

Superintendent Payment Disclosure Form

TEXAS EDUCATION AGENCY

County-District Number _____

Information Filed Pursuant to Texas Education Code (TEC) §11.201

School District Name (ISD) _____

Collection Authority: T.E.C. §11.201

Instructions: Request for compliance information is for severance agreements executed on or after September 1, 2001.

File a separate form for each former superintendent, if applicable.

The Commissioner's Rules concerning severance payment and any reduction amount is to be applied in accordance with 19 Texas Administrative Code §105.1021.

Part 1 Complete the following questions:

a. Former superintendent's name: _____

b. Date severance agreement was executed: _____

c. Annual salary per superintendent employment contract terms agreed upon prior to first day of service for last contract year of employment: _____

Please provide an itemized detail of total amount listed, i.e., the base salary, benefits, board minutes, contract amendments, school policies, etc., in Part 5 Supplemental Detail and any supporting documentation.

d. Aggregate payment amount of any salary and/or any other payment paid during last contract year of employment through date employment as superintendent ended: _____

Please provide an itemized detail of total amount listed, which also includes payments made on behalf of, e.g., membership fees, car lease, cell phone, etc., in Part 5 Supplemental Detail and any supporting documentation.

e. Aggregate payment amount of any salary and/or any other payment paid **after** employment as superintendent ended: _____

Please provide an itemized detail of total amount listed in Part 5 Supplemental Detail including any supporting documentation.

f. Date(s) of employment with district **after** the execution of severance agreement: _____ / _____
(Began) / (Ended, if applicable)

Part 2 Copies of Superintendent's Documents:

Superintendent document copies filed with this form.

- Indicate if copy of the **mandatory** superintendent employment contract is enclosed.
- Indicate if copy of the **mandatory** termination/severance agreement is enclosed.
- Indicate if copy of any agreement for employment, **after** employment as superintendent is enclosed.

Part 3 Complete this information:

_____	_____	_____	_____
Current Superintendent's Name	Date	email address	Signature

_____	_____	_____	_____
Current Board President's Name	Date	email address	Signature

_____	_____	_____	_____
District Contact Person's Name	Telephone	email address	Title

Part 4 Submit the Documentation

Please email this form and supporting documentation to SeverancePayment@tea.texas.gov

Part 5 Supplemental Detail

Part 1 line C - Itemized Detail	
Annual salary per superintendent employment contract terms agreed upon prior to first day of service for last contract year of employment.	
1. <u>Base salary</u>	
2. <u>Superintendent's TRS amount, if paid for by district</u>	
3. <u>Insurance paid by district (health, dental, life, etc.)</u>	
4. <u>Cell phone</u>	
5. <u>Car allowance</u>	
6. <u>Other paid benefit:</u>	
7. <u>Other paid benefit:</u>	
8. <u>Other paid benefit:</u>	
9. <u>Other paid benefit:</u>	
10. <u>Other paid benefit:</u>	
Total Annual Salary (Combine lines 1 through 10. Enter here and on Part 1 line C)	
Part 1 line D - Itemized Detail	
Aggregate payment amount of any salary and/or any other payment paid during the last contract year of employment through date employment as superintendent ended.	
1. <u>Base salary</u>	
2. <u>Superintendent's TRS amount, if paid for by district</u>	
3. <u>Insurance (health, dental, life, etc.)</u>	
4. <u>Cell phone</u>	
5. <u>Car allowance</u>	
6. <u>Other paid benefit:</u>	
7. <u>Other paid benefit:</u>	
8. <u>Other paid benefit:</u>	
9. <u>Other paid benefit:</u>	
10. <u>Other paid benefit:</u>	
Total Aggregate Payment Amount (Combine lines 1 through 10. Enter here and on Part 1 line D)	

Part 1 line E - Itemized Detail	
Aggregate payment amount of any salary and/or any other payment paid after employment as superintendent ended:	
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
Total Annual Salary (Combine lines 1 through 15. Enter here and on Part 1 line E)	

Part 1 line F - Employment with district after the execution of severance agreement

If the former superintendent was reassigned to another job or position, please provide:

- date and period of reassignment,
- details of duties and supporting documentation of work performed during reassignment,
- daily work schedule,
- were duties performed on or offsite, and
- total salary paid during the period of reassignment.