

SUMMARY OF PROPOSED AGREEMENT

BETWEEN THE SCHOOL DISTRICT
WITH THE BARGAINING UNIT (BU)

To be acted upon by the Governing Board at its meeting on : enter date mm/dd/yy
 Budget Revisions to be INPUT no later than 45 days after approval: *(will calc + 45 days)*
 Estimated Agreement Payment Date enter date mm/dd/yy

GENERAL

Section 1: STATUS OF BARGAINING UNIT AGREEMENTS

This document is REQUIRED whenever a NEW or AMENDED agreement is ratified.

If this Public Disclosure is not applicable to all of the District's bargaining units, indicate the current status (whether settled or pending settlement) of the remaining units:

(Separate disclosures should be made for each bargaining unit agreement)

	# FTE Represented
Certificated: <input type="text" value="Enter Name of BU - Status"/>	<input type="text" value="0.0"/>
Classified: <input type="text" value="Enter Name of BU - Status"/>	<input type="text" value="0.0"/>

Section 2: PERIOD OF AGREEMENT

The proposed agreement covers the period beginning on: enter date mm/dd/yy
 and ending on: enter date mm/dd/yy

If this agreement is part of a multi-year contract, indicate ALL fiscal years covered:

Fiscal Years:		
Reopeners: Yes or NO ?	<input type="text"/>	<input type="text"/>
<i>if Yes, what Areas?</i>	<input type="text"/>	

COMPENSATION PROVISIONS

Section 3: SALARIES: PERCENTAGE CHANGE IN SALARIES IN PROPOSED AGREEMENT:

The proposed agreement includes the following costs for salaries for the above-mentioned Bargaining unit:

Current Year Salary Cost Before Settlement <i>(Based on Year to Date (YTD) Actuals Projected through 6/30):</i>	<input type="text" value="\$ -"/>
Current Year Salary Cost After Settlement <i>(Include any retroactive pay increases or (decreases) or one time bonuses/stipends or (reductions), as applicable):</i>	<input type="text" value="\$ -"/>
Total Cost Increase or (Decrease):	\$0.00
Percentage Increase or (Decrease):	#DIV/0!

SALARY CHANGE FOR AN AVERAGE, REPRESENTED EMPLOYEE FROM PRIOR YEAR

(Includes annual step/column movement on schedule):

<u>Salary Increase or (Decrease)</u> % increase or (decrease) to existing schedule	<input type="text" value="0.00%"/> per employee
% increase or (decrease) for one-time bonus/stipend or (salary reduction)	<input type="text" value="0.00%"/> per employee
<u>Step & column</u> average % annual change over the prior year schedule	<input type="text" value="0.00%"/> per employee
TOTAL PERCENTAGE CHANGE FOR AVERAGE REPRESENTED EMPLOYEE	0.00% per employee

Indicate Change in # of Work Days, Furlough or Additional, Related to % Change	<input type="text" value="0"/>
Indicate Total # of Work Days to be provided for fiscal year:	<input type="text" value="0"/>
Indicate Total # of Instructional Days to be provided for fiscal year:	<input type="text" value="180"/>

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Section 4: BENEFITS: PERCENTAGE CHANGE IN EMPLOYEE BENEFITS IN PROPOSED AGREEMENT:

The proposed agreement includes the following costs for employee statutory and health/welfare benefits:

Statutory Benefits: *(object 3XXX less 34XX)*

(STRS, PERS, Workers Compensation, Unemployment Insurance, Social Security, Medicare)

Total Statutory Benefit Costs:

Current Costs:	\$	-
Proposed Costs:	\$	-
Total Cost Increase or (decrease):		\$0.00
Percentage Change:		#DIV/0!

District Health and Welfare Plans - *Object 34XX* (Medical, Dental, Vision, Life Insurance, Other)

Total Health and Welfare Costs:

Current Costs:	\$	-
Proposed Costs:	\$	-
Total Cost Increase or (decrease):		\$0.00
Percentage Change:		#DIV/0!

Indicate if Health/Welfare Benefits are Capped: (Include details such as different caps per health plans or any super composite rates. Also, indicate if cap includes health benefits only or also other insurances.)

Current Cap:	\$	-
Proposed Cap:	\$	-
Average Capped Amount increase or (decrease) per employee		\$0.00
		#DIV/0!

TOTAL COST OR (SAVINGS) OF COMPENSATION CHANGES (REGARDLESS OF WHETHER PREVIOUSLY BUDGETED IN WHOLE OR IN PART)
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Section 5: TOTAL COST INCREASE OR (SAVINGS) FOR SALARIES AND BENEFITS IN THE PROPOSED AGREEMENT:

Current Year Combined Cost Before Settlement: *(data pulls from above)*

(Based on YTD Actuals Projected through 6/30 and current agreement)

Salaries	\$	-
Benefits	\$	-
Total:		\$ -

Current Year Cost After Settlement: *(data pulls from above)*

(Include any retroactive pay increases or (decreases) or one-time bonuses/stipends or (reductions)):

Salaries	\$	-
Benefits	\$	-
Total:		\$ -

TOTAL COST INCREASE OR (DECREASE) <i>(This amount should tie to the multiyear projection sections for 1XXX-3XXX)</i>	\$0.00
PERCENTAGE CHANGE	#DIV/0!
1% CHANGE IN SALARY AND STATUTORY BENEFIT COSTS (prior to any settlements):	#DIV/0!

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OTHER PROVISIONS (COMPENSATION AND NON-COMPENSATION)

Section 6: The following are additional compensation and non-compensation provisions contained in the proposed agreement:
(Indicate, **IN DETAIL**, the terms of the agreement covered in each section)

A. OTHER COMPENSATION: Off-Schedule Stipends/Bonuses, Reductions, etc. (amounts, staff affected, total cost and/or savings).

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B. NON-COMPENSATION: Class Size Changes (indicate before and after class sizes/grades affected; and, if applied for CDE waiver (attach copy)), Staff Development Days, Teacher Prep Time, etc..

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C. REOPENERS, CONTINGENCY AND/OR RESTORATION LANGUAGE: Describe specific areas identified for Reopeners, Contingency, and/or Restoration (include triggers and timing). Provide copy of Board Action to BAS upon approval.

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Section 7: State Minimum Reserve Standard Calculation:

Total Expenditures and Other Uses: *(pulls from MYP Sec. 9)*
 Minimum State Reserve Percentage **(input %)**
 Minimum State Reserve Requirement: *(Formula includes Total Exp/Uses x Minimum Reserve %)*

\$	-
	3%
\$	-

FISCAL IMPACT IN CURRENT AND TWO SUBSEQUENT FISCAL YEARS

Section 8: Date of governing board approval of budget revisions in Section 9, Col.2 (below) in accordance with E.C. 42142 and Government Code 3547.5. (Pulls from above Governing Board Date plus 45 days)

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Provide proof that board-approved budget revisions have been input within 45 days. Date budget revisions input/BT #'s:

BT #'s:	mm/dd/yy
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If the board-approved revisions input are different from the proposed budget adjustments in Col. 2 provide a detailed explanation of differences.

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Section 9: IMPACT OF PROPOSED AGREEMENT ON THE GENERAL FUND BUDGET IN CURRENT AND TWO SUBSEQUENT FISCAL YEARS. (Reflect both Unrestricted and Restricted General Fund Budget Amounts)

In-Lieu of this form, an updated Form MYP can be supplied which includes the results of the settlement over the most recent Form MYP filed with this office.

		Current Fiscal Year 20__ - __			
		(Col. 1)	(Col. 2)	(Col. 3)	(Col. 4)
		Latest Board- Approved Budget Before Settlement - As of __ (enter date)	Adjustments as a Direct Result of this Proposed Settlement	Other Revisions (Including Other Proposed BU Agreements) Required to support cost of agreement (i.e. "me-too")	Projected District Budget After Settlement of Agreement (Cols. 1 + 2 + 3)
Please NOTE: The title reflected in Col. 1 can be modified if the agreement is being approved along with the Adopted Budget Process. In this case, Col. 4 should reflect the Adopted Budget including the salary agreement and Col. 1 would reflect the Adopted Budget less Col. 2, the actual cost of the agreement.					
OPERATING REVENUES: LCFF ADA		ADA=	CERT FTE:	CLASS FTE:	ADA=
LCFF Sources (8010-8099)	0.00	0.00	0.00	0.00	0.00
Remaining Revenues (8100-8799)	0.00	0.00	0.00	0.00	0.00
TOTAL	0.00	0.00	0.00	0.00	0.00
OPERATING EXPENDITURES					
1000 Certificated Salaries	0.00	0.00	0.00	0.00	0.00
2000 Classified Salaries	0.00	0.00	0.00	0.00	0.00
3000 Benefits	0.00	0.00	0.00	0.00	0.00
4000 Instructional Supplies	0.00	0.00	0.00	0.00	0.00
5000 Contracted Services	0.00	0.00	0.00	0.00	0.00
6000 Capital Outlay	0.00	0.00	0.00	0.00	0.00
7000 Other	0.00	0.00	0.00	0.00	0.00
TOTAL	0.00	0.00	0.00	0.00	0.00
OPERATING SURPLUS (DEFICIT)		0.00	0.00	0.00	0.00
Other Sources and Transfers In	0.00	0.00	0.00	0.00	0.00
Other Uses and Transfers Out	0.00	0.00	0.00	0.00	0.00
CURRENT YEAR INCREASE/ (DECREASE) TO FUND BALANCE		0.00	0.00	0.00	0.00
BEGINNING FUND BALANCE 9791-92		0.00		0.00	0.00
Prior-Year Adjustments 9793-95		0.00		0.00	0.00
NET BEGINNING BALANCE		0.00		0.00	0.00
ENDING FUND BALANCE (EFB)		0.00	0.00	0.00	0.00
COMPONENTS OF ABOVE EFB:					
Nonspendable (9711-9719)	0.00	0.00	0.00	0.00	0.00
Restricted (9740)	0.00	0.00	0.00	0.00	0.00
Committed (9750/9760)	0.00	0.00	0.00	0.00	0.00
Assigned (9780)	0.00	0.00	0.00	0.00	0.00
Reserve Economic Uncertainties (9789)	0.00	0.00	0.00	0.00	0.00
Unassigned/Unappropriated (9790)	0.00	0.00	0.00	0.00	0.00
State Minimum Reserves %	#DIV/0!	#DIV/0!		#DIV/0!	
<i>Are budgets in balance?</i>	<i>In Balance</i>	OK		<i>In Balance</i>	
<i>Did you adjust reserves? s/b \$0</i>	\$0.00			\$0.00	
FUND 17 RESERVES (9789) or N/A	\$ -			\$ -	

If the total amount of the adjustment in Column 2 does not agree with the amount of the total cost shown in Section 5, Total Costs, please explain below. Also, list any other assumptions used or included in Column 3:

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First Subsequent Year 20__ - __				
	(Col. 1)	(Col. 2)	(Col. 3)	(Col. 4)
	Latest Board- Approved Budget Before Settlement - As of __	Adjustments as a Direct Result of this Proposed Settlement	Other Revisions (Including Other Proposed BU Agreements) Required to support cost of agreement (i.e. "me-too")	Projected District Budget After Settlement of Agreement (Cols. 1 + 2 + 3)
OPERATING REVENUES: LCFF ADA	ADA=	CERT FTE:	CLASS FTE:	ADA=
LCFF Sources (8010-8099)	0.00	0.00	0.00	0.00
Remaining Revenues (8100-8799)	0.00	0.00	0.00	0.00
TOTAL	0.00	0.00	0.00	0.00
OPERATING EXPENDITURES				
1000 Certificated Salaries	0.00	0.00	0.00	0.00
2000 Classified Salaries	0.00	0.00	0.00	0.00
3000 Benefits	0.00	0.00	0.00	0.00
4000 Instructional Supplies	0.00	0.00	0.00	0.00
5000 Contracted Services	0.00	0.00	0.00	0.00
6000 Capital Outlay	0.00	0.00	0.00	0.00
7000 Other	0.00	0.00	0.00	0.00
TOTAL	0.00	0.00	0.00	0.00
OPERATING SURPLUS/(DEFICIT)	0.00	0.00	0.00	0.00
Other Sources and Transfers In	0.00	0.00	0.00	0.00
Other Uses and Transfers Out	0.00	0.00	0.00	0.00
CURRENT YEAR INCREASE/ (DECREASE) TO FUND BALANCE	0.00	0.00	0.00	0.00
BEGINNING FUND BALANCE (9791) (Pulls from prior year EFB)	0.00			0.00
Prior-Year Adjustments (9792-9795)				0.00
NET BEGINNING BALANCE	0.00			0.00
ENDING FUND BALANCE (EFB)	0.00	0.00	0.00	0.00
COMPONENTS OF EFB (above):				
Nonspendable (9711-9719)	0.00	0.00	0.00	0.00
Restricted (9740)	0.00	0.00	0.00	0.00
Committed (9750/9760)	0.00	0.00	0.00	0.00
Assigned (9780)	0.00	0.00	0.00	0.00
Reserve Economic Uncertainties	0.00	0.00	0.00	0.00
Unassigned/Unappropriated (9790)	0.00	0.00	0.00	0.00
State Minimum Reserves %	#DIV/0!		#DIV/0!	#DIV/0!
<i>Are budgets in balance?</i>	<i>In Balance</i>			<i>In Balance</i>
<i>Did you adjust reserves? s/b \$0</i>	\$ -	OK		\$ -
FUND 17 RESERVES (9789) or N/A	\$ -			\$ -

Assumptions used for LCFF Gap%, Unduplicated %, Other Revenue COLAs, Add/Reduced staffing, etc., explain below:

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Second Subsequent Year 20__ - __			
(Col. 1)	(Col. 2)	(Col. 3)	(Col. 4)
Latest Board- Approved Budget Before Settlement - As of __	Adjustments as a Direct Result of this Proposed Settlement	Other Revisions (Including Other Proposed BU Agreements) Required to support cost of agreement (i.e. "me-too")	Projected District Budget After Settlement of Agreement (Cols. 1 + 2 + 3)
OPERATING REVENUES: LCFF ADA	ADA=	CERT FTE:	CLASS FTE:
LCFF Sources (8010-8099)	0.00	0.00	0.00
Remaining Revenues (8100-8799)	0.00	0.00	0.00
TOTAL	0.00	0.00	0.00

OPERATING EXPENDITURES

1000 Certificated Salaries	0.00	0.00	0.00	0.00
2000 Classified Salaries	0.00	0.00	0.00	0.00
3000 Benefits	0.00	0.00	0.00	0.00
4000 Instructional Supplies	0.00	0.00	0.00	0.00
5000 Contracted Services	0.00	0.00	0.00	0.00
6000 Capital Outlay	0.00	0.00	0.00	0.00
7000 Other	0.00	0.00	0.00	0.00
TOTAL	0.00	0.00	0.00	0.00

OPERATING SURPLUS/(DEFICIT)

	0.00	0.00	0.00	0.00
Other Sources and Transfers In	0.00	0.00	0.00	0.00
Other Uses and Transfers Out	0.00	0.00	0.00	0.00
CURRENT YEAR INCREASE/ (DECREASE) TO FUND BALANCE	0.00	0.00	0.00	0.00

BEGINNING FUND BALANCE (9791)

(Pulls from prior year EFB)	0.00			0.00
Prior-Year Adjustments (9792-9795)				0.00
NET BEGINNING BALANCE	0.00			0.00

ENDING FUND BALANCE (EFB)

	0.00	0.00	0.00	0.00
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COMPONENTS OF EFB (above):

(use whole rounded numbers only)

Nonspendable (9711-9719)	0.00			0.00
Restricted (9740)	0.00			0.00
Committed (9750/9760)	0.00			0.00
Assigned (9780)	0.00	0.00		0.00
Reserve Economic Uncertainties	0.00	0.00	0.00	0.00
Unassigned/Unappropriated (9790)	0.00	0.00	0.00	0.00
State Minimum Reserves %	#DIV/0!		#DIV/0!	#DIV/0!
Are budgets in balance?	In Balance			In Balance
Did you adjust reserves? s/b \$0	\$0.00	OK		\$0.00
FUND 17 RESERVES (9789) or N/A	\$ -			\$ -

Assumptions used for LCFF Gap%, Unduplicated %, Other Revenue COLAs, Add/Reduced Staffing, etc., explain below:

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Section 10: MULTI-YEAR CONTRACT AGREEMENT PROVISIONS: The proposed agreement contains the following COLAs and other compensation/non-compensation provisions for subsequent years as follows *(text pulls into disclosure)*: Send copy of final Agreement to BAS upon Board Approval

Section 11:

FINANCIAL IMPACT OF PROPOSED AGREEMENT IN SUBSEQUENT FISCAL YEARS: The following assumptions were used to determine that resources will be available to fund these obligations in future fiscal years. (Include any compensation/noncompensation provisions specified below.) *(text pulls into disclosure)*:

Section 12: NARRATIVE OF AGREEMENT: Provide a brief narrative of the proposed changes in compensation or health premiums, including percentage changes, effective dates, and comments and/or explanations. *(text pulls into disclosure)*:

Section 13: SOURCE OF FUNDING FOR PROPOSED AGREEMENT: Provide a brief narrative of the funds available in the current year to provide for the costs of this agreement. *(text pulls into disclosure)*:

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ADDITIONAL FISCAL INDICATORS- CRITERIA AND STANDARDS A.5

This section is in response to the Criteria and Standards Additional Fiscal Indicators #A.5., which asks: "Has the district entered into a bargaining agreement where any of the budget or subsequent years of the agreement would result in salary increases that are expected to exceed the projected state cost of living adjustment."

Section 14: COMPARISON OF PROPOSED AGREEMENT TO CHANGE IN DISTRICT LOCAL CONTROL FUNDING FORMULA (LCFF):

(A)	Current-year (CY) LCFF Average Rate per ADA: (CY LCFF Entitlement per ADA, FCMAT LCFF Calculator, Calculator Tab, Row 57)	Estimated	\$0.00
(B)	Less Prior-Year (PY) LCFF BASC Calculator Rate per ADA: (PY LCFF Entitlement per ADA, FCMAT LCFF Calculator, Calculator Tab, Row 57)		\$0.00
(C)	= Amount of Current-Year Increase or (decrease): (A) minus (B)		0.00
(D)	= Percentage Increase or (decrease) in LCFF per ADA: (C) divided by (B)		#DIV/0!
(E)	ADA Increase/(Decrease) from Prior Year as % Current year P-2 LCFF funded ADA (greater of PY guarantee or current year)		0.00
	Prior Year P-2 LCFF funded ADA (greater of PY guarantee or current year)		0.00
(F)	Total LCFF % increase or (decrease) plus ADA % change		#DIV/0!
(G)	Indicate Total Settlement Percentage Change from Section 5		#DIV/0!

If proposed agreement % on Line G is greater than Line F, please provide explanation below:

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CERTIFICATION

*To be signed by the **District Superintendent AND Chief Business Official upon submission to the Governing Board** and by the **Board President upon formal Board action** on the proposed agreement.*

Districts with a Qualified or Negative Certification : Per Government Code 3540.2, signatures of the District Superintendent and Chief Business Official must accompany the Summary Disclosure sent to the County Superintendent for review 10 days prior to the board meeting that will ratify the agreement .

The information provided in this document summarizes the financial implications of the proposed agreement and is submitted to the Governing Board for public disclosure of the major provisions of the agreement (as provided in the "Public Disclosure of Proposed Collective Bargaining Agreement") in accordance with the requirements of AB 1200, AB 2756, GC 3547.5, and GC 3540.2.

WE HEREBY CERTIFY THAT THE COSTS INCURRED BY THE SCHOOL DISTRICT UNDER THIS AGREEMENT CAN BE MET BY THE DISTRICT DURING THE TERM OF THE AGREEMENT.

<i>District Superintendent - signature</i>	<i>Date</i>
<i>Chief Business Official - signature</i>	<i>Date</i>

After public disclosure of the major provisions contained in this Summary, the Governing Board, at its meeting on
 enter date mm/dd/yy **took action to approve the proposed Agreement with the**
 Enter Name of BU **Bargaining Unit.**

<i>President, Governing Board - signature</i>	<i>Date</i>
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