

DISCLOSURE OF COLLECTIVE BARGAINING AGREEMENT

In Accordance with AB1200 (Statutes of 1991, Chapter 1213); G.C. 3547.5; CCR, Title V, Section 15449

SELECT DISTRICT HERE:

Mother Lode School District

The proposed agreement is a _____ year agreement that covers the period beginning _____ and ending _____, and will be acted upon by the Governing Board at its meeting on _____, 201____. The General Fund is impacted as follows. Impact on other funds is addressed in the narrative.

Bargaining Unit Group
(Please use separate disclosure for each group)

Check one by marking with "x"	Cost of 1% *
<input type="checkbox"/>	\$ -
<input type="checkbox"/>	\$ -
<input type="checkbox"/>	\$ -
<input type="checkbox"/>	\$ -

- Certificated
- Classified
- Confidential/Management
- Other

* includes salary and related benefits, e.g. STRS, PERS, Workers Compensation, Unemployment

A. Proposed Change in Compensation

	Compensation	\$ Fiscal Impact of Proposed Agreement		
		Year 1 FY -	Year 2 FY -	Year 3 FY -
1	Salary Schedule - Increase(Decrease)			
2	Step and Column - Increase (Decrease) due to movement plus any changes due to settlement			
3	Other Compensation (complete description below)			
4	Statutory Benefits - Increase (Decrease) in STRS, PERS,FICA,WC,UI,Medicare, etc. (may be included in costs above or shown separately)			
5	Health/Welfare Benefits - Increase (Decrease)			
6	Total Compensation	-	-	-
7	Total Number of Represented Employees			
8	Total Compensation Average Cost per Employee - Increase (Decrease)	-	-	-

%		
Year 1 FY -	Year 2 FY -	Year 3 FY -
Cost of 1%:	#N/A	
0.00%	0.00%	0.00%
0.00%	0.00%	0.00%
0.00%	0.00%	0.00%
0.00%	0.00%	0.00%
0.00%	0.00%	0.00%

9 **Other Compensation - Increase (Decrease)**
(Stipends, Bonuses, etc.) Provide Description Below

none

10 **Were any additional steps, columns, or ranges added to the schedules?** YES **NO**
If YES, please explain below

no

11 **Does this bargaining group have a negotiated cap for Health and Welfare benefits?** YES **NO**
If YES, please indicate the cap amount.

\$ -

- A. **Proposed change in compensation.** Provide a brief narrative of the proposed change in compensation, including percentage change(s), effective date(s), and comments and explanations as necessary

Nutrition services supervisor has vacation and holidays per the current board policy. The proposed change incorporates those days into the annual salary (positive attendance). The position remains 200 work days, with no additional days paid. The CBO is on the same salary schedule (positive attendance). To incorporate the vacation and holidays, the position moves from 260 total days (work, vacation, and holidays) to 222 work day schedule. Remove the Classified Management from BP 4362, which would result in no longer receiving vacation and holidays.

- B. **Proposed negotiated changes in non-compensation items** (e.g. class size adjustments, staff development days, teacher prep time, etc.)

None

- C. **What are the specific impacts on instructional and support programs to accommodate the settlement?** Include the impact of non-negotiated changes such as staff reductions and program reductions/eliminations.

None

- D. **What contingency language is included in the proposed agreement?** Include specific areas identified for reopeners, applicable fiscal years, and specific contingency language.

None

- E. **Identify other major provisions that do not directly affect the district's costs, such as binding arbitrations, grievance procedures, etc.**

None

Certification No. 1

In accordance with the requirements of Government Code Section 3547.5, the Superintendent and Chief Business Officer of _____ Mother Lode School District _____, hereby certify that the District can meet the costs incurred under the Collective Bargaining Agreement between the District and the _____ Bargaining Unit, during the term of the agreement from _____ to _____.

- The budget revisions necessary to meet the costs of the agreement in year of its term are reflected on pages 5 & 6 of this document.
- N/A - No budget revisions necessary.

District Superintendent (Signature)	Date
Chief Business Official (Signature)	Date

Certification #2

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 Bargaining Agreement* in accordance with the requirement of AB 1200 and Government Code Section 3547.5.

District Superintendent or Designee (Signature)	Date
Contact Person	Phone

After public disclosure of the major provisions contained in this summary, the Governing Board at its meeting on _____, took action to approve the proposed agreement with the Bargaining Unit.

President (or Clerk), Governing Board (Signature)	Date
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