

State of Idaho
Department of Education
Idaho Basic Education Data System
Certification By Administrator of Record

**MUST BE COMPLETED AND RETURNED ONCE 2010 IBEDS DATA COLLECTION
IS COMPLETED (no later than December 15, 2009)**

DISTRICT/CHARTER NAME : _____

DISTRICT/CHARTER NAME: _____

SALARY NEGOTIATIONS:

Has your district finished salary negotiations?

Yes No

Note: If “no”, then IBEDS should be reported under the current contract salary schedule.

CERTIFICATE OF CORRECTNESS:

I certify that I have reviewed the 2009-2010 school year preliminary IBEDS reports dated November ____, 2009 and affirm the data submitted reflects the activities of the district/charter as of the last week in September and are in accordance with the laws, rules and regulations governing the IBEDS data collection procedure.

Any items to be considered for changes to these reports have been noted on the “Personnel Employment Report” and have been approved by me (initial each item and return that page to the Idaho Department of Education).

I affirm that the salaries and wages reported properly reflect the contract in effect as of December 15, 2009 and include all anticipated compensation to be paid each employee paid through the payroll system.

Superintendent/Charter Administrator

Title

Date

Submit this form by December 15th to:

State Department of Education
Public School Finance – IBEDS
P.O. Box 83720
Boise, ID 83720-0027