

TASB/TASA Superintendent Survey 2021–2022

Contact information for person completing survey

If you are not the superintendent, please enter your own information here.

Name *

Job title/Department

Email Address *

Phone number

Superintendent's name

Update as needed.

Estimated **student enrollment** for 2021–2022 school year *

Spring TEA value has been pre-filled. Update as needed.

Estimated **employee count** for the 2021–2022 school year *
Spring TEA value has been pre-filled. Update as needed.

Is the superintendent an interim assignment? *

- Yes No

Is the superintendent a retired employee? *

- Yes No

Is the superintendent a full-time or part-time employee? *

*For superintendent/principal or similar, please choose **full-time**.*

- Full-time
 Part-time

5. Enter the month/year the incumbent **became superintendent**.

Exclude any time spent as interim.

Month

January
February
March
April
May
June
July
August
September
October
November
December

Year

Total number of districts as superintendent *

Enter 1 if this is the first district as superintendent.

We routinely verify if someone enters **more than five** total districts as superintendent.

Please update above if incorrect, or check here to confirm. *

Yes, has been superintendent in more than five districts

Experience

Local years as superintendent *

Total years as superintendent *

Total years in education (any position/any district) *

We routinely verify if someone enters **fewer than 10 total years** in education.

Please update above if incorrect, or check here to confirm. *

Yes, fewer than 10 total years in education

We routinely verify if someone enters **more than 50 total years** in education.

Please update above if incorrect, or check here to confirm. *

Yes, more than 50 total years

Salary and Incentives

Base Salary

Base salary only; **do not** include incentives/bonuses, allowances, or benefits.

This year (2021–2022) *

Last year (2020–2021) *

Base salary comments

For example, please explain increase to base salary if it is not a standard pay raise.

Incentive or Bonus

An incentive or bonus is taxable income, in addition to base salary, paid directly to the superintendent, usually in a single payment.

Was an incentive or bonus paid to the superintendent in 2020–2021? *

If the same incentive was provided to all or most employees, select no.

Yes

No

Incentive or Bonus Paid *

Annual amount of the most recent incentive or bonus

Reason for most recent incentive or bonus:

- Performance Retention Other (Write In)

Is there an incentive or bonus pay plan in place for the superintendent in 2021–2022? *

- Yes
 No

Allowances, Transportation, and Housing

Personal Memberships *

Does the district pay for the superintendent's personal membership to any civic, private, or professional organizations and clubs?

- Yes No

Annual amount of this allowance

The amount reported is **less than \$100**. Please double-check that it is annual not monthly. If monthly, update the value, or check here to confirm it's annual. *

It's annual

Communication Allowance *

Does the district pay a communication allowance (for cell phone and/or home internet) to the superintendent?

Yes No

Annual amount of this allowance. *

The amount reported is **less than \$500**. Please double-check that it is annual not monthly. If monthly, update the value, or check here to confirm it's annual. *

It's annual

Business Allowance *

Does the district pay a business expense allowance to the superintendent?

Do not include expense reimbursement or transportation/vehicle allowances.

Yes No

Annual amount of this allowance. *

The amount reported is **less than \$1,000**. Please double-check that it is annual not monthly.
If monthly, update the value, or check here to confirm it's annual. *

It's annual

Is a vehicle provided by the district for the sole use of the superintendent? *

Yes No

Vehicle Allowance *

Is a set allowance paid to the superintendent for the business use of his or her personal vehicle?

Do not include mileage reimbursement.

Yes No

Annual amount of this allowance *

The amount reported is **less than \$1,000**. Please double-check that it is annual not monthly. If monthly, update the value, or check here to confirm it's annual. *

It's annual

Does the district provide a residence at no cost or reduced cost for the superintendent? *

Yes No

Housing Allowance *

Does the district provide a housing allowance to cover the cost of rent, utilities, or other housing expenses for the superintendent?

- Yes No

Annual amount of this allowance *

The amount reported is **less than \$1,000**. Please double-check that it is annual not monthly. If monthly, update the value, or check here to confirm it's annual. *

- It's annual

Health Insurance

Does the superintendent participate in the district's health insurance plan? *

*Note: We **do not** disclose the type of plan an individual chooses.*

- Yes No Yes, but not willing to provide health insurance details

Is this a TRS-ActiveCare plan (PPO or HMO)? *

- Yes No

Which type of coverage and plan does the superintendent have? *

Note: We do not disclose the type of plan an individual chooses.

	Superintendent only	Superintendent and spouse	Superintendent and children	Superintendent and family
Non-TRS ActiveCare plan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ActiveCare Primary	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ActiveCare HD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ActiveCare Primary+	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ActiveCare 2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Central and North Texas Scott & White	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
South Texas Blue Essentials	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
West Texas Blue Essentials	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How much is the **district's monthly** contribution for the superintendent's health insurance? *

Minimum is \$225 (include \$75 from state funds).

The amount reported is **greater than \$4,500**. Please double-check that it is monthly not annual.

If annual, update the value, or check here to confirm it's monthly. *

It's monthly

Does the district make a larger contribution for the superintendent's health insurance than what other full-time employees receive? *

(e.g., the district pays for coverage of the superintendent's dependents, or pays an additional amount regardless of coverage type)

Yes No

Health Insurance Comments

Other Insurance

Is the superintendent provided with a **different** life insurance policy than any policy provided to other employees? *

Yes No

What are the details of the life insurance policy? *

Type of policy

- Term Whole life

Annual cost to district

Policy face value

The amount reported is **less than \$80**. Please double-check that it is annual not monthly. If monthly, update the value, or check here to confirm it's annual. *

- It's annual

The policy face value reported is **less than \$75,000**. Please double-check that it is a higher amount than provided to other employees. Edit the Yes/No above, or check here to confirm it's different than any policy offered to other employees. *

- It's different than what other employees are offered

Is the superintendent provided with a different long-term disability policy than any policy provided to other employees? *

- Yes No

What are the details of the long-term disability policy? *

Annual cost to district

The annual cost reported is **less than \$200**. Please double-check that it is annual AND a different policy than provided to other employees.
Edit the Yes/No above, or check here to confirm it's annual and different than a policy offered to other employees. *

- It's annual and different than what other employees are offered

Additional Retirement Benefits

Teacher Retirement System of Texas (TRS) *

Does the district pay any part of the **superintendent's portion** of TRS contributions (in addition to the amount the district is responsible for)?

Yes No

Annual cost to the district

Does the district contribute to the cost of purchasing **additional TRS service credits** for the superintendent?

Yes No

Annual cost to the district

Non-TRS Retirement Contributions *

Does the district contribute to an investment account or annuity for the superintendent **in addition to** the Teacher Retirement System of Texas (TRS)?

Yes No

Annual cost to district

Years until fully vested

0 if vests immediately

The annual cost reported is less than **\$1,000**. Please double-check that it is annual not monthly.

If monthly, update the value, or check here to confirm it's annual. *

It's annual

Other Compensation

Does your district use any of the following superintendent compensation approaches?

Check all that apply.

- Guaranteed salary increase percentage
- Salary increases tied to teachers or other staff
- Payment for additional personal/vacation/consulting days
- Payment for unused vacation/sick days
- Payment for preventative care beyond typical wellness-check
- Long-term care insurance
- Other (write in)

Other Compensation Amounts

Please indicate any other financial incentives or allowances paid to the superintendent that were not mentioned in the survey. Provide the annual cost to the district.

If there are none, leave the fields blank.

Amount

Other Compensation 1

Other Compensation 2

Description

1

2

Please use this space to clarify or describe any other compensation or financial incentives paid to the superintendent.

Comments or suggestions for improving this survey

P.O. Box 400, Austin, Texas 78767-0400

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