New Jersey Public Employment Relations Commission

NON-POLICE AND FIRE

COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line	# -							
	SECTION I: Parties	and Term of Contry	acts	\bigcirc				
1	Public Employer:	14 yswood tu	iblic Schools	County: Carol	len			
2	Employee Organization	Employee Organization: PS A Number of Employees in Unit: 19						
3	Base Year Contract Te	erm: 7/1/19-0	430120	New Contract Term:	711122 - 4	(30/25		
	SECTION II: Type o	SECTION II: Type of Contract Settlement (please check only one)						
4	Contract set	Contract settled without neutral assistance						
5	. Contract set	Contract settled with assistance of mediator						
6	Contract sett	Contract settled with assistance of fact-finder						
7	Contract sett	Contract settled with assistance of super-conciliator						
8	If contract was settled	d in fact-finding, did ti	he fact-finder issue a	a report with recomr	mendations?			
	Yes No							
	SECTION III: Salary Base							
	The salary base is the cost of salaries in the final year of the expired or expiring agreement. This is the base cost from which the parties negotiate the salary increases.							
9	Salary Costs in Base Ye	ear	\$ 2,372,98	13.85				
10	Longevity Costs in Bas	e Year	\$					
11	Total Salary Base		s 2, 372, 98	3.85				
	SECTION IV: Salary	Increases for Each	Year of New Agre	ement*				
12	Effective Date (month/day/year)	Year 1 7/1/22	Year 2 7123	Year 3 7124	Year 4	Year 5		
13	Cost of Salary Increments (\$)	72,062.49	75067.19	7983465				
14	Salary Increase Above Increments (\$)							
15	Longevity Increase (\$)	3250	830	8348				
16	Total \$ Increase (sum of lines 13-15)	75,312.49	75,897.19	88,182.45				
17	New Salary Base (\$)	2448296.34	2524/93.53	2612,376.18				
	Percentage increase over prior year	3.2	3.1 %	3.4 %	%	%		
	*If contract duration is longer than five years, please add an additional page.							

Empl	over: Collingsnood	Employ	ee Organization:	PSA		Page 2	
	SECTION V: Increases in Other Contractual Economic Items or Newly Added Economic Items*						
19	Item Description Base Year Cost (\$) 10,000	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)	
20	Dictable 1850 PDAIDMONE 5500 INSSASICKCORP 102.50 Totals(\$): *If contract duration is longer than		A LOO	0350 5722 134.23			
	SECTION VI: Medical Costs						
			Base Year	Year 1			
21	Health Plan Cost		\$	<u>\$</u>			
22	Prescription Plan Cost		\$	\$	100		
23	Dental Plan Cost	an Cost		\$	1		
24	Vision Plan Cost		\$	\$		×	
25	Total Cost of Insurance		\$	\$			
26	Employee Insurance Contributions		\$	\$			

Employee Contributions as % of Total Insurance Cost

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Employ	ver: Collingswood Employee Organization: PSA	Page 3				
Section	n VI: Medical Costs (continued)					
28	Identify any insurance changes that were included in this CNA.					
	Mes					
	SECTION VII: Certification and Signature					
29	The undersigned certifies that the foregoing figures are true:					
	Print Name: Rede Ann Colomon					
	Position/Title: ASSE) Sup (=					
	Signature:					
	Date: 7/12/2022					

Send this completed and signed form along with an electronic copy of the contract and the signed certification form to: contracts@perc.state.nj.us

NJ Public Employment Relations Commission

Conciliation and Arbitration

PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016

