## **Browning Public Schools**

## **Board Agenda Request**

Meeting to Be Held: August 30, 2023



| Recognit                      | tion: Students   | Staff   | Parents  |  |  |
|-------------------------------|--|---|--|--|--|
| Information: Building Report  |  | Old Business  | Superintendent's Report  |  |  |
|                               |  |   |  |  |  |
| Action:                       | Resignation  | Hiring  | Contract Service Agreements  |  |  |
|                               | Travel Out-of-State  | Travel In State   | Approvals  |  |  |
|                               | Termination  | Legal Matters   | Other:   |  |  |
|                               | This action request pertains t   | o Elementary (only)   | High School/District Wide  |  |  |
| Date:                         | August 22, 2023  |   |  |  |  |
| То:                           | Corrina Guardipee-Hall Superintendent  From: Rebecca Rappold Director of CIA |   |  |  |  |
| Subject:                      | CSA: Mentor Program Fac  | ilitator 2023-2024 SY   |  |  |  |
| Facilitato the comm classroom | nunity mentors and provide su  | ion of community mentoring pport for new teacher. The nt, and emotional support | ing program. Retired educators are ey will support new teachers in when/if needed. They work closely |  |  |
| Financia                      | al Impact: up to \$5000.00   |   |  |  |  |
| Funding                       | Source (Budget/grant, etc.):   | 115.90.494.1700.150.234   |  |  |  |
| Attachm                       | nent(s): CSA   |   |  |  |  |
| Approva                       | al: Superintendent's Office/Fi   | nance/Personnel as applic   | able (Initial)   |  |  |
| Commer                        | nts:   |   |  |  |  |
| Board A                       | ction: N/A (Info)  | Approved Denie  | rd Tabled to:  |  |  |

## Browning Public Schools

## CONTRACT SERVICE AGREEMENT

(406) 338-2715 • (406) 338-2708

**Board Approval:** 8/30/23

| Contractor  | Colleen Wilson  | Phon                   | e: <u>336-2850</u>   |                          |           |  |  |
|---|---|------------------------|--|--------------------------|-----------|--|--|
|   | PO Box 836  | Cut Bank,              | MT   | 59427                    |           |  |  |
| P.O.  | Box or Street Address   | City                   | State  | Zip                      |           |  |  |
| support for timesheets a                          | new teachers and mentoring nd documenting data for the neweekly timesheets.                         | staff as well as wo    | rking with the   | building administrators, | submittin |  |  |
| Contracted  | Dates: August 10, 2023- May   | 31, 2024               |  |                          |           |  |  |
| Rate per yea                                      | nr: \$25.00 per hour x (up to) 20   | 00 hours               |  | = \$5,000.00             |           |  |  |
| Per Diem/pe                                       | er day:# of Da  | ys                     |  | =                        |           |  |  |
| Mileage:  | miles @per mile   |                        |  | =                        |           |  |  |
| Other costs                                       | (explain): Not to exceed total  | \$ amount              |  | =                        |           |  |  |
|   |   | Total F                | Project Cost   | = \$5000.00              |           |  |  |
| Contract to be paid from: 115.90.494.1700.150.234 |   | En                     | Independent Contractor:  Submit invoice on completion Other  Employee:  Submit timesheet through payroll |                          |           |  |  |
| Schools for                                       | erms and conditions constitute<br>the contractor to render servic<br>problems, this agreement shall | es, as indicated. In t | he event of non  |                          |           |  |  |
| Contractor's Signature                            |   | Princ                  | Principal/Supervisor   |                          |           |  |  |
|   | N/A   |                        |  |                          |           |  |  |
| Federal ID Number/EIN                             |   | Supe                   | rintendent   |                          |           |  |  |
|   | dent Contractor must provide<br>sign an Independent Contrac   | <u> </u>               |  |                          |           |  |  |

Worker's Compensation Insurance and Unemployment Insurance for employees.

White - Contractor

Date: August 22, 2023

**Yellow – Business Office**