

North Slope Borough School District P.O. Box 169, Utqiagvik, AK 99723

Memorandum of Agreement

(An MOA for more than \$10,000.00 must be approved by the School Board prior to start of contract. In a fiscal year MOA to the same contractor totaling more than \$10,000.00 must be approved by the School board prior to start of the contract).

Contractor:	DJZ, LL	C (Donald Z	anoff) MOA	Control #		
Address:	105 Sout	h 5th Street	Living	gston	MT	59047
907 406	Street or 852-3768 223-6521	dzan	City off@yahoo.com	ni, atangéragi sa stant . Ak Aksaragasa	State	Zip
Area Code	Phone #	E-ma	il Address			
Federal ID#	alala Lap	Or Soc. See	c. #:	Alaska Business I	License #	972976
July 1, 2020 Start Date:	202	ne 30, 21 I Date:	□W-9 Attached	□W-9 St Previous		
(mmddyy)	(mı	nddyy)				
has being provided his accordance being g	Penduzi	evaluation Design ap accommod Provide paraprofes individual Provide of developme	re for student(s) with space for student(s) to the district propriate speech/language dations based on student speech/language serves ionals thru on-site and ized speech technology on-site and distance seent, and implementation the Student Services (as the Services (as the Student Services (as the Student Services (as the Se	in a timely manrage goal, objective t's need(s). ices and considered distance technologies are such as iPad Appropriate to the support services in the service	ner. es, progr ultation nology. A ps. with ev	to teachers and Assist in setting up valuation, program
		successful Participate pre-assess meetings, Complete per studer	the Student Services of ly implement distance; e, via on-site or distance ment planning, 90-day and ESER/IEP meeting quarterly contact sheet at, quarterly progress re-	services. ce, federally mar ransition, initi gs, as needed. s, parent contact eports and other	ndated m al evalua logs, site	eetings such as the ation, re-evaluation visit/contact report ts as requested and
gram weight		Transfer s thru the di Complete	opy to the District thru speech/language assess strict supported SPED COSF (Child Outco entering or exiting SPE	ment data or int web-based systen ome Summary I	formation n. Form) fo	n to the ESER/IEP or "SI" pre-school
		Student Se	contact with case man ervices, as appropriate. confidentiality of stude	Kiriyaxyi 54(† V		

	Board Policy, state and federal laws
	Maintain contact with parents, related service staff, and Director of Student
	Services, as appropriate.
	Coordinate with-school staff-the dates of travel to NSBSD schools/sites to
	ensure all the necessary student evaluations are completed on time and
	services to students are provided as outlined in the IEP. Submit the travel
	schedule to the office of Student Service at least 4 weeks in advance.
	Provide NSBSD detailed invoices outlining days worked by date reflecting
	office, distance, and on-site support.
	Provide schedule, training, feedback, and lesson plans to Barrow-wide speech
	aid.
	As appropriate, assist with the selection, training, lesson development, and
	feedback to the student and special education teacher on-going professional
	development (OJT student, Paraprofessional, and SPED Teacher).
	Assist in the development of a speech template for outlining student
	responsibilities including, but not limited to, materials needed, technology set-
	up, role during activity/lesson, documentation, etc.
	Maintain confidentiality of student(s) and NSBSD as per state and federal
	laws.
During the ESY period,	Provide direct services to students in Barrow as outlined in the respective
if students qualify.	student's Extended School Year IEP.
Contractor Agrees To:	
Contractor Agrees 10.	Assist with the coordination of ESY programs in the Utqiagvik area (pre-K
	thru 12)
	Provide NSBSD detailed invoices outlining days worked by date reflecting
	office, distance, and on-site support.
	Keep records of student's attendance and progress during the ESY period and
	provide a summary report to the office of the Director of Students Services.
	Provide or perform any other such services from time to time necessary as an
	auxiliary part of providing the services listed above during the ESY period.
District Contract Person:	Lori Roth Phone #: 907-852-9651 Ext:
Email Address:	Lori.Roth@nsbsd.org Fax:
Linan Address.	Lot i. Roth with both of a A.
District Agrees To:	Paimburga CONTRACTOR for avenages directly and necessarily incurred in
District Agrees 10.	Reimburse CONTRACTOR for expenses directly and necessarily incurred in
	relation to the performance of service under this Agreement upon approval of
	the Director of Students Services. Travel expenses will include the cost
	incurred by the CONTRACTOR to travel from Utqiagvik, Alaska to
*** *** *** *** *** *** *** *** *** **	Wainwright and Atqasuk, Alaska. Hotel fees accrued during travel must be
	pre-approved by Director of Student Services on an individual basis.
	Provide 2 tickets from Bozeman, MT to Utqiagvik, Alaska. NSBSD reserves
	the right to purchase or use airline miles.
	Travel expenses not to exceed \$7,000.00. Any change fee incurred that is not
	made at the direction or request of the District shall be at the expense of the
	Contractor.
	Provide lodging in Barrow and assigned NSBSD villages.
	Pay the contractor \$700 per day for up to 190 days of professional services
	(up to 170 days based on the Board-approved district calendar for FY21
	Tup to 1/0 days based on the board-approved district calcular for F121

	•	needed, based on studen Dand ten (10) in May/Jun		, .
Payment Terms:	Net 30 days upor	receipt and approval of Co	ontractor inv	oice.
Enter Account Code as	Account #:	(1)285.200.220.000.410 (2)100.200.220.000.410	Amount	Up to 133,000.00
MOA Not to Exceed:	\$ 140,000.00 (including travel expenses)	Budget Authority Approx	Total: val:	Up to \$ 133,000.00

A – GENERAL INFORMATION

- All associated costs, not limited to fees and reimbursable, must be included in the MOA. All MOAs for more than \$10,000 require prior School Board approval before Contractor provides any service.
- 2. The account to be charged must be determined and approved by the individual with budget authority prior to submission of the MOA to the Business Manager.
- 3. Prior to the starting date of the contracted services and/or activities, the Contractor and the NSBSD must sign the MOA. The Contractor is not to be given a notice to proceed unless all the appropriate parties have signed the MOA.
- 4. The Contact Person will be responsible for obtaining the contractor's signature and submitting the original MOA to the Business Manager.
- 5. The Contact Person must approve for payment all contract invoices and receipt documentation prior to submission for payment to the Business Manager.
- 6. When the MOA involves travel paid by the NSBSD; a CTR (Contracted Travel Requisition) must accompany any invoice.
- 7. MOAs cannot be used for NSBSD employees.
- 8. Any NSBSD employee who authorizes services prior to the required approvals may be subject to disciplinary actions up to and including termination. (BP 4118 and 4218)

B – Contractor Responsibilities

- 1. Check the MOA for contents and completeness. If the terms are agreeable, sign the agreement and return to the individual named has the Contact Person.
- 2. In accordance with the payment terms set forth on page 1, the Contractor shall submit an invoice with the appropriate documentation (copies of airline tickets, hotel bills, etc.) to the Contact Person for approval of payment. This MOA Control #: must be on the invoice.
- 3. As a condition of performance, the Contractor must pay all federal, state, and local taxes incurred by the Contractor.
- 4. A W-9 must be on file with the NSBSD Business Office or submitted with this MOA. No W-9, backup withholding of Federal taxes will be withheld per the present required presently 29%.
- 5. The Contractor must provide proof of any liability insurance coverage required on page 1 of this MOA.
- 6. To the extent allowed by law, the Contractor shall indemnify, defend, and hold the NSBSD harmless from any liability resulting from or arising out of the acts of the Contractor in the performance of this MOA.
- 7. This contract may be terminated by either party with a 30 day written notice.

I HEREBY ACCEPT THIS MOA AND THE CONDITIONS/PROVISIONS CONTAINED HEREIN.

performed. The ADDENDUM FORM must be approved by all parties.											
Busines	ss Manager			Busii	ness <u>Ma</u>	nager's Signatu	ıre	Da	te (mı	mddyy)	-
Superintendent, NSBSD			Superintendent's Signature				Da	Date (mmddyy)			
Contractor			Cont	Contractor's Signature							
outing:	п В	iz Mger.	_	Supt.		Contractor	_	Contact Person	_	Admin. Srvs. D	ept.
h/sh/exe	ecutive adn	nin/MOA/MO	A templa	ate 2018-2	2019						
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Business Manager	Business Manager's Signature	Date (mmddyy)	
Superintendent, NSBSD ONa W Zand Contractor	Superintendent's Signature Contractor's Signature	Date (mmddyy) 3/27/2020 Date (mmddyy)	
Routing: Biz Mger. h/sh/executive admin/MOA/MOA temp		ntact Person Admin. Srvs. Dept.	