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 Principals & Assistant Principals Association Employees in Unit: 7

Base Year Contract Term: 7/1/2013 6/30/2016 New Contract Term 7/1/2016 6/30/2019

Type of Settlement: ☐ Mediated Settlement ☐ Fact-Finder Recommendation ☑ Voluntary Settlement ☐ Super Conciliation

Section II: Economic

		Column A Base Year - Total Costs *(Last Year of Previous agreement)*	Column B New Base Year - Total Costs *(First Year of Successor agreement)*
Item 1	Salary	$832,607	$860,411
Item 2	Increment		
Item 3	Longevity	$0	$4,000
Item 4	Seminar/Conference Fees	$8,400	$8,400
Item 5	Meal Allowance	$2,500	$2,500
Item 6	Membership/Assoc Fees	$8,400	$8,400
Item 7			
Item 8			
Item 9			
Item 10			
Item 11			
Item 12			
Any additional items list on separate sheet	Additional Items		
Section III: Totals - Sum of costs in each column		$851,907 (Total)	$883,711 (Total)

Section IV: Analysis of new successor agreement

NEW AGREEMENT ANALYSIS

Total Base Year(previous agreement) $851,907

Effective Date (m/d/yyyy)	7/1/2016	7/1/2017	7/1/2018			
Percent Increase	2.6	2.6	2.6			
Total cost of increase	$27,804	$22,370	$22,953			
Total base salary (successor agreement)	$860,411	$882,781	$905,734			

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

Percentage Impact (average per year over term of agreement) 2.60

Dollar Impact (average per year over term of agreement) $24,376.00

Section VI

Health Insurance (Indicate costs associated on each line)

	Base Year	*Year 1*				
Cost of Health Plan	$91,285	$102,239				
Employee Contributions	$32,852	$36,882				
Prescription	$0	$0				
Dental	$2,802	$2,886				
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 punisment.

Section VII

Prepared by: James Testa
Print Name

Title: School Business Administrator/Brd Sec

Signature

Date: 3/1/2016

Send completed & signed form, a signed and dated copy of contract, signed and dated certification as well as a word processing version of contract to contracts@perc.state.nj.us