

Chapter 157 Negotiation Survey

This information will be used when preparing for contract negotiations for contract year(s) starting July 1, 2012. CSEA is unique as it is a member run union. We need your input!

Your name is not required and you can remain anonymous. We would appreciate your filling out the information as completely as possible.

1.) What is your classification? Please check one

- Full-time
- Part-Time with Benefits
- Part-Time No Benefits

2.) Where do you get your information about the union?

- Chapter Meetings
 - Bulletin Board
 - Site Representative
 - Website
 - I don't get any information
 - Other
-

3.) What changes to the contract would you like to see negotiated? Please refer to article and page number. Contract is on website: http://www.csea.com/content/chapter157/html/CSEA_Contract.pdf

4.) Do you know which step of the salary schedule you are being paid?

- Yes
- No

5.) Do you know how much vacation and sick leave you earn per year?

- Yes
- No

6.) Have you ever been notified you must take your unused vacation time by a certain date or you will lose it?

- Yes
- No

7.) How many years have you worked for the district? _____

8.) Are you able to complete your work during your regular hours?

- Yes
- No

9.) Are you allowed overtime for extra hours if needed?

- Yes
- No

10.) Do you keep a 'comp' (compensation) log?

- Yes
- No

11.) Do you feel you are given work that is outside of your classification (working in a higher class)?

- Yes
- No

12.) Has any of your work been jobbed out to an agency outside of the district employees?

- Yes
- No

13.) Do you feel your current job description & classification properly describe your job and fairly compensate you for the work you do??

- Yes
- No

14.) Have duties been added to your work assignment or has equipment been added necessitating new skills and requiring you to work out of your classification??

- Yes
- No

15.) If you answered yes to the previous question, what percentage of time is spent on these duties?

16.) Do you believe you perform tasks significantly different from those performed by other employees in your classification?

- Yes
- No

17.) Are you satisfied with your professional growth program?

- Yes
- No

18.) If you are a classroom assistant, are you frequently left alone in the classroom with the students?

- Yes
- No
- I don't work in the classroom.

19.) Have you ever been asked to change the hours you work or the days you work?

- Yes
- No

Please comment on any concerns regarding your specific work.

Please leave your name and/or personal email address. We will use personal email addresses in the future for important announcements. You may send any additional comments and this form through intra district mail to: Greta Reeves, Information Services—DO. This form is also available on the Chapter 157 website:

<http://www.csea.com/content/chapter157/html/>