## **SUMMARY FORM**

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

Section I: Agreement Deta						II-i
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:	7/1/2016	6/30/2019	New Contra	act Term 7/1/2019	6/30/2022	
Type of Settlement:	☐ Mediated Settle	ement	ct-Finder Recommen	ndation	Voluntary Settlement	Super Conciliation
			Base Year	ımn A • Total Costs evious agreement)	Column E New Base Year - T (First Year of Successor	otal Costs
Section II: Economic						
Item 1 Salary			\$899,297		\$935,667	
Item 2Inc	rement	_				
Item 3 Lor	gevity	_	\$0		\$3,000	
Ilem 4 Sem	inar/Conference Fees		\$8,400		\$8,400	
Item 5 Mea	Allowance	_	\$2,500		\$2,500	
Item 6 Mem	bership/Assoc Fees	_	\$8,400		\$8,400	
Item 7				-		
Item 8			-		-	
Item 9					-	
Item 10		_	-		-	
Ilem 11					-	
Item 12		<u></u>			-	
Any additional items list on separate st	leet	Additional Items			-	
Section III: Totals - Sum of cos	sta in each column		\$918,597		\$957,967	
			(Total)		(Total)	
			, ,	iotaly	(1010)	
Saction IV:			NEW AGREE	EMENT ANALYSIS		
Section IV: Analysis of new succes Total Base Year(previous agreement)			MEN AGREE	INCIPI AIRE 1010		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$918,597	<del></del>				
Effective Date (m/d/yyyy)		7/1/2019	7/1/2020	7/1/2021		
Percent Increase		2.9	2.8	2.8		
Total cost of increase		\$36,370	\$26,198	\$26,933		
Total base salary (successor agreeme	nt)	\$935,667	\$961,865	\$988,798		
Section V: Impact of Settlen	nent - average annual	increase over term of ag	reement			
Percenlage Impact (average per year		2.83				
Dollar Impact (average per year over to	erm of agreement)	\$29,834.00				
Section VI						
Health Insurance (Indicale costs associ	lated on each line	Base Year	Year 1			
Cost of Health Plan		\$163,767	\$183,419			
Employee Contributions		\$56,546	\$54,475			
Prescription		\$0	\$0			
Dental		\$7,464	\$7,464			
Vision		\$0	\$0			
The undersigned certifies I	hat the foregoing figu	res are true and is awa	re that if any of the i	foregoing items are false	, s/he is subject to punis	ment.
Section VII	nut the foregoing na					
Prepared by:	James Te	esta	,	Title:	School Business	Administrator/Brd Sec
	7	Print Name	A			
		Qus 1	esto	Date:	1/25/2019	
		Signature				

## Certification

I declare to the best of my knowledge and belief that the attached executed collective negotiations agreement(s) and the included subargaining agreement for the term beginning	
Employer:	New Providuce BOE
County:	UNION
Date:	1/25/19
Name:	JAmes Testa
	Print Name
Title:	School Bus Admin. Brol Sec.
	Jan tedo
	Signature