

Contract for Service Form

Rock Island-Milan School District 41

VENDOR NAME: CWK Network, Inc **EMAIL:** accounting@cwknetwork.com

ADDRESS: 6849 Peachtree Dunwoody Rd., Bldg 4-150
Atlanta, GA 30328

DATES OF SERVICE TO BE COMPLETED: January 1, 2025 – December 31, 2025

SCHOOL DISTRICT CONTACT: Stacey Golz

COMPENSATION: \$ 105,635

DESCRIPTION OF DUTIES:

Conduct the Year 3 curriculum, training, and meeting activities of the U.S. Dept. of Education EIR Grant award, as stated in the 12/10/24 board memo. (attached)
Participate in various planning meetings (January - December 2025)
Participate (consult) on refinement of HATC SEL/PBL Curriculum with RIMSD (Jan-June 2025)
Participate (consult) on training of teachers/staff on HATC SEL Curriculum and PBL - June-July 2025
Participate on creation of Guidebooks and the Annual Reports - January - December 2025)
Participate in quarterly coaching and requested support to teachers for HATC SEL/PBL Curriculum Implementation (January- December 2025)
CWK will be reimbursed through ACH on a bi-monthly or monthly schedule. CWK will provide invoices to RIMSD. RIMSD will ensure all items on the invoice meet grant approval.

Faith's Law. Contractor additionally certifies that prior to sending any employee or contractor/subcontractor to the premises, Contractor has complied with all employment history review and other obligations of 105 ILCS 5/22-94. Upon request of the School District, Contractor agrees to promptly disclose all records, information and determinations related to Section 22-94 employment history review for each of its employees or independent contractors.

Is this a Subscription/Software: Yes or No

If yes, this is an internal form that does not need to be sent to the vendor.

Subscription/Software Name: _____ **Website:** _____

Subscription/Software Start Date: _____ **End Date:** _____

SOPPA Approved: Yes or No

School Board President or Superintendent **Date**

Requesting School: RIMSD #41/RIHS

Budget Code: 1-5-100-091-3000-3140-0

Signature of Vendor: stacey DeWitt **Date:** January 3, 2024

Signature of Requestor: _____ **Date:** _____

Signature of Budget Administrator: _____ **Date:** _____