendance sheet along with the request for instructor payment.

If there are any questions please contact the superintendent's office at (570) 434-2180 ext. 413.

**DATE:** September 10, 2018

**TO:** Adult Education Instructors

**FROM:** Barbara Maxon  
Superintendent's Secretary  
Mountain View School District  
11748 State Route 106  
Kingsley, PA 18826  
(570) 434-2180 Ext. 413  
bmaxon@mvsd.net

**SUBJECT:** Change in Guidelines/Class Schedule

Please see the schedule for your class. ***If you need to CHANGE a class DATE please contact me in order for the schedule to be changed in the building usage system.***

**Adult Education Guidelines have changed. Please read the attached closely. TUITION - \$20.00 and no resident refunds.**

Thank you in advance for your cooperation and for the time it takes to be an instructor. Your participation in this program is a great asset to the Mountain View School District and to the community.

Again, thank you and have a great **FAI**l semester.

Enclosures: Class Schedule  
Adult Education Guidelines  
Attendance Sheet  
Request for Payment-(Attach completed Attendance Sheet and return for payment)  
Tuition Receipts

MOUNTAIN VIEW ADULT SCHOOL  
2018 Fall TERM - \$20.00 Non-Refundable Tuition

\_\_\_\_\_  
CLASS

\_\_\_\_\_  
INSTRUCTOR

\_\_\_\_\_  
NAME

\_\_\_\_\_

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
PHONE

\_\_\_\_\_  
PAID

ARE YOU PARTICIPATING IN THIS COURSE BECAUSE OF \_\_\_\_\_ HOBBY OR  
\_\_\_\_\_ CAREER RELATED? (PLEASE CHECK ONE)

\*\*\*\*\*

This is to certify that \_\_\_\_\_ has paid

\$20.00 for a Mountain View School District Adult Education Class.

This tuition is non-refundable.

\_\_\_\_\_  
INSTRUCTOR'S SIGNATURE

**COURSE**

Fall 2018 \$20.00 Tuition

STUDENT NAME	PHONE #	RESIDENT	STUDENT NAME	PHONE #	RESIDENT
1. _____	_____	YES NO	1. _____	_____	YES NO
2. _____	_____	YES NO	2. _____	_____	YES NO
3. _____	_____	YES NO	3. _____	_____	YES NO
4. _____	_____	YES NO	4. _____	_____	YES NO
5. _____	_____	YES NO	5. _____	_____	YES NO
6. _____	_____	YES NO	6. _____	_____	YES NO
7. _____	_____	YES NO	7. _____	_____	YES NO
8. _____	_____	YES NO	8. _____	_____	YES NO
9. _____	_____	YES NO	9. _____	_____	YES NO
10. _____	_____	YES NO	10. _____	_____	YES NO
11. _____	_____	YES NO	11. _____	_____	YES NO
12. _____	_____	YES NO	12. _____	_____	YES NO
13. _____	_____	YES NO	13. _____	_____	YES NO
14. _____	_____	YES NO	14. _____	_____	YES NO
15. _____	_____	YES NO	15. _____	_____	YES NO
16. _____	_____	YES NO	16. _____	_____	YES NO
17. _____	_____	YES NO	17. _____	_____	YES NO
18. _____	_____	YES NO	18. _____	_____	YES NO
19. _____	_____	YES NO	19. _____	_____	YES NO
20. _____	_____	YES NO	20. _____	_____	YES NO
21. _____	_____	YES NO	21. _____	_____	YES NO
22. _____	_____	YES NO	22. _____	_____	YES NO
23. _____	_____	YES NO	23. _____	_____	YES NO
24. _____	_____	YES NO	24. _____	_____	YES NO
25. _____	_____	YES NO	25. _____	_____	YES NO
26. _____	_____	YES NO	26. _____	_____	YES NO
27. _____	_____	YES NO	27. _____	_____	YES NO

MOUNTAIN VIEW SCHOOL DISTRICT  
ACH DIRECT DEPOSIT AUTHORIZATION

Name: \_\_\_\_\_ SS# \_\_\_\_\_

Bank or Credit Union Name: \_\_\_\_\_

Account #: \_\_\_\_\_ Savings \_\_\_\_\_ Checking \_\_\_\_\_

Account #: \_\_\_\_\_ Savings \_\_\_\_\_ Checking \_\_\_\_\_

Account #: \_\_\_\_\_ Savings \_\_\_\_\_ Checking \_\_\_\_\_

Bank Routing Number for ACH Purposes: \_\_\_\_\_

Bank Representative Signature: \_\_\_\_\_

Employee Signature: \_\_\_\_\_

By completing this form you are authorizing Mountain View School District to direct deposit all of your paycheck on payday to the above named bank. To ensure that the deposits are made accurately, please follow the instructions below:

- 1) Complete your name and social security number.
- 2) Enter the name of your bank or credit union. You may deposit your check into one or up to three separate accounts. Please use one form for each bank if you are depositing into multiple banks or credit unions. Please be sure to verify with your bank or credit union that they participate in ACH for direct deposit.
- 3) **Take the form to your bank or credit union and have a representative complete the account and routing transit numbers to comply with the proper ACH format and sign the form. If the account number does not comply with the correct format, your direct deposit will not be completed.**  
OR:
- 4) **Submit a void check with this form**
- 5) Sign the form.
- 6) Please return the form to the payroll office.

\*\*\*\*\*IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT PHYLLIS SANAUSKAS, EXT 415



## RESIDENCY CERTIFICATION FORM

### Local Earned Income Tax Withholding

#### TO EMPLOYERS/TAXPAYERS:

This form is to be used by employers and/or taxpayers to report essential information for the collection and distribution of Local Earned Income Taxes to the local EIT collector. This form must be utilized by employers when a new employee is hired or when a current employee notifies employer of a name and/or address change. Use the Address Search Application at [www.newPA.com/Act32](http://www.newPA.com/Act32) to determine PSD codes, EIT rates and tax collector contact information.

EMPLOYEE INFORMATION – RESIDENCE LOCATION							
NAME (Last Name, First Name, Middle Initial)			SOCIAL SECURITY NUMBER <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> </tr> </table>				
STREET ADDRESS (No PO Box, RD or RR)							
ADDRESS LINE 2							
CITY	STATE	ZIP CODE	DAYTIME PHONE NUMBER				
MUNICIPALITY (City, Borough or Township)							
COUNTY	RESIDENT PSD CODE <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> </tr> </table>					TOTAL RESIDENT EIT RATE	

EMPLOYER INFORMATION – EMPLOYMENT LOCATION							
EMPLOYER BUSINESS NAME (Use Federal ID Name)			EMPLOYER FEIN <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> </tr> </table>				
STREET ADDRESS WHERE ABOVE EMPLOYEE REPORTS TO WORK (No PO Box, RD or RR)							
ADDRESS LINE 2							
CITY	STATE	ZIP CODE	PHONE NUMBER				
MUNICIPALITY (City, Borough or Township)							
COUNTY	WORK LOCATION PSD CODE <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> <td style="width: 25px; height: 20px;"></td> </tr> </table>					WORK LOCATION NON-RESIDENT EIT RATE	

CERTIFICATION	
Under penalties of perjury, I (we) declare that I (we) have examined this information, including all accompanying schedules and statements and to the best of my (our) belief, they are true, correct and complete.	
SIGNATURE OF EMPLOYEE	DATE (MM/DD/YYYY)
PHONE NUMBER	EMAIL ADDRESS

For information on obtaining the appropriate MUNICIPALITY (City, Borough, Township), PSD CODES and EIT (Earned Income Tax) RATES, please refer to the Pennsylvania Department of Community & Economic Development website:

[www.newPA.com/Act32](http://www.newPA.com/Act32)

# Form W-4 (2018)

**Future developments.** For the latest information about any future developments related to Form W-4, such as legislation enacted after it was published, go to [www.irs.gov/FormW4](http://www.irs.gov/FormW4).

**Purpose.** Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

**Exemption from withholding.** You may claim exemption from withholding for 2018 if **both** of the following apply.

- For 2017 you had a right to a refund of all federal income tax withheld because you had **no tax liability, and**
- For 2018 you expect a refund of all federal income tax withheld because you expect to have **no tax liability.**

If you're exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2018 expires February 15, 2019. See Pub. 505, Tax Withholding and Estimated Tax, to learn more about whether you qualify for exemption from withholding.

## General Instructions

If you aren't exempt, follow the rest of these instructions to determine the number of withholding allowances you should claim for withholding for 2018 and any additional amount of tax to have withheld. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

You can also use the calculator at [www.irs.gov/W4App](http://www.irs.gov/W4App) to determine your tax withholding more accurately. Consider

using this calculator if you have a more complicated tax situation, such as if you have a working spouse, more than one job, or a large amount of nonwage income outside of your job. After your Form W-4 takes effect, you can also use this calculator to see how the amount of tax you're having withheld compares to your projected total tax for 2018. If you use the calculator, you don't need to complete any of the worksheets for Form W-4.

Note that if you have too much tax withheld, you will receive a refund when you file your tax return. If you have too little tax withheld, you will owe tax when you file your tax return, and you might owe a penalty.

**Filers with multiple jobs or working spouses.** If you have more than one job at a time, or if you're married and your spouse is also working, read all of the instructions including the instructions for the Two-Earners/Multiple Jobs Worksheet before beginning.

**Nonwage income.** If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you might owe additional tax. Or, you can use the Deductions, Adjustments, and Other Income Worksheet on page 3 or the calculator at [www.irs.gov/W4App](http://www.irs.gov/W4App) to make sure you have enough tax withheld from your paycheck. If you have pension or annuity income, see Pub. 505 or use the calculator at [www.irs.gov/W4App](http://www.irs.gov/W4App) to find out if you should adjust your withholding on Form W-4 or W-4P.

**Nonresident alien.** If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

## Specific Instructions

### Personal Allowances Worksheet

Complete this worksheet on page 3 first to determine the number of withholding allowances to claim.

**Line C. Head of household please note:** Generally, you can claim head of household filing status on your tax return only if you're unmarried and pay more than 50% of the costs of keeping up a home for yourself and a qualifying individual. See Pub. 501 for more information about filing status.

**Line E. Child tax credit.** When you file your tax return, you might be eligible to claim a credit for each of your qualifying children. To qualify, the child must be under age 17 as of December 31 and must be your dependent who lives with you for more than half the year. To learn more about this credit, see Pub. 972, Child Tax Credit. To reduce the tax withheld from your pay by taking this credit into account, follow the instructions on line E of the worksheet. On the worksheet you will be asked about your total income. For this purpose, total income includes all of your wages and other income, including income earned by a spouse, during the year.

**Line F. Credit for other dependents.** When you file your tax return, you might be eligible to claim a credit for each of your dependents that don't qualify for the child tax credit, such as any dependent children age 17 and older. To learn more about this credit, see Pub. 505. To reduce the tax withheld from your pay by taking this credit into account, follow the instructions on line F of the worksheet. On the worksheet, you will be asked about your total income. For this purpose, total income includes all of

----- Separate here and give Form W-4 to your employer. Keep the worksheet(s) for your records. -----

Form <b>W-4</b> Department of the Treasury Internal Revenue Service		<b>Employee's Withholding Allowance Certificate</b>		OMB No. 1545-0074	
		▶ Whether you're entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.		<b>2018</b>	
1 Your first name and middle initial		Last name		2 Your social security number	
Home address (number and street or rural route)		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. Note: If married filing separately, check "Married, but withhold at higher Single rate."			
City or town, state, and ZIP code		4 If your last name differs from that shown on your social security card, check here. You must call 800-772-1213 for a replacement card. ▶ <input type="checkbox"/>			
5 Total number of allowances you're claiming (from the applicable worksheet on the following pages)		5			
6 Additional amount, if any, you want withheld from each paycheck		6 \$			
7 I claim exemption from withholding for 2018, and I certify that I meet both of the following conditions for exemption. • Last year I had a right to a refund of all federal income tax withheld because I had <b>no tax liability, and</b> • This year I expect a refund of all federal income tax withheld because I expect to have <b>no tax liability.</b> If you meet both conditions, write "Exempt" here . . . . . ▶		7			
Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.					
Employee's signature (This form is not valid unless you sign it.) ▶		Date ▶			
8 Employer's name and address (Employer: Complete boxes 8 and 10 if sending to IRS and complete boxes 8, 9, and 10 if sending to State Directory of New Hires.)		9 First date of employment		10 Employer Identification number (EIN)	



**Personal Allowances Worksheet (Keep for your records.)**

<b>A</b>	Enter "1" for yourself . . . . .	<b>A</b>	_____
<b>B</b>	Enter "1" if you will file as married filing jointly . . . . .	<b>B</b>	_____
<b>C</b>	Enter "1" if you will file as head of household . . . . .	<b>C</b>	_____
<b>D</b>	Enter "1" if: <span style="font-size: 2em; vertical-align: middle;">}</span> <ul style="list-style-type: none"> <li>• You're single, or married filing separately, and have only one job; or</li> <li>• You're married filing jointly, have only one job, and your spouse doesn't work; or</li> <li>• Your wages from a second job or your spouse's wages (or the total of both) are \$1,500 or less.</li> </ul>	<b>D</b>	_____
<b>E</b>	<p><b>Child tax credit.</b> See Pub. 972, Child Tax Credit, for more information.</p> <ul style="list-style-type: none"> <li>• If your total income will be less than \$69,801 (\$101,401 if married filing jointly), enter "4" for each eligible child.</li> <li>• If your total income will be from \$69,801 to \$175,550 (\$101,401 to \$339,000 if married filing jointly), enter "2" for each eligible child.</li> <li>• If your total income will be from \$175,551 to \$200,000 (\$339,001 to \$400,000 if married filing jointly), enter "1" for each eligible child.</li> <li>• If your total income will be higher than \$200,000 (\$400,000 if married filing jointly), enter "-0-" . . . . .</li> </ul>	<b>E</b>	_____
<b>F</b>	<p><b>Credit for other dependents.</b></p> <ul style="list-style-type: none"> <li>• If your total income will be less than \$69,801 (\$101,401 if married filing jointly), enter "1" for each eligible dependent.</li> <li>• If your total income will be from \$69,801 to \$175,550 (\$101,401 to \$339,000 if married filing jointly), enter "1" for every two dependents (for example, "-0-" for one dependent, "1" if you have two or three dependents, and "2" if you have four dependents).</li> <li>• If your total income will be higher than \$175,550 (\$339,000 if married filing jointly), enter "-0-" . . . . .</li> </ul>	<b>F</b>	_____
<b>G</b>	<b>Other credits.</b> If you have other credits, see Worksheet 1-6 of Pub. 505 and enter the amount from that worksheet here . . . . .	<b>G</b>	_____
<b>H</b>	Add lines A through G and enter the total here . . . . .	<b>H</b>	_____

For accuracy, **complete all worksheets that apply.**

- If you plan to **itemize** or **claim adjustments to income** and want to reduce your withholding, or if you have a large amount of nonwage income and want to increase your withholding, see the **Deductions, Adjustments, and Additional Income Worksheet** below.
- If you have **more than one job at a time** or are **married filing jointly and you and your spouse both work**, and the combined earnings from all jobs exceed \$52,000 (\$24,000 if married filing jointly), see the **Two-Earners/Multiple Jobs Worksheet** on page 4 to avoid having too little tax withheld.
- If **neither** of the above situations applies, **stop here** and enter the number from line H on line 5 of Form W-4 above.

**Deductions, Adjustments, and Additional Income Worksheet**

**Note:** Use this worksheet *only* if you plan to itemize deductions, claim certain adjustments to income, or have a large amount of nonwage income.

<b>1</b>	Enter an estimate of your 2018 itemized deductions. These include qualifying home mortgage interest, charitable contributions, state and local taxes (up to \$10,000), and medical expenses in excess of 7.5% of your income. See Pub. 505 for details . . . . .	<b>1</b>	\$ _____
<b>2</b>	Enter: <span style="font-size: 2em; vertical-align: middle;">}</span> <ul style="list-style-type: none"> <li>\$24,000 if you're married filing jointly or qualifying widow(er)</li> <li>\$18,000 if you're head of household</li> <li>\$12,000 if you're single or married filing separately</li> </ul>	<b>2</b>	\$ _____
<b>3</b>	<b>Subtract</b> line 2 from line 1. If zero or less, enter "-0-" . . . . .	<b>3</b>	\$ _____
<b>4</b>	Enter an estimate of your 2018 adjustments to income and any additional standard deduction for age or blindness (see Pub. 505 for information about these items) . . . . .	<b>4</b>	\$ _____
<b>5</b>	<b>Add</b> lines 3 and 4 and enter the total . . . . .	<b>5</b>	\$ _____
<b>6</b>	Enter an estimate of your 2018 nonwage income (such as dividends or interest) . . . . .	<b>6</b>	\$ _____
<b>7</b>	<b>Subtract</b> line 6 from line 5. If zero, enter "-0-". If less than zero, enter the amount in parentheses . . . . .	<b>7</b>	\$ _____
<b>8</b>	<b>Divide</b> the amount on line 7 by \$4,150 and enter the result here. If a negative amount, enter in parentheses. Drop any fraction . . . . .	<b>8</b>	_____
<b>9</b>	Enter the number from the <b>Personal Allowances Worksheet</b> , line H above . . . . .	<b>9</b>	_____
<b>10</b>	<b>Add</b> lines 8 and 9 and enter the total here. If zero or less, enter "-0-". If you plan to use the <b>Two-Earners/Multiple Jobs Worksheet</b> , also enter this total on line 1, page 4. Otherwise, <b>stop here</b> and enter this total on Form W-4, line 5, page 1 . . . . .	<b>10</b>	_____