

Suffolk Western BOCES SLS

Annual Report for Library Systems - 2016 (School Library Systems 2016-2017)

1. General System Information

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local No

1.1	SEDCODE	589300000000
1.2	System Name	Suffolk Western BOCES School Library System
1.3	Beginning Reporting Year	07/01/2016
1.4	Ending Reporting Year	06/30/2017
1.5	Street Address	31 Lee Avenue
1.6	City	Wheatley Heights
1.7	Zip Code	11798
1.8	Four-Digit Zip Code Extension (enter N/A if unknown)	1837
1.9	Mailing Address	31 Lee Avenue
1.10	City	Wheatley Heights
1.11	Zip Code	11798
1.12	Four-Digit Zip Code Extension (enter N/A if unknown)	1837
1.13	Library System Telephone Number (enter 10 digits only and hit the Tab key)	(631) 595-6834
1.14	Fax Number (enter 10 digits only and hit the Tab key)	(631) 623-4916
1.15	System Home Page URL	http://www.wsboces.org/instructionsupport/school-library-system/
1.16	URL of the system's complete Plan of Service	http://www.wsboces.org/wp-content/uploads/2016-2021-Plan-of-Service.pdf
1.18	Area Chartered to Serve (square miles)	209
1.20	County	Suffolk
1.21	County (Counties) Served	Suffolk
1.22	School District	Half Hollow Hills

Please report information for the current system director (as of the date the report is being completed).

1.23	Title of System Director: (drop-down): Mr., Mrs., Ms., Ms. Miss, Dr.	
1.24	First Name of System Director	Sara M.
1.25	Last Name of System Director	Kardasz

1.28 - School Library System Director Administrative Certification: Indicate information about the certification currently held School Library System Director and the date of the certification. Write N/A for all that do not apply:

- a. School Administrator and
Supervisor Certificate (SAS) - N/A
Certification Date
- b. School Building Leader
(SBL) Certificate - Date of
Provisional Certification N/A

c.	School Building Leader (SBL) Certificate - Date of Professional Certification	N/A
d.	School District Leader (SDL) Certificate - Date of Provisional Certification	N/A
e.	School District Leader (SDL) Certificate - Date of Professional Certification	08/02/2017
f.	A Variance to Obtain Certification was Approved Through the Following Date	N/A
1.31	Telephone Number of the System Director, including area code and extension.	(631) 595-6834
1.32	E-Mail Address of the System Director	skardasz@wsboces.org
1.33	Fax Number of the System Director (enter 10 digits only and hit the Tab key)	(631) 623-4916
1.35	Name of Current SLS Director's Supervisor	Angelique Johnson-Dingle
1.36	Mailing Address	31 Lee Avenue
1.37	City	Wheatley Heights
1.38	Zip Code	11798
1.39	Four-Digit Zip Code Extension (enter N/A if unknown)	1837
1.40	Telephone Number (enter 10 digits only and hit the Tab key)	(631) 595-6815
1.41	E-Mail Address	ajohnson@wsboces.org
1.42	Name of BOCES/Big 5 Cities District Superintendent	Angelique Johnson-Dingle
1.43	Mailing Address	507 Deer Park Rd
1.44	City	Dix Hills
1.45	Zip Code	11746
1.46	Four-Digit Zip Code Extension (enter N/A if unknown)	9007
1.49	For the reporting year, has the system experienced any unusual circumstance(s) that affected the statistics and/or information reported (e.g. natural disaster, fire, closed for renovations, massive weeding of collection, etc.)? Indicate Y for Yes, N for N	N

2. Personnel Information

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local No

- 2.2 FTE (Full-Time Equivalent Calculation)
The number of hours per work week used to compute FTE for all budgeted professional positions 38.75
- 2.3 FTE (Full-Time Equivalent Calculation)
The number of hours per work week used to compute FTE for all other budgeted staff positions. 38.75

BUDGETED POSITIONS IN FULL-TIME EQUIVALENTS

(enter to two decimal places; enter decimal point)

- 2.6 School Library System
Director per CR 90.18 (a) (7) - Filled Position FTE 1
- 2.7 School Library System
Director per CR 90.18 (a) (7) - Vacant Position FTE 0
- 2.10 Librarians - Filled Position(s) FTE 0
- 2.11 Librarians - Vacant Position(s) FTE 0
- 2.14 **Total Certified Librarians - Filled Position(s) FTE (total questions 2.6 + 2.10)** 1.00
- 2.15 **Total Certified Librarians - Vacant Position(s) FTE (total questions 2.7 + 2.11)** 0.00
- 2.16 Total Other Professional Staff - Filled Position(s) FTE 0
- 2.17 Total Other Professional Staff - Vacant Position(s) FTE 0
- 2.18 Total Other Staff - Filled Position(s) FTE 0.5
- 2.19 Total Other Staff - Vacant Position(s) FTE 0
- 2.20 **Total Paid Staff - Filled Position(s) FTE (total questions 2.14 + 2.16 + 2.18)** 1.50
- 2.21 **Total Paid Staff - Vacant Position(s) FTE (total questions 2.15 + 2.17 + 2.19)** 0.00

SALARY INFORMATION

- 2.24 System Director FTE 1
- 2.25 System Director Current Annual Salary \$78,797

3. System Membership, Outlets and Governance

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local No

PUBLIC SERVICE OUTLETS

3.10	Number of member public school districts	18
3.11	Number of member non-public schools	7
3.12	Total number of members (Total 3.10 + 3.11)	25
3.13	Number of participating school library media centers	120
3.14	Number of school library system participants (buildings)	120
3.15	Main Library/System Headquarters	1

BOARD /COUNCIL MEETINGS

3.22	Total number of school library system council meetings held during reporting year	4
3.23	URL of the Minutes of the SLS Council's meetings for the period July 1, 2016 - June 30, 2017.	http://www.wsboces.org/category/sls-minutes/
3.24	Current number of <u>voting</u> positions on system board/council	12
3.25	Board/Council Selection - Enter Board/Council Selection Code (select one; drop-down). If O is selected, please use the State note to explain how members were named to the Board/Council.	O

SYSTEM BOARD/COUNCIL

School Library Systems - enter information for the period July 1, 2017, through June 30, 2018

President/Council Chair

3.26	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Dr.
3.27	First Name	Catherine
3.28	Last Name	Masrour
3.29	Institutional Affiliation	Smithtown School District
3.30	Professional Title	School Library Media Specialist
3.36	Term Expires - Month or N/A	June
3.37	Term Expires - Year (YYYY) or N/A	2020

Board/Council Member - complete one record for each Board/Council Member. For each vacant position, select "Vacant" in q1 and enter N/A in questions 2-10 of the repeating group.

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant Ms.
2. First Name Elizabeth
3. Last Name Aitken
4. Institutional Affiliation Northport-East Northport School District
5. Professional Title SLMS
6. Mailing Address 623 Ninth Ave
7. City East Northport
8. Zip Code (enter five digits only) 11731
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2018

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant Dr.
2. First Name Bea
3. Last Name Baaden
4. Institutional Affiliation Palmer School of Library and Info Science, LIU, CW Post
5. Professional Title Director, School Library Program
6. Mailing Address 720 Northern Blvd
7. City Brookville
8. Zip Code (enter five digits only) 11548
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2019

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant Ms.
2. First Name Carolyn
3. Last Name Burton-Gajda
4. Institutional Affiliation Commack School District
5. Professional Title District Lead Librarian
6. Mailing Address Vanderbilt Parkway
7. City Commack
8. Zip Code (enter five digits only) 11725
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2019

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Ms. Other (specify using the State note), Vacant
2. First Name Carol
3. Last Name Byrne
4. Institutional Affiliation Deer Park Public Library
5. Professional Title Reference Librarian
6. Mailing Address 171 Irish Lane
7. City Islilp Terrace
8. Zip Code (enter five digits only) 11752
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2018

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Ms. Other (specify using the State note), Vacant
2. First Name Dawn
3. Last Name Koziarz
4. Institutional Affiliation Copiague School District
5. Professional Title SLMS
6. Mailing Address 2650 Great Neck Rd
7. City Copiague
8. Zip Code (enter five digits only) 11726
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2020

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Ms. Other (specify using the State note), Vacant
2. First Name Linda
3. Last Name Lennon
4. Institutional Affiliation Half Hollow Hills School District
5. Professional Title SLMS
6. Mailing Address 375 Wolf Hill Rd
7. City Dix Hills
8. Zip Code (enter five digits only) 11746
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2018

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Ms. Other (specify using the State note), Vacant
2. First Name Jane
3. Last Name Herbst
4. Institutional Affiliation retired
5. Professional Title SLMS
6. Mailing Address 18 Bokel Road
7. City Ronkonkoma
8. Zip Code (enter five digits only) 11779
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2020

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Ms. Other (specify using the State note), Vacant
2. First Name Min
3. Last Name Liu
4. Institutional Affiliation Long Island Library Resources Council
5. Professional Title Asst. Director
6. Mailing Address 627 N. Sunrise Service Rd
7. City Bellport
8. Zip Code (enter five digits only) 11713
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2019

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Dr. Other (specify using the State note), Vacant
2. First Name Vincent
3. Last Name Livoti
4. Institutional Affiliation Palmer School of Library & Info Science, LIU, CW Post
5. Professional Title Asst. Professor
6. Mailing Address 720 Northern Blvd.
7. City Brookville
8. Zip Code (enter five digits only) 11548
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2018

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant Ms.
2. First Name Jill
3. Last Name Adler
4. Institutional Affiliation St. Anthony's High School
5. Professional Title Library Media Center Director
6. Mailing Address 275 Wolf Hill Road
7. City South Huntington
8. Zip Code (enter five digits only) 11732
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2019

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant Ms.
2. First Name Mary
3. Last Name Biener
4. Institutional Affiliation Babylon Jr/Sr High School
5. Professional Title School Library Media Specialist
6. Mailing Address 46 Marilynn Street
7. City East Islip
8. Zip Code (enter five digits only) 11730
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2019

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant Dr.
2. First Name Matthew
3. Last Name Covey
4. Institutional Affiliation Cold Spring Harbor Laboratory Library & Archives
5. Professional Title Science Informationist
6. Mailing Address 1 Bungtown Road
7. City Laurel Hollow
8. Zip Code (enter five digits only) 11724
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2019

5. System Services

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local No

TECHNOLOGY AND RESOURCE SHARING

UNION CATALOG OF RESOURCES

For this report, a union catalog is defined as a vehicle that can access member and / or non-member catalogs. It can be either print or online (virtual) format.

5.13 In what format(s) is the union catalog available? (Check all that apply)

- | | | |
|----|--------------------------|-----|
| a. | Print | No |
| b. | Disc | No |
| c. | Online (virtual catalog) | Yes |

5.14 How many libraries participate in (or submit records for) the union catalog? 63

5.15 Is the system's union catalog shared with any other library system(s)? (Enter Y for Yes, N for No) N

5.16 Number of titles in the system's union catalog 365,316

5.17 Number of holdings in the system's union catalog 934,426

5.18 Number of new titles added in the last year 32,522

5.19 Number of holdings added in the last year 118,947

5.20 If the union catalog is online (virtual catalog), indicate the features of the system's virtual catalog (check all that apply):

- | | | |
|----|-------------------------------------------------------------------------------------------------------|-----|
| a. | Non-member catalogs are included (if checked, please name non-member catalogs using the State note) | No |
| b. | Non-library catalogs are included (if checked, please name non-library catalogs using the State note) | No |
| c. | Patron-initiated ILL available and used through this catalog | Yes |

VISITS TO THE SYSTEM'S WEB SITE

5.24 Annual number of visits to the system's web site 1,112

SYSTEM INTERLIBRARY LOAN ACTIVITY

5.25 Total items provided (loaned) 951

5.26 Total items received (borrowed) 1,269

5.27 Total requests provided (loaned) unfilled 87

5.28 Total requests received (borrowed) unfilled 45

5.29 Total interlibrary loan activity
(total questions 5.25 through 2,352
5.28)

DELIVERY

5.31 Indicate delivery methods used by the system (check all that apply):

Note: For questions which include a choice of "Other", please add a State Note of explanation when "Other" is chosen. Also pl individual instructions for these questions for any further requirements.

a.	System courier (on the System's payroll)	No
b.	Other system's courier	No
c.	BOCES/Big 5 City courier	No
d.	Contracted service (paid by System - not on payroll)	No
e.	U.S. Mail	Yes
f.	Commercial carrier (e.g., UPS, DHL, etc.)	No
g.	Other (specify using the State note)	Yes

5.32 Number of stops (pick-up and delivery sites per week) 4

CONTINUING EDUCATION/STAFF DEVELOPMENT Workshops/Meetings/Training Sessions

Resource sharing (ILL, collection development, etc.)

5.33	Number of sessions	1
5.34	Number of participants	3
5.35	Number of contact hours	2

Technology

5.36	Number of sessions	5
5.37	Number of participants	44
5.38	Number of contact hours	12

Digitization

5.39	Number of sessions	0
5.40	Number of participants	0
5.41	Number of contact hours	0

Leadership

5.42	Number of sessions	1
5.43	Number of participants	70
5.44	Number of contact hours	5

Management & Supervisory

5.45	Number of sessions	0
5.46	Number of participants	0
5.47	Number of contact hours	0

Planning and Evaluation

5.48	Number of sessions	0
5.49	Number of participants	0
5.50	Number of contact hours	0

Awareness and Advocacy

5.51	Number of sessions	2
5.52	Number of participants	52
5.53	Number of contact hours	2

Trustee/Council Training

5.54	Number of sessions	0
5.55	Number of participants	0
5.56	Number of contact hours	0

Special Client Populations

5.57	Number of sessions	1
5.58	Number of participants	24
5.59	Number of contact hours	3

Children's Services/Elementary Grade Levels

5.60	Number of sessions	0
5.61	Number of participants	0
5.62	Number of contact hours	0

Young Adult Services/Middle and High School Grade Levels

5.63	Number of sessions	0
5.64	Number of participants	0
5.65	Number of contact hours	0

Mentoring

5.66	Number of sessions	1
5.67	Number of participants	3
5.68	Number of contact hours	2

Teaching & Learning

5.69	Number of sessions	4
5.70	Number of participants	66
5.71	Number of contact hours	12

E-Resources

5.72	Number of sessions	0
5.73	Number of participants	0
5.74	Number of contact hours	0

5.75 **Other:** Does the system provide other Workshops/Meetings/Training Sessions not listed above?
 Enter Y for Yes, N for No. If Yes, complete one record for each topic; if No, enter N/A for questions 1, 2, 3 and 4 of one repeating group.

1.	Topic	Long Island Regional Institute with numerous sessions to choose from
2.	Number of sessions	20
3.	Number of participants	76
4.	Number of Contact Hours	7

Grand Total Sessions

5.76	(total questions 5.33, 5.36, 5.39, 5.42, 5.45, 5.48, 5.51, 5.54, 5.57, 5.60, 5.63, 5.66, 5.69, 5.72 and total of question #2 of Repeating Group #5)	35
5.77	Grand Total Participants (total questions 5.34, 5.37, 5.40, 5.43, 5.46, 5.49, 5.52, 5.55, 5.58, 5.61, 5.64, 5.67, 5.70, 5.73 and total of question #3 of Repeating Group #5)	338
5.78	Grand Total of Contact Hours (total questions 5.35, 5.38, 5.41, 5.44, 5.47, 5.50, 5.53, 5.56, 5.59, 5.62, 5.65, 5.68, 5.71, 5.74 and total of question #4 of Repeating Group #5)	45.00

COORDINATED SERVICES

5.79 Indicate which services the system provides (check all that apply):

Note: For questions which include a choice of "Other", please add a State Note of explanation when "Other" is chosen. Also pl individual instructions for these questions for any further requirements.

a.	Coordinated purchase of print materials	Yes
b.	Coordinated purchase of non-print materials	Yes
c.	Negotiated pricing for licensed electronic collection purchases (not purchasing)	Yes
d.	Cataloging	No
e.	Materials processing	No
f.	Coordinated purchase of office supplies	No
g.	Coordinated computer services/purchases	No
h.	Virtual reference	No
i.	Other (describe using the State note)	No
j.	N/A	No

COSER SERVICES

5.80	Names of COSERS managed by the SLS Director	Automation and online resources
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CONSULTING AND TECHNICAL ASSISTANCE SERVICES

5.81	Number of contacts - Consulting with member libraries on grants, and state and federal funding	4,500
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5.82	Number of contacts - Consulting with member libraries on funding and governance	4,250
5.83	Number of contacts - Consulting with member libraries on automation and technology	30,000
5.84	Number of contacts - Consulting with member libraries on physical plant needs	0
5.85	Number of contacts - Consulting with member libraries on personnel and management issues	0
5.86	Number of contacts - Providing information to local, county, and state legislators and their staffs	0
5.87	Number of contacts - Providing system and member library information to the media	3,000
5.88	Number of contacts - Providing website development and maintenance for member libraries	3,000
5.89	Does the system provide other Consulting and Technical Assistance Services not listed above? Enter Y for Yes, N for No. If Yes, complete one record for each topic; if No, enter N/A for questions 1 and 2 of one repeating group.	Y

1.	Topic	Professional Development opportunities
2.	Number of contacts (all types)	10,000

5.90	Total Other Contacts (total of question #2 of Repeating Group #6)	10,000
5.91	Total Number of Contacts (total of questions 5.81 through 5.88 and 5.90)	54,750

REFERENCE SERVICES

5.92	Total Reference Transactions	0
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SERVICES TO SPECIAL CLIENTS (Direct and Contractual)

5.93 Indicate services the system provides to special clients (check all that apply):

a.	Services for patrons with disabilities	No
b.	Services for patrons who are educationally disadvantaged	No

e.	Services for patrons who are members of ethnic or minority groups in need of special library services	No
i.	Other	No
5.94	Number of member libraries with Job/Education Information Centers or collections	29
5.95	Does the system provide other special client services not listed above? If yes, complete one record for each service provided; if no, enter N/A in questions 1 and 2 of one repeating group.	N
1.	Service provided	N/A
2.	Number of facilities/institutions served	N/A
5.96	Does the system charge fees for any program or service? Enter Y for Yes; N for No. If yes, briefly describe using the text box below; if no, enter N/A in Question 5.97.	Y
5.97	Description of fees	There is a registration fee for those who attend the Long Island Regional Institute.

6. Operating Funds Receipts

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local Note field.

State Aid

6.32	Regional Bibliographic Data Bases (RBDB) Grant(s) from 3Rs	\$0
6.33	School Library Systems Operating Aid	\$111,627
6.34	School Library Systems Categorical Aid for Automation	\$11,163
6.35	School Library System Supplementary Operating Aid	\$48,703
6.36	Special Legislative Grants and Member Items	\$0
6.42	Does the system receive state funding from other sources? Enter Y for Yes, N for No. (Report Special Legislative Grants and Member Items on Q 6.36).	N

Complete one record for each grant. If the system does not receive other state aid, enter N/A on questions 1 and 2 of one repeating group.

1.	Funding Source	N/A
2.	Amount	N/A

- 6.43 **Total Other State Aid** (total question #2 of Repeating Group #9 above) \$0
- 6.44 **Total State Aid Receipts** (total questions 6.32 through 6.36, and question 6.43) \$171,493

FEDERAL AID

- 6.45 Library Services and Technology Act (LSTA) N/A
- 6.46 Does the system receive any other Federal Aid (specify Act and Title) e.g., NEH, NEA, etc.? Enter Y for Yes, N for No. N

Complete one record for each grant. If the system does not receive other federal aid, enter N/A on questions 1 and 2 of one rep group

1. Funding Source N/A
2. Amount N/A
- 6.47 **Total Other Federal Aid** (total questions #2 of Repeating Group #10) \$0
- 6.48 **Total Federal Aid** (total questions 6.45 and 6.47) \$0

CONTRACTS WITH LIBRARIES and/or LIBRARY SYSTEMS IN NEW YORK STATE

- 6.49 Does the system contract with libraries and/or library systems in New York State? Enter Y for Yes, N for No. N

Complete one record for each contract. If the system does not contract, enter N/A on questions 1, 2 and 3 of one repeating group

1. Contracting Agency N/A
2. Contracted Service N/A
3. Total Contract Amount N/A
- 6.50 **Total Contracts** (total question #3 of Repeating Group #11 above) \$0

COSER FUNDS

- 6.51 COSER Receipts \$3,940

MISCELLANEOUS RECEIPTS

- 6.57 Does the system have other miscellaneous receipts in categories not listed in questions 6.51 through 6.55? Enter Y for Yes, N for No. If Yes, enter source and amount in the State Note field. N

Complete one record for each income category. If the system does not have other miscellaneous receipts, enter N/A on question of one repeating group.

1. Receipt category N/A
2. Amount N/A
- 6.58 **Total Other Miscellaneous Receipts** (total question #2 of Repeating Group #12 above) \$0

6.59	Total Miscellaneous Receipts (total questions 6.51 and 6.58)	\$3,940
6.60	TOTAL OPERATING FUND RECEIPTS - Total State Aid, Total Federal Aid, Total Contracts, and Total Miscellaneous Receipts (total questions 6.44, 6.48 6.50, and 6.59)	\$175,433
6.66	TOTAL SLS ENDING BALANCE - OPERATING (as of July 1, 2016)	\$8,581
6.67	TOTAL SLS ENDING BALANCE - AUTOMATION (as of July 1, 2016)	\$1,425
6.68	GRAND TOTAL RECEIPTS, BUDGET LOANS, TRANSFERS, AND BALANCE/ROLLOVER (School Library Systems - total questions 6.60, 6.66 and 6.67 - must agree with question 7.83)	\$185,439

7. Operating Fund Disbursements

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local No

STAFF EXPENDITURES

Salaries

7.1	System Director and Librarians	\$78,797
7.2	Other Staff	\$29,058
7.3	Total Salary and Wages Expenditures (total questions 7.1 and 7.2)	\$107,855
7.4	Employee Benefits Expenditures	\$52,331
7.5	Total Staff Expenditures (total questions 7.3 and 7.4)	\$160,186

COLLECTION EXPENDITURES

7.6	Print Materials Expenditures	\$7,430
7.7	Electronic Materials Expenditures	\$4,347
7.8	Other Materials Expenditures	\$0
7.9	Total Collection Expenditures (total questions 7.6 through 7.8)	\$11,777

GRANTS TO MEMBER LIBRARIES

Cash Grants Paid From

7.15	Other State Aid/Grants (e.g., Special Legislative or Member Grants)	\$0
7.16	Federal Aid	\$0
7.17	Other cash grants paid from system funds	\$0
7.18	Total Cash Grants (total questions 7.15 through 7.17)	\$0
7.19	Book/Library Materials Grants	\$0
7.20	Other Non-Cash Grants	\$0
7.21	Total Grants to Member Libraries (total questions 7.18 through 7.20)	\$0

CAPITAL EXPENDITURES FROM OPERATING FUNDS

7.24	Computer Equipment	\$0
7.25	Furniture/Furnishings	\$0
7.27	Total Capital Expenditures from Operating Fund (total questions 7.24 through 7.25)	\$0

MISCELLANEOUS EXPENSES

7.37	Office and Library Supplies	\$271
7.38	Telecommunications	\$0
7.39	Binding Expenses	\$0
7.40	Postage and Freight	\$0
7.41	Publicity and Printing	\$0
7.42	Travel	\$1,767
7.43	Fees for Consultants and Professionals - Please include a State Note with the consultants' or vendors' names and a brief description of the service(s) provided.	\$1,123
7.44	Membership Dues - Please include a State Note listing Professional Organization Memberships for which dues are being paid.	\$1,854
7.45	Indirect Costs paid to BOCES or Big 5 Cities (same as Question 13.1.16)	\$2,015
7.46	Does the system have other miscellaneous expenses in categories not listed in questions 7.37 through 7.45? Enter Y for Yes, N for No. If Yes is answered, please add a State Note describing these Other Miscellaneous Expenses.	Y

Complete one record for each expense category. If the system does not have other miscellaneous expenses, enter N/A on quest of one repeating group.

1. Expense category meeting e

2.	Amount	\$1,308
7.47	Total Other Miscellaneous Expenses (total question #2 of Repeating Group #13 above)	\$1,308
7.48	Total Miscellaneous Expenses (total questions 7.37 through 7.45 and 7.47)	\$8,338

CONTRACTS WITH LIBRARIES and/or LIBRARY SYSTEMS IN NEW YORK STATE

7.49	Does the system contract with libraries and/or library systems in New York State? Enter Y for Yes, N for No.	N
------	-----------------------------------------------------------------------------------------------------------------	---

Complete one record for each contract. If the system does not contract, enter N/A on questions 1 through 3 of one repeating group.

1.	Contracting Agency (specify using State note)	N/A
2.	Contracted Service (specify using State note)	N/A
3.	Total Contract Amount	N/A
7.50	Total Contracts (total question #3 of Repeating Group #14 above)	\$0
7.56	TOTAL DISBURSEMENTS - Total Staff Expenditures, Total Collection Expenditures, Total Grants to Member Libraries, Total Capital Expenditures, Total Miscellaneous Expenses and Total Contracts (total questions 7.5, 7.9, 7.21, 7.27, 7.48, and 7.50)	\$180,301
7.62	TOTAL DISBURSEMENTS (total question 7.56)	\$180,301
7.82	TOTAL SLS Ending Balance (as of June 30, 2017)	\$5,023
7.83	GRAND TOTAL DISBURSEMENTS & ENDING BALANCE (total questions 7.62 and 7.82)	\$185,324

Complete one record for each financial account

1.	Name of bank or financial institution	N/A
2.	Amount of funds on deposit	N/A
7.87	Total Bank Balance (total question #2 of Repeating Group #15 above)	\$0

12. Projected Annual Budget For Library Systems
School Library Systems Budget for July 1, 2017 - June 30, 2018

- 12.1 Total Operating Fund Receipts (include COSER Funds, State Aid, Federal Aid, \$175,062 Contracts and Miscellaneous Receipts)
- 12.4 Total Ending Balance from the Previous Fiscal Year. \$5,023
- 12.5 **Grand Total Operating Fund Receipts, Budget Loans, Transfers and Ending Balance** \$180,085 (total questions 12.1 through 12.4)

PROJECTED OPERATING FUND - DISBURSEMENTS

- 12.6 Total Operating Fund Disbursements (include Staff Expenditures, Collection Expenditures, Grants to Member Libraries, Capital Expenditures from Operating Funds, Miscellaneous Expenses, Contracts with Libraries and Library Systems in New York State) \$180,085
- 12.8 Ending Balance in Operating Fund at the end of the current fiscal year (For School Library Systems, ending balance as of June 30, 2018) \$0
- 12.9 **Grand Total Operating Fund Disbursements and Ending Balance** (total questions 12.6 and 12.8) \$180,085

13. State Formula Aid Disbursements

SCHOOL LIBRARY SYSTEMS OPERATING AID AND SUPPLEMENTAL AID

Statutory Reference (Basic Aid): Education Law § 284
Commissioners Regulations 90.18

Statutory Reference (Supplemental): Education Law § 273 (12)
Commissioners Regulations 90.18

School Library Systems are reporting on disbursements for Operating Aid (Basic & Supplemental Aid)

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local No

13.1.1 **Professional Salaries:** Indicate total FTE and salaries for the system director and for each professional system employee one record for each employee.

- 1. Title Coordinator
- 2. Total Full-Time Equivalent (FTE) 1
- 3. Expenditure \$70,917
- 13.1.2 **Total Expenditure - Professional Salaries:** \$70,917

13.1.3 **Other Staff Salaries:** Indicate total FTE and salaries for all other system employees, include all support staff; complete for each employee.

- | | | |
|----|----------------------------------|--------------|
| 1. | Title | Clerk Typist |
| 2. | Total Full-Time Equivalent (FTE) | 0.5 |
| 3. | Expenditure | \$26,733 |

13.1.4 **Total Expenditure - Other Staff Salaries** \$26,733

13.1.5 **Employee Benefits:** Indicate the total expenditures for all system employee fringe benefits. \$49,079

13.1.6 **Purchased Services:** Did the system expend funds for purchased services? Enter Y for Yes, N for No. Y

If yes, complete one record for each applicable category; if no, enter N/A for questions 1, 2 and 3 of one repeating group.

- | | | |
|----|----------------------|------------------------------------------------|
| 1. | Expenditure Category | Consultant fees/professional fees/per diem |
| 2. | Provider of Services | Cold Spring Harbor Lab |
| 3. | Expenditure | \$155 |
| 1. | Expenditure Category | Library systems vendor contract for automation |
| 2. | Provider of Services | MediaFlex |
| 3. | Expenditure | \$4,100 |
| 1. | Expenditure Category | Consultant fees/professional fees/per diem |
| 2. | Provider of Services | Outdoor Environmental Ed Program |
| 3. | Expenditure | \$858 |
| 1. | Expenditure Category | Institutional membership |
| 2. | Provider of Services | various listed in State note |
| 3. | Expenditure | \$1,669 |
| 1. | Expenditure Category | Other (specify using the State note) |
| 2. | Provider of Services | various |
| 3. | Expenditure | \$400 |

13.1.7 **Total Expenditure - Purchased Services** \$7,182

13.1.8 **Supplies and Materials:** Did the system expend funds for supply items, postage, library materials, or equipment and furnishings with a unit cost less than \$5,000? Enter Y for Yes, N for No. Y

If yes, complete one record for each applicable category; if no, enter N/A for questions 1 and 2 of one repeating group.

- | | | |
|----|----------------------|------------------------------------------|
| 1. | Expenditure Category | Books and other print materials |
| 2. | Expenditure | \$7,336 |
| 1. | Expenditure Category | Other (specify using the State note) |
| 2. | Expenditure | \$1,518 |
| 1. | Expenditure Category | Non-print resources (electronic content) |
| 2. | Expenditure | \$247 |

13.1.9 **Total Expenditure - Supplies and Materials** \$9,101

13.1.10 **Travel Expenditures:** Did the system expend funds for travel? Enter Y for Yes, N for No. Y

If yes complete one record for each applicable category; if no enter N/A for questions 1 and 2 of one repeating group.

1. Type of Travel System staff
2. Expenditure \$485

13.1.11 **Total Expenditure - Travel** \$485

13.1.12 **Equipment and Furnishings:** Did the system expend funds for equipment and furnishings with a unit cost of \$5,000 or more and having a useful life of more than one year? Enter Y for Yes, N for No. N

If yes, complete one record for each applicable category; if no, enter N/A for questions 1, 2, 3, and 4 of one repeating group.

1. Type of item N/A
2. Quantity N/A
3. Unit Cost N/A
4. Expenditure N/A

13.1.13 **Total Expenditure - Equipment and Furnishings:** \$0

13.1.14 **Grants to Member Libraries** : Did the system expend funds for grants to member libraries? Enter Y for yes, N for no. N

If yes, complete one record for each grant; if no, enter N/A for questions 1,2, and 3 of one repeating group.

1. Recipient N/A
2. Allocation N/A
3. Project Description (no more than 300 words) N/A

13.1.15 **Total Expenditure - Grants to Member Libraries** \$0

Indirect Cost: Computed annually for the Big 5 Cities (New York City, Buffalo, Rochester, Syracuse, and Yonkers) and each the New York State Education Department for administrative costs charged to Operating Aid only. BOCES and Big 5 Cities m approved Department indirect cost rate (supplied by the New York State Library) when applying it to the school library system

13.1.16 **Total Indirect Cost** (same as Question 7.45) \$2,015

13.1.17 **Purchased Services with BOCES:** Did the system expend funds to purchase services from or cross-contract with a BOCES or a school library system other than the applicant agency? Enter Y for Yes, N for No. N

If yes, complete one record for each allowable expenditure; if no, enter N/A for questions 1, 2 and 3 of one repeating group.

1. Description of Services N/A

2.	Name of BOCES	N/A
3.	Expenditure	N/A
13.1.18	Total Expenditure - Purchased Services with BOCES	\$0
13.1.19	Total Expenditure (total 13.1.2, 13.1.4, 13.1.5, 13.1.7, 13.1.9, 13.1.11, 13.1.13, 13.1.15, 13.1.16, and 13.1.18)	\$165,512
13.1.20	Balance at the Opening of the Fiscal Year	
	NOTE: The opening balance must be the same as the closing balance of the previous year.	\$8,581
13.1.21	Total Allocation from 2016-2017 State Aid	\$160,330
13.1.22	Balance at the End of the 2016-2017 Fiscal Year.	\$3,377
13.1.23	Budget Narrative: Provide a brief narrative, no more than fifteen hundred (1500) words, describing the major activities carried out with these State Aid Funds.	Most of the money from Operating and Supplementary aid is used for salary and bene- one large purchase of award winning books to be delivered to the elementary libraries requested by the SLS Council. The elementary librarians were thrilled to receive them shipped each box to each library with no shipping fee. Other disbursements were made rollover money.

13. State Formula Aid Disbursements Cont.

SCHOOL LIBRARY SYSTEMS CATEGORICAL AID FOR AUTOMATION

Statutory Reference (Automation Aid): Education Law § 284 (1) (g)
Commissioners Regulations 90.18

School Library Systems are reporting on disbursements for their Automation Aid

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local No

13.2.1 **Professional Salaries:** Indicate total FTE and salaries for the system director and for each professional system employe one record for each employee.

1.	Title	Coordinator
2.	Total Full-Time Equivalent (FTE)	1
3.	Expenditure	\$3,940

13.2.2 **Total Expenditure - Professional Salaries:** \$3,940

13.2.3 **Other Staff Salaries:** Indicate total FTE and salaries for all other system employees; complete one record for each emp

1.	Title	Clerk Typist
2.	Total Full-Time Equivalent (FTE)	0.5
3.	Expenditure	\$2,325

13.2.4 **Total Expenditure - Other Staff Salaries** \$2,325
Employee Benefits:

13.2.5 Indicate the total expenditures for all system employee fringe benefits. \$3,252

13.2.6 **Purchased Services:** Does the system expend funds for purchased services? Enter Y for Yes, N for No. Y

If yes, complete one record for each applicable category; if no, enter N/A for questions 1, 2 and 3 of one repeating group.

1. Expenditure Category Consultant fees/professional fees/per diem

2. Provider of Services Cold Spring Harbor Laboratory

3. Expenditure \$110

1. Expenditure Category Institutional membership

2. Provider of Services NAMTC

3. Expenditure \$185

1. Expenditure Category Other (specify using the State note)

2. Provider of Services NYLA/SSL

3. Expenditure \$661

13.2.7 **Total Expenditure - Purchased Services** \$956

13.2.8 **Supplies and Materials:** Does the system expend funds for supply items, postage, library materials, or equipment and furnishings with a unit cost less than \$5,000? Enter Y for Yes, N for No. Y

If yes, complete one record for each applicable category; if no, enter N/A for questions 1, and 2 of one repeating group.

1. Expenditure Category Books and other print materials

2. Expenditure \$94

1. Expenditure Category Office/library supplies and postage

2. Expenditure \$61

13.2.9 **Total Expenditure - Supplies and Materials** \$155

13.2.10 **Travel Expenditures:** Did the system expend funds for travel? Enter Y for Yes, N for No. Y

If yes, complete one record for each applicable category; if no enter N/A for questions 1 and 2 of one repeating group.

1. Type of travel System staff

2. Expenditure \$221

13.2.11 **Total Expenditure - Travel** \$221

13.2.12 **Equipment and Furnishings:** Does the system expend funds for equipment and furnishings with a unit cost of \$5,000 or more and having a useful life of more than one year? Enter Y for Yes, N for No. N

If yes, complete one record for each type of item purchased; if no, enter N/A for questions 1, 2, 3, and 4 of one repeating group.

- | | | |
|----|--------------|-----|
| 1. | Type of item | N/A |
| 2. | Quantity | N/A |
| 3. | Unit Cost | N/A |
| 4. | Expenditure | N/A |

13.2.13 **Total Expenditure - Equipment and Furnishings** \$0

13.2.14 **Grants to Member Libraries:** Did the system expend funds for grants to member libraries? Enter Y for yes, N for no. N

If yes, complete one record for each grant; if no, enter N/A for questions 1, 2, and 3 of one repeating group.

- | | | |
|----|----------------------------------------------|-----|
| 1. | Recipient | N/A |
| 2. | Allocation | N/A |
| 3. | Project Description (no more than 300 words) | N/A |

13.2.15 **Total Expenditure - Grants to Member Libraries** \$0

13.2.16 **Purchased Services with BOCES:** Did the system expend funds to purchase services from or cross-contract with a BOCES or a school library system other than the applicant agency? Enter Y for Yes, N for No. N

If yes, complete one record for each allowable expenditure; if no, enter N/A for questions 1, 2 and 3 of one repeating group.

- | | | |
|----|-------------------------|-----|
| 1. | Description of Services | N/A |
| 2. | Name of BOCES | N/A |
| 3. | Expenditure | N/A |

13.2.17 **Total Expenditure - Purchased Services with BOCES** \$0

13.2.18 **Total Expenditure (total 13.2.2, 13.2.4, 13.2.5, 13.2.7, 13.2.9, 13.2.11, 13.2.13, 13.2.15, and 13.2.17)** \$10,849

13.2.19 **Balance at the Opening of the Fiscal Year**
NOTE: The opening balance must be the same as the closing balance of the previous year. \$1,425

13.2.20 **Total Allocation from 2016-2017 State Aid** \$11,163

13.2.21 **Balance at the End of the 2016 - 2017 Fiscal Year** \$3,071

Final Narrative:

- 13.2.22 Provide a brief narrative, no more than five hundred (500) words, describing the major activities carried out with these State Aid Funds. New Aid received for Categorical was used only for salaries and benefits. All other items paid for out of rollover funds.

14. Summary of Library System Accomplishments

Using the goals from Section 5 in the approved 2011-2016 System Plan of Service briefly describe the final results of each element for Year 4 (2015-2016)

- 14.1 Element 1: Resource Sharing - Results The SLS continues to urge the member libraries to upload their MARC records to the State Catalog. The total number participating at this time has increased from 54 to 63. The total number of titles and holdings have also increased. The SLS also purchased interactive titles from Rosen on Cyberbullying and Teen Cyberbullying. Access to these resources is available to all member libraries.
- 14.2 Element 2: Special Client Groups - Results The SLS makes available to member libraries resources and professional development to support their work with special client groups. In 2016-17 a PD program that focused on special education students - "Teaching for Diverse Learning Needs" was offered.
- 14.3 Element 3: Professional Development and Continuing Education - Results In 2016-17 the SLS provided the following professional development opportunities: Nassau BOCES Librarians Orientation; six professional circles with collegial sharing on topics of interlibrary liaison meetings that included a full day of PD; a regional institute in collaboration with ESBOCES and Nassau BOCES SLS; and 3 user groups with Follett.
- 14.4 Element 4: Consulting and Development Services - Results The SLS shares relevant information with the member librarians through email, meetings, and phone calls. Information shared is related to such topics as automation, professional development, technology, curriculum development, staffing, NYSED regulations, collection development database use, interlibrary loan, special populations, purchasing, advocacy topics important to school libraries.
- 14.5 Element 5: Coordinated Services - Results The SLS provides access to TeachingBooks.net for all member schools. A large number of online resources are available for purchase by member districts at discounted pricing, supporting library automation.
- 14.6 Element 6: Awareness and Advocacy - Results The SLS shares emails throughout the year with all member librarians to keep them informed of advocacy efforts going on in NY State. In addition, at the final meeting of the year, a list of the year and administrator of the year are recognized. We "Celebrate Our Successes" with a show.
- 14.7 Element 7: Communication among Member Libraries and Library Systems - Results The SLS continues to encourage all member librarians to be leaders in their buildings and districts. They are urged to participate in collegial circles, PD opportunities, meetings, committees, and conferences. These opportunities allow for sharing and relationship building. The SLS director does the same through participation in SLISA, and our local NYLA/S affiliate.
- 14.8 Element 8: Cooperative Efforts with Other Library Systems - Results The 2016-17 Regional Institute, offered in cooperation with ESBOCES and Nassau BOCES SLS's was attended by 257 people. 76 of them were from WSBOCES. There were 20 tables available throughout the day. Shannon McClintock Miller was the keynote speaker. 18 people supported the day.
- 14.9 Element 9: Other Goal(s) - Results The SLS continues to pursue the idea of creating a way to encourage SLMS to be leaders in their buildings. Discussions were held with the two other SLS directors in the region related to developing a regional, virtual mentoring program. The idea has strong support; however, work has not yet begun on this.

PARTICIPANT'S EVALUATION OF SYSTEM SERVICES

- 14.11 URL of System's Blank Evaluation Form <http://www.wsboces.org/wp-content/uploads/End-of-the-Year-Survey-for-2016-17-BL>
- 14.12 URL of the Tabulated Results of the System's Evaluation Form <http://www.wsboces.org/wp-content/uploads/End-of-the-Year-Survey-for-2016-17-RE>

15. Assurance and Contact Information

CONTACT INFORMATION

- 15.1 Contact name (person completing report) Sara M. Kardasz
- 15.2 Contact telephone number (enter 10 digits only and hit the Tab key) (631) 595-6834
- 15.3 Contact e-mail address skardasz@wsboces.org

ASSURANCE

- 15.4 The Library System operated under its approved Plan of Service in accordance with the provisions of Education Law and the Regulations of the Commissioner, and assures that this "Annual Report" was reviewed and accepted by the System Board/Council on (date - mm/dd/yyyy) 09/19/2017

APPROVAL (for New York State Library use only/not a required field)

- 15.5 The Library System's Annual Report was reviewed and approved by the New York State Library on (date - mm/dd/yyyy) 01/02/2018

Suggested Improvements

Library System Suffolk Western BOCES SLS

Name of Person Completing Form Sara M. Kardasz

Phone Number and Extension (enter area code, telephone number and extension only): 631-595-6834

Please share with us your suggestions for improving the *Annual Report*. Thank You! No suggestions at this time. Thank you.