

SUMMARY FORM

**COLLECTIVE BARGAINING AGREEMENT
PUBLIC SECTOR / NON-POLICE & NON-FIRE**

Section I: Agreement Details

Public Employer: New Providence Board of Education County: Union
 Employee Organization: New Providence Education Association Employees in Unit: 201
 Base Year Contract Term: 7/1/2008 6/30/2012 New Contract Term: 7/1/2012 6/30/2015
 Type of Settlement: Mediated Settlement Fact-Finder Recommendation Voluntary Settlement Super Conciliation

	Column A <u>Base Year - Total Costs</u> <small>(Last Year of Previous agreement)</small>	Column B <u>New Base Year - Total Costs</u> <small>(First Year of Successor agreement)</small>
Section II: Economic		
Item 1 <u>Salary</u>	\$14,186,582	\$14,498,897
Item 2 <u>Increment</u>		
Item 3 <u>Longevity</u>	\$40,800	\$40,800
Item 4 <u>Stipends- Co-Curri/Athletics</u>	\$506,513	\$527,280
Item 5 <u>*Stipends-Other</u>		
Item 6 <u>*Varies & paid per hour</u>		
Item 7 <u>based on use. 0% increase</u>		
Item 8 <u>for all three years</u>		
Item 9		
Item 10		
Item 11		
Item 12		
<small>Any additional items list on separate sheet Additional Items</small>		
Section III: Totals - <small>Sum of costs in each column</small>	\$14,733,895 <small>(Total)</small>	\$15,066,977 <small>(Total)</small>

Section IV: Analysis of new successor agreement

NEW AGREEMENT ANALYSIS

Total Base Year (previous agreement) \$14,733,895

<u>Effective Date (m/d/yyyy)</u>	<u>7/1/2012</u>	<u>7/1/2013</u>	<u>2/1/2014</u>	<u>7/1/2014</u>
Percent Increase	2.2%	0%	3.8%	0%
Total cost of increase ..	\$312,315	\$0	\$550,958	\$0
Total base salary (successor agreement)	\$14,498,897	\$14,498,897	\$15,049,855	\$15,049,855

Section V: Impact of Settlement - average annual increase over term of agreement

Percentage Impact (average per year over term of agreement) 2.00
 Dollar Impact (average per year over term of agreement) \$287,758.00

Section VI

Health Insurance (duplicate costs associated on each line)

	Base Year	Year 1			
Cost of Health Plan	\$3,304,652	\$3,304,652			
Employee Contributions	\$0	\$217,484			
Prescription					
Dental	\$191,329	\$191,329			
Vision					

The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, s/he is subject to punishment.

Section VII

Prepared by:

James Tesda
Print Name
[Signature]
Signature

Title:

JPA / Brd Sec.

Date:

2/13/13