

**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- Teachers Employees in Unit: 203  
 Base Year Contract Term: 7/1/2012 6/30/2015 New Contract Term 7/1/2015 6/30/2018  
 Type of Settlement:  Mediated Settlement  Fact-Finder Recommendation  Voluntary Settlement  Super Conciliation

	Column A Base Year - Total Costs <i>(Last Year of Previous agreement)</i>	Column B New Base Year - Total Costs <i>(First Year of Successor agreement)</i>
<b>Section II: Economic</b>		
Item 1 ..... <u>Salary</u>	\$14,711,399	\$15,093,938
Item 2 ..... <u>Increment</u>		
Item 3 ..... <u>Longevity</u>	\$41,800	\$41,800
Item 4 ..... <u>Stipends- Co Curr/Athletics</u>	\$563,987	\$578,651
Item 5 ..... <u>*Stipends- Other</u>		
Item 6 ..... <u>*Varies and 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 .....		
Any additional items list on separate sheet Additional Items		
<b>Section III: Totals -</b> Sum of costs in each column	\$15,317,186	\$15,714,389
	(Total)	(Total)

**Section IV: Analysis of new successor agreement**

**NEW AGREEMENT ANALYSIS**

Total Base Year (previous agreement)	\$15,317,186		
<u>Effective Date (m/d/yyyy)</u>	<u>7/1/2015</u>	<u>7/1/2016</u>	<u>7/1/2017</u>
Percent Increase	2.6	2.4	2.4
Total cost of increase	\$382,539	\$362,306	\$370,833
Total base salary (successor agreement)	\$15,093,938	\$15,456,244	\$15,827,077

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

Percentage Impact (average per year over term of agreement) 2.47  
 Dollar Impact (average per year over term of agreement) \$371,893.00

**Section VI**

Health Insurance (indicate costs associated on each line)

	Base Year	Year 1
Cost of Health Plan	\$3,493,755	\$3,947,943
Employee Contributions	\$805,236	\$908,322
Prescription	\$0	\$0
Dental	\$173,865	\$173,865
Vision	\$0	\$0

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 Testa  
 Print Name  
  
 Signature

Title: School Business Administrator/Brd Sec

Date: 12/7/2015