

DOE Teacher Compensation File Layout

File to be uploaded must be in comma delimited format with a .CSV file extension and no header row

Field	Maximum Length	Explanation and Examples	
Fiscal Year	4	Fiscal year of data submission ex. 2018	Required
District Number	5	EX. 02001, 50003, 23002, 05201	Required
Last Name	60		Required
First Name	60		Required
SSN	9	numeric characters only; no dashes	Required
FTE	4	maximum total 4 positions; 2 decimals	Required
Contract Salary	7	maximum total 7 positions; no decimals	Required
Total Benefit Cost	7	maximum total 7 positions; no decimals	Required

Example File Record

2018	06007	Jones	John	000123333	1.00	40000	10000
2018	06007	Smith	Jack	444556666	0.75	30000	7500
2018	06007	Doe	Jane	777889999	0.50	20000	5000

CONTACT INFORMATION:

BOBBI LEIFERMAN (605) 773-5407 Bobbi.Leiferman@state.sd.us

SUSAN WOODMANSEY (605) 773-4748 Susan.Woodmansey@state.sd.us