

2014-15 SALARIES AND ECONOMICS BENEFITS FORM FOR ADMINISTRATORS IN OREGON SCHOOL DISTRICTS AND ESD'S



CONFEDERATION OF OREGON SCHOOL ADMINISTRATORS
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District Name and No.: _____

Mailing Address: _____

Phone: _____ Fax: _____

Name and Title of Person Responding: _____

E-mail Address of Person Responding: _____

Superintendent: _____

District Enrollment: _____ Date Completed: _____

INSTRUCTIONS:

1. (Number of Positions) - List the actual FTE% for the position. Combine total FTE% when position has more than one administrator.
2. (No. of Contract Days Per Year) - List number of contract days per year including paid holidays and vacation time.
3. (No. of Paid Holidays in Contract) - List number of paid holidays in contract. Do not include paid vacation time and weekends.
4. (PERS Contribution) - Does the administrator or the district contribute to PERS? Indicate Yes or No.
5. (Actual Full-Time Salary) - List the actual full-time salary for the position(s) even if the position(s) is/are less than full-time.
6. (Lowest Salary) - List the lowest salary when reporting a range of salaries for a position that has more than one administrator. List the actual full-time salary for the position even if the position is less than full-time.
7. (Highest Salary) - List the highest salary when reporting a range of salaries for a position that has more than one administrator. List the actual full-time salary for the position even if the position is less than full-time.
8. (Average Salary) - List the average salary when reporting a range of salaries for a position that has more than one administrator. Calculate averages using only full-time salaries.

WE DEVELOP AND SUPPORT EDUCATIONAL LEADERS TO ENSURE STUDENT SUCCESS

For COSA use only.
District ID: _____

Received: _____

2014-15 ADMINISTRATOR SALARY AND ECONOMICS BENEFITS FORM

GENERAL SALARY: Please provide the following information on administrative salaries scheduled for 2014-15.

NOTE: All salaries should include employee contribution if applicable. Please answer using figures rather than words (i.e. - do not use "all" for holidays; however N/A is acceptable).

Only use these columns when functional area has more than one administrator. Only use full-time salaries. Calculate the averages.

SUPERINTENDENTS	Number of Positions (% FTE)	*No. of Contract Days Per year	**No. of Paid Holidays in Contract	PERS Y/N?		Actual Full-Time Salary	Lowest Salary	Highest Salary	Average Salary
				Admin.	District				
Superintendent									
Deputy Superintendent									
Assistant Superintendent									

DISTRICT ADMINISTRATORS BY FUNCTIONAL AREA: Enter salaries for those positions most closely descriptive of their function.

NOTE: If position is listed above, do not list below as well.

Human Resources / Personnel									
Public Relations / Information									
Business / Budgeting									
Special Education									
Student and Support Services									
Instruction / Curriculum									
Athletic / Activity									
Technology									
Facilities									
Food Service									
Transportation									

OTHER DISTRICT ADMINISTRATORS: Please give the title descriptive of the function they oversee the most.

* Include paid holidays and vacation time in this figure.

** Do not include paid vacations and weekends in this figure.

2014-15 ADMINISTRATOR SALARY AND ECONOMICS BENEFITS FORM

NOTE: If entered under Superintendent, do not enter again under Principal.

Only use these columns when functional area has more than one administrator. Only use full-time salaries. Calculate the averages.

PRINCIPALS (SENIOR HIGH)	Number of Positions (% FTE)	*No. of Contract Days Per year	**No. of Paid Holidays in Contract	PERS Y/N?		Actual Full-Time Salary	Lowest Salary	Highest Salary	Average Salary
				Admin.	District				
0 - 499 ADM									
500 - 899 ADM									
900 - 1099 ADM									
1100 + ADM									

PRINCIPALS (JR./MIDDLE)	Number of Positions (% FTE)	*No. of Contract Days Per year	**No. of Paid Holidays in Contract	PERS Y/N?		Actual Full-Time Salary	Lowest Salary	Highest Salary	Average Salary
				Admin.	District				
0 - 499 ADM									
500 - 699 ADM									
700 + ADM									

PRINCIPALS (ELEMENTARY)	Number of Positions (% FTE)	*No. of Contract Days Per year	**No. of Paid Holidays in Contract	PERS Y/N?		Actual Full-Time Salary	Lowest Salary	Highest Salary	Average Salary
				Admin.	District				
0 - 199 ADM									
200 - 399 ADM									
400 + ADM									

ASSISTANT/VICE PRINCIPALS	Number of Positions (% FTE)	*No. of Contract Days Per year	**No. of Paid Holidays in Contract	PERS Y/N?		Actual Full-Time Salary	Lowest Salary	Highest Salary	Average Salary
				Admin.	District				
Senior High									
Junior High / Middle School									
Elementary School									

* Include paid holidays and vacation time in this figure.

** Do not include paid vacations and weekends in this figure.

2014-15 ADMINISTRATOR SALARY AND ECONOMICS BENEFITS FORM

NOTE: If the Superintendent is the only administrator do not enter 'Yes' or 'No' in the 'Below Superintendent' column..

INSURANCE BENEFITS:	<u>Superintendent</u>		<u>Administrators Below Superintendent</u>	
Are the following benefits paid by District either by an insurance package or separately?				
1. Hospital/Medical.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. Dental.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3. Vision.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4. Life Insurance.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5. Long Term Disability.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
6. Dependent's Life.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
 RELATED BENEFITS:				
7. Is a Tax Sheltered Annuity paid by District?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is it paid as an alternative to other District-paid Insurance?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8. Does District have an Early Retirement Plan?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
 OTHER BENEFITS:				
9. Does District reimburse for tuition?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
10. Does District provide a monthly expense account for <u>other than auto expenses</u> ?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
 CONFERENCE BENEFITS:				
11. Does District pay registration fee for conferences?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
12. Does District pay either per diem or actual costs for conference meals?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
13. Does District pay either per diem or actual costs for conference lodging?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
 TRANSPORTATION BENEFITS:				
14. Is an auto provided by District?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
15. Is a monthly allowance for transportation provided by District?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
16. Is mileage reimbursed by District?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
 LEAVE PROVISIONS:				
Does District provide the following District-Paid Leaves?				
17. Professional Leave?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
18. Sabbatical Leave? (either paid for or allowed without losing seniority).....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
19. OTHER Leaves? (business, personal, emergency, bereavement either separately allowed or charged against sick leave).....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
 PROFESSIONAL BENEFITS:				
20. Are COSA/Department dues at least partly paid by District?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
21. Are national dues paid by District?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
22. Are civic association dues paid by District?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
23. Are professional association dues <u>other than above</u> paid by district?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Thank you for completing our annual survey.

SAVING YOUR WORK

Before returning this completed form be sure to save your work. You may save this form to your computer by using the **SAVE** or **SAVE AS** commands. If you do not save this interactive PDF locally, you will end up e-mailing back a blank form and all your work will be lost. Once you have saved the form to your computer, open your e-mail software and attached the saved form to the outgoing e-mail. Alternatively, you may choose to print the saved form and fax or mail it back to the COSA office.

RETURNING THIS FORM

There are three ways in which you can return this form to our office depending on how you chose to fill it out.

1. E-mail: derrick@cosa.k12.or.us
2. Fax: (503) 581-9840
3. USPS: **CONFEDERATION OF OREGON SCHOOL ADMINISTRATORS**
Attn: Derrick Sullivan
707 13th Street SE, Suite 100
Salem, Oregon 97301

