# SOUTH SAN ANTONIO INDEPENDENT SCHOOL DISTRICT

## Agenda Item Summary

Meeting Date: November 16, 2026

Agenda Section: Consent

Agenda Item Title:  Education Advanced/TestHound

From: Dr. Jennifer Gutierrez, Deputy Superintendent

Additional Presenters if Applicable: None

Description: Education Advanced utilizes TestHound software to support state testing operations. The platform helps districts coordinate assessment schedules, manage secure test delivery and materials, arrange accommodations for students with disabilities and multilingual learners, maintain testing histories across years and campuses, and generate documentation for compliance and audits. By streamlining these processes, TestHound helps schools keep assessments organized and accessible while reducing the risk of testing irregularities.

Historical Data: License renewal

Recommendation: To approve Education Advanced /TestHound license renewal in the amount of $14,114.52 that includes data sharing and continue these services for the 2026–2027 school year.

Purchasing Director and Approval Date:

Funding Budget Code and Amount: Local Funds Budget 199-E31-6395-00-824 -0-99-0-00

Goals: 1: Curriculum and Instruction - SSAISD will engage all students with a high-quality, research-based curriculum to achieve academic growth and excellence.

EDUCATION ADVANCED

# SALES ORDER

| Order Number: | EAI-509017 | Order Date: | 10/06/2026 |
|---|---|---|---|

| Customer Ship To Information | | Customer Bill To Information | |
|---|---|---|---|
| Customer Name | South San Antonio ISD | Name | South San Antonio ISD |
| Address | 5622 Ray Ellison Blvd, San Antonio, TX, 78242-2214, US | Address | 5622 Ray Ellison Blvd, San Antonio, TX, 78242-2214, US |
| Contact Name | John Valerio | Contact Name | Monica Garcia |
| Email Address | john.valerio@southsanisd.net | Email Address | monica.garcia@southsanisd.net |

| Order Information | | Subscription, Invoicing & Agreement Information | |
|---|---|---|---|
| Order Amount | $14,114.52 | Subscription Start Date | 7/1/2026 |
| Currency | USD ($) | Subscription End Date | 6/30/2027 |
| Payment Terms | Net 30 From Invoice Date | Invoicing | Annual Upfront |
| Account Executive | Lori Hart | Agreement | Terms of Service v20251201 |

**Products**

| Product | Description | Order Term (Months) | Quantity | **Unit Price | Extended Price |
|---|---|---|---|---|---|
| TestHound Toolkit Renewal Auto Pilot Subscription | TestHound Software Subscription | 12 | 7,468 | $0.34 | $2,509.25 |
| TestHound Subscription Renewal | TestHound Software Subscription | 12 | 7,468 | $1.22 | $9,096.02 |
| TestHound Toolkit Renewal-Performance Tracker Subscription | TestHound Software Subscription | 12 | 7,468 | $0.34 | $2,509.25 |
| | | | | **Total** | **$ 14,114.52** |
| | | | | **Less Discount** | **$ 0.00** |
| | | | | **Grand Total** | **$ 14,114.52** |

**Additional Sales Order Terms**

By signing below, the parties agree to the terms and conditions of this Sales Order and the Agreement referenced above. In no event shall any terms and conditions listed on any Customer purchase order supersede, amend, delete or otherwise alter this Sales Order or the Agreement referenced above. Capitalized terms herein used shall have the respective meanings ascribed to them in the Agreement. The Education Advanced Terms of Service may be accessed at https://www.educationadvanced.com/terms.

**Unit Price shown above has been rounded to two decimal places for display purposes. As many as six decimal places may be present in the actual price. The totals for this order were calculated using the actual price, rather than the Unit Price displayed above, and are the true and binding totals for this order.

I have complied with my entity's business practices in making this purchase and I have obtained all necessary approvals to release funds for this purchase.

**Education Advanced, Inc.**

**Signature:** _____

**Name:** _____

**Title:** _____

**Date:** _____

**South San Antonio ISD**

**Signature:** _____

**Name:** _____

**Title:** _____

**Date:** _____

## EDUCATION ADVANCED
## CUSTOMER PURCHASE ORDER

**NOTE TO CUSTOMER:** We value your business and want to give you quality service. To ensure that your products and invoices are delivered to the correct locations, we normally process your order after receipt of a purchase order. When your purchase order is not available, we ask you to complete this form to provide us with the information we need to process your order correctly. Thank you.

To Education Advanced:

Please indicate which of the following options applies for this purchase:
*(Note: If selecting Option 1, include the purchase order number.)*

**Option 1:** I have provided Education Advanced with my district/school's purchase order under the number provided.
Purchase Order Number:

**Option 2:** I cannot provide a purchase order for the above referenced purchase because my district/school does not issue purchase orders. I have completed all sections of the License Agreement, including the billing and shipping addresses and contact information.

**Option 3:** I cannot provide a purchase order for the above referenced purchase because I have not received the final purchase order from my district/school's purchasing department. However,

a. I have obtained all necessary approvals to release funds for this purchase;
b. I have attached a copy of my purchase requisition to this form; and
c. I will send the final purchase order to Education Advanced as soon as it is available and appropriate for my district/school's fiscal year by email to billing@educationadvanced.com.

The information I have provided in this form is accurate and I have complied with my district/school's business practices in making this purchase. This form affirms my entity's commitment to pay for the products and services I have ordered within the terms specified in the contract.

I select the following option from above: Option [ ]

**Name:** _____ **Authorized Signature:** _____

**Title:** _____ **Date:** _____

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# CUSTOMER BILLING INFORMATION

| | |
|---|---|
| Accounts Payable Contact Name: | |
| Accounts Payable Contact Email Address: | |
| Accounts Payable Contract Phone Number: | |
| School Fiscal Year Start Date (MM/YY): | |
| Purchase Order can be issued (MM/YY): | |

| | |
|---|---|
| Is the contracting entity exempt from sales tax? | |
| Please select Yes or No | |