

CONTRACT AGREEMENT FOR THE ASSISTANT TECHNOLOGY COORDINATOR

2019-20, 2020-21, 2021-22

The Agreement is for the period of time from **July 1, 2019 to June 30, 2022**. The Asst. Technology Coordinator will be evaluated by the Technology Coordinator with input from the building principals and the board Secretary. He/she is not a part of the main bargaining unit, but will be provided equivalent benefits. Following is a list of the most significant. (Any changes negotiated with the WEA will be executed with this Agreement also.)

The salaries of all employees covered by the agreement are set forth in the 2019-20, 2020-21, and 2021-22 salary guides and scattergrams, which are attached hereto and made a part hereof retroactive to July 1, 2019. Salary agreement will be:

- a. 3.2% increase retroactive from July 1, 2019 to June 30, 2020
- b. 3.2% increase from July 1, 2020 to June 30, 2021
- c. 3.2% increase from July 1, 2021 to June 30, 2022

7/1/2019-6/30/2020	\$68,525.00
7/1/2020-6/30/2021	\$70,718.00
7/1/2021-6/30/2022	\$72,981.00

VACATION:

3 Weeks (15 days) each year

DAILY HOURS: 8:00 a.m. – 4:00 p.m. with an hour lunch. These hours are flexible. There will be times when the work is better served after school or on Saturdays. The Asst Coordinator will sign in and have an office in the high school, however, the duties and responsibilities are district-wide. It is expected that he/she will be in regular contact with the principals, the media specialists, the Board Secretary and the Superintendent.

HOLIDAYS:

Labor Day	News Years Day
Columbus Day	Lincoln's Birthday (Feb. recess)
Veterans' Day	Washington's Birthday (Feb. recess)
Thanksgiving Day	Good Friday
Friday after Thanksgiving	Memorial Day
Christmas Eve	Independence Day (July 4)
Christmas Day	Martin Luther King Day (Feb. recess)

WORK DURING SCHOOL RECESSES:

Must work a minimum of 5 days during the identified recess periods.
This shall apply to: Teacher's Convention, December Recess, February Recess, Spring Recess

SICK LEAVE: Twelve (12) days per year (cumulative).

UNUSED SICK DAY BUY OUT OPTION

The rate of compensation will be 25% of accumulated sick time with a cap maximum of \$15,000.

REIMBURSEMENT OF UNUSED SICK DAYS

You will receive one additional sick day in lieu of not using any of your two personal days on an annual basis.

PERSONAL DAYS: You will receive one additional sick day for any personal day not used on an annual basis.

DEATH IN THE IMMEDIATE FAMILY : An allowance of five consecutive calendar days shall be granted for bereavement. Immediate family shall be considered as father, mother, spouse, child, brother, sister, mother-in-law, father-in-law, son-in-law, daughter-in-law, step children, brother-in-law, sister-in-law, grandchild, spouse's grandchild or "significant other." (The days will begin to be assessed starting the day after the immediate family member's death and shall be assessed for consecutive days not to include weekends)

An allowance of two days for bereavement shall be granted for brother-in-law, sister-in-law, grandparents, grandparents in law, and stepparents. These two days shall be taken within the same five day period immediately following the death of the family member.

DEATH OF OTHER RELATIVE OR CLOSE FRIEND: One day leave.

MEDICAL BENEFITS, DENTAL PLAN, PRESCRIPTION PLAN:

After 4th year of Employment, employee is eligible for Family Plan or Husband/Wife Plan

Employees covered under this Collective Bargaining Agreement will be required to contribute part of their base salary toward their Health Care Coverage for the term of this Agreement as prescribed by the State of New Jersey for Health Benefits Contribution Coverage Percentages of Premiums.

At no time shall employee contributions for the cost of Health Care Coverage provided by the N.J. Schedule for Health Benefits Contribution fall below 1.5% for the life of the contract.

(Dental Plan)

Employees will be provided the opportunity to upgrade coverage on an individual basis as follows:

\$1.40 per month (as of 6-19-13) for an increase from the present \$1,250 to \$1,500.

\$2.53 per month (as of 6-19-13) for an increase from the present \$1,250 to \$2,000.

Employees will be responsible for enhanced coverage cost. Above rates are current, but are subject to change.

Effective 2019: Employee contributions shall be calculated at the Tier III contribution levels under Chapter 78. P.L 2011, for the duration of this contract only, after which the contributions shall return to the Tier IV schedule or as prescribed by the then existing State of New Jersey contribution coverage percentages for health care benefits premiums.

Employees who choose to voluntarily waive employer provided prescription plan coverage shall receive in lieu of benefits, reimbursement of 25% of the cost selected in July of the current year.

As of July 1, 2019 employees shall receive their choice of coverage plan at the time of hire and are not restricted to single coverage.

EMERGENCY DAYS: Two (2) days per year (non-cumulative).

PROFESSIONAL DEVELOPMENT: Training, educational or instructional programs that relate to the position will be submitted to the Superintendent for approval.

CELL PHONE REIMBURSEMENT Payment capped at \$50 per month for the use of a personal cell phone, effective July 1, 2013. Vouchers in the amount of will be submitted quarterly with the three months previous bills.

TRAVEL ALLOWANCE

\$100 annually for all travel (mileage and tolls) expenses, including in-district, conferences, training, etc. beginning July 1, 2008. The stipend will be paid upon the submission of vouchers in January and June.

Approved:

Asst Coordinator's Signature

Board Representative's Signature

Date

Date