

2011 Southeastern Museums Conference Salary & Benefits Survey Questions

Museum Characteristics

1. For the purpose of internal tracking only, please include the name of your institution. This information is kept confidential and is in no way reflected in the survey results.

2. Your name and title:

3. **Email address:** (When the survey is published we will be sending it via email. Museums that complete the survey will receive a copy of the published results via email.)

4. **Discipline**
- Art
 - History, including historic sites
 - Science, including technology and aquariums
 - Youth
 - Combination of disciplines
 - Other _____

5. **Affiliation**
- Private, 501(c)3
 - Private Trust, 509(a)
 - College or University
 - State or Local Government
 - Federal
 - Other _____

6. **State**
- Alabama
 - Arkansas
 - Florida
 - Georgia
 - Kentucky
 - Louisiana
 - Mississippi
 - North Carolina
 - South Carolina
 - Tennessee
 - Virginia
 - West Virginia
 - Puerto Rico
 - U.S. Virgin Islands
- Southeastern Museums only*

7. **Location**
- Urban
 - Suburban - within commuting distance to an urban center
 - Rural, including small towns

8. **Current Annual Operating Budget**
- | | |
|---|--|
| <input type="checkbox"/> \$0 to 50,000 | <input type="checkbox"/> \$500,001 to 1,000,000 |
| <input type="checkbox"/> \$50,001 to 100,000 | <input type="checkbox"/> \$1,000,001 to 3,000,000 |
| <input type="checkbox"/> \$100,001 to 250,000 | <input type="checkbox"/> \$3,000,001 to 10,000,000 |
| <input type="checkbox"/> \$250,001 to 500,000 | <input type="checkbox"/> \$10,000,001 or over |

9. Does your organization have any paid staff? (full or part time)

Yes No

10. What was the average salary increase at your museum in each of the last three fiscal years?

FY 2009 _____ % FY 2010 _____ % FY 2011 _____ %

11. How many hours are in your official work week?

35 37.5 40 Other _____ [please specify]

12. What is your total salary budget in the current fiscal year? Salaries \$ _____

Fringe benefits including FICA, Medicare and workers compensation \$ _____

TOTAL \$ _____

13. What proportion of your annual operating budget is spent on salaries? _____%

(Please include all fringe benefits such as FICA, Medicare, and workers compensation)

Workforce Size and Composition

1. How many full time regular employees (or FTE's) did your museum employ on:

December 31, 2008 _____ December 31, 2009 _____ December 31, 2010 _____

(Museums with seasonal opening schedules can call the SEMC office for advice with this question.

To convert part time workers to full time equivalents divide the number of hours worked by all part time employees each week by the number of hours in the full time workweek. Example: the work week is 40 hours. Two employees each work 30 hours per week. 30 + 30 = 60, divided by 40 = 1.5. These two part time employees together are 1.5 FTE. That number would be added to the number of full time employees to get total full time equivalents.

2. If your museum has added positions since 2008, please identify the single most important reason with two check marks and other contributing reasons with one check mark.

- Grant funds
- Increases in operating budget
- Special appropriation from other funds / line items
- Eliminating other positions

3. If your museum has reduced its workforce since 2008, please identify the single most important reason with two check marks and other contributing reasons with one check mark.

- Cutting overall budget because of reduced revenues or increased costs
- Grant funding expired
- Other non-grant funded project completed
- Program eliminated for non-budgetary reasons
- Using consultant/s to cover previous staff position/s
- Other _____

Salary Information

Please refer to the directions and the enclosed list of job descriptions for this section.

POSITION	Gender M/F	Age	Full or Part-Time F/P	If Part-Time # of hours in work week	Gross Annual Salary as of 12/31/2010	Highest Academic Degree	Years in present position	Volunteer
Director/CEO/ President								
Vice-President/Dep Dir/Assoc or Asst. Dir Admin/ Operations								
Dep/Assoc Dir Program								
CFO/Controller								
Business Manager								
Human Resources Director								
Dir/Mngr of Info Services & Technology								
Info Services & Technology B								
Admin. Asst to Director or Dept/Div Head								
Office Manager								
Chief of Security								
Facility Director								
Archivist								
Curator A: Chief Curator								
Curator B: Senior Curator								
Curator C: Assistant Curator								
Curatorial Asst.								
Registrar A/ Collections Manager								

POSITION	Gender M/F	Age	Full or Part-Time F/P	If Part-Time # of hours in work week	Gross Annual Salary as of 12/31/2010	Highest Academic Degree	Years in present position	Volunteer
Registrar B/Assistant Registrar								
Conservator A								
Conservator B								
Head Librarian								
Librarian Assistant								
Educator A/ Director of Education								
Educator B/ Assistant Educator								
Education Assistant								
Public Programs Manager/Outreach Coordinator								
Visitor Services Manager								
Volunteer Coordinator								
Exhibition Designer/ Chief of Exhibitions								
Coord. of Exhibitions								
Technician/ Preparator								
Vice-President/ Director of External Affairs								
Dir. of Marketing								
Development A: Vice-President/ Director of Devel.								
Development B								
Major Gifts Officer								

POSITION	Gender M/F	Age	Full or Part-Time (F/P)	If Part-Time # hrs per week	Gross Annual Salary as of 12/31/2010	Highest Academic Degree	Years in present position	Volunteer
Grants Manager								
Public Relations A Director of PR								
Public Relations B								
Membership A/ Dir. of Memb.								
Membership B								
Director of Publications/Editor								
Museum Store Manager								
Functions Manager (Rentals/Special Events)								
Social Media Manager								
Web Manager								
Graphic Designer								

Additional lines for multiple employees in defined positions. Please **do not** list *other* job titles here.

Hourly Employees

	Hourly Wage Range	Average Number Employed	Hours Worked in Average Work Week
Bookkeeper			
Docent/Interpreter/Guide			
Functions Manager (Rentals)			
General Buildings Maintenance			
Grant Writer			
Guard			
Housekeeper			
Office Manager			
Office Support			
Program Assistant*			
Store Clerk			
Teacher			
Visitor Services/ Admissions			

* May assist with any/all aspects of the museum including: administration, education, collections, exhibits, etc.

Full-Time Employee Benefits

Questions are about **full-time regular** employees.

1. Vacation and Sick Leave

1a. How many paid holidays do you offer as a benefit? _____ Days

1b. Does your museum lump vacation and sick leave together for a total of "annual leave days"? Yes No

If yes, please complete the vacation/annual leave questions 1c, 1d, only 1e ONLY.

1c. Vacation/Annual leave (including personal days)

How much paid vacation does an employee receive:

	1 week	2 weeks	3 weeks	4 weeks	>4 weeks
1st Year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5th Year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10+ Years	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1d. How much unused vacation/annual leave can be carried over from year to year?

- | | |
|------------------------------------|-------------------------------------|
| <input type="checkbox"/> None | <input type="checkbox"/> 11-15 days |
| <input type="checkbox"/> 1-5 days | <input type="checkbox"/> 16-20 days |
| <input type="checkbox"/> 6-10 days | <input type="checkbox"/> No policy |

1e. Is unused paid vacation/annual leave paid out at separation? Yes No

If so, what percentage? _____%

1f. How much sick leave does a full time employee earn?

- | | |
|---|--|
| <input type="checkbox"/> none | <input type="checkbox"/> 11-15 days/year |
| <input type="checkbox"/> 1-5 days/year | <input type="checkbox"/> 16-20 days/year |
| <input type="checkbox"/> 6-10 days/year | <input type="checkbox"/> >20 days/year |

1g. How much unused sick leave can be carried over from year to year?

- | | |
|------------------------------------|--|
| <input type="checkbox"/> None | <input type="checkbox"/> 11-15 days |
| <input type="checkbox"/> 1-5 days | <input type="checkbox"/> 16-20 days |
| <input type="checkbox"/> 6-10 days | <input type="checkbox"/> >20 days, limited to _____ days |
| <input type="checkbox"/> No limit | |

1h. Is unused sick leave paid out at separation? Yes No

If so, what percentage? _____%

2. Health Care Coverage, Insurance, and Other Benefits

2a. What benefits are offered and how are they paid?

If benefits packages differ between employees, please answer for the majority of full time employees.

	Not Offered	Museum pays 100%	Museum pays <100%
Individual health insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family health insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dental insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Long-term disability insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Short-term disability insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Life insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accidental Death & Dismemberment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexible spending accounts			
a) Dependent Care Account	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Medical Care Account	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2b. Other benefits. Check all that your museum offers.

- | | |
|---|--|
| <input type="checkbox"/> Paid sabbatical | <input type="checkbox"/> Flexible working hours |
| <input type="checkbox"/> Release time (paid) for courses | <input type="checkbox"/> Home Office/Telecommuting |
| <input type="checkbox"/> Tuition reimbursement | <input type="checkbox"/> On Site Daycare |
| <input type="checkbox"/> Professional memberships paid | <input type="checkbox"/> Internal Museum Discounts (store etc.) discount % _____ |
| <input type="checkbox"/> Professional development fees paid | |

3. Retirement Programs

3a. Does your museum offer a retirement plan?

- Yes
 No

3b. Does your museum contribute to it?

- Yes
 No

3c. What are the approximate assets of your museum's retirement plan? _____

4. Changes Since 2009

Have you changed Full Time benefits in the last two years? If so, how? Check all that apply

	Medical	Dental	Retirement	Other - please specify
Added New Benefits				
Increased Contributions				
Decreased Contributions				
Eliminated Benefits				
Changed policies and/or providers with no reduction in benefits				
Changed policies and/or providers with reduction in benefits				
Switched to "flexible" Cafeteria benefits plan				

Part-Time Employee Benefits

★ Questions are about benefits for **part-time regular** employees. Because practices vary widely, please attach an explanation of the museum's policy if these questions do not adequately represent your program.

1. Eligibility

1a. Does your institution provide any benefits other than those mandated by law (FICA and Medicare, workers' compensation, and unemployment insurance) for part-time employees?

Yes No (If no, please skip to questions Part 8.)

1b. How many hours per week must a part-time employee work to qualify for the benefits?

_____ hours

2. Benefits

What benefits do you offer to your part-time employees? (check all that apply)

- | | |
|--|--------------------------|
| Vacation | <input type="checkbox"/> |
| Sick Leave | <input type="checkbox"/> |
| Paid holidays | <input type="checkbox"/> |
| Individual health insurance | <input type="checkbox"/> |
| Family health insurance (check "not offered" if organization only pays for employee) | <input type="checkbox"/> |
| Dental insurance | <input type="checkbox"/> |
| Long-term disability insurance | <input type="checkbox"/> |
| Short-term disability insurance | <input type="checkbox"/> |
| Life insurance | <input type="checkbox"/> |
| Flexible spending accounts | |
| a) Dependent Care Account | <input type="checkbox"/> |
| b) Medical Care Account | <input type="checkbox"/> |
| Accidental Death & Dismemberment | <input type="checkbox"/> |
| Retirement/Pension Plan | <input type="checkbox"/> |
| Internal Museum Discounts (store etc.) | <input type="checkbox"/> |
| Other _____ | |

General Information

1. Does your institution have a published personnel policy/handbook? Yes No

SEMC intends to build a library of museum personnel policies/handbooks which are available for loan to member museums. If you have a policy you would like to share, please send an electronic copy to SEMC (sperry@semcdirect.net) so we can make it available to other museums. If you would like to borrow any of these policies - please call the office at 404-814-2048 for details.

1. Have you used previous SEMC salary survey publications? Yes No

2. Please select your primary use of this survey.

- To set salaries of new employees
- To review the salaries of existing employees
- To plan for adding staff
- To gauge how we compare to other museums
- To help advise people considering museum work
- To negotiate my own salary
- Other _____

3. Are there positions not represented in Parts 3 and 4 which we might have surveyed?

4. Are there other salary questions we might have asked?

5. Other comments?

Please use an additional sheet of paper if you wish.

***Thank you for completing the 2011 Salary & Benefits Survey!
Your input is a great service to the museum community.
You will receive a free copy of the survey upon its completion.***