## **AGENDA ITEM**

|    |   |                    | BOAF     | RD OF TRUSTEES<br>AGENDA |         | -             |
|----|---|--------------------|----------|--------------------------|---------|---------------|
|    |   | Workshop           |          | Regular                  |         | Special       |
| A) |   | Report Only        |          |                          |         | Recognition   |
|    | Pres  | enter(s):          |          |                          |         |               |
|    | Brief   | ly describe the su | bject of | the report or reco       | gnition | presentation. |
|    |   |                    |          |                          |         |               |
|    |   |                    |          |                          |         |               |
|    |   |                    |          |                          |         |               |
| В) | $\boxtimes$   | Action Item        |          |                          |         |               |
|    | SAMUEL MIJARES, SUPERINTENDENT  |                    |          |                          |         |               |
|    | Presenter(s): JESUS ARTURO COSTILLA, EXEC. DIRECTOR OF HUMAN RESOURCES                      |                    |          |                          |         |               |
|    | Briefly describe the action required.   |                    |          |                          |         |               |
|    | CONSIDER AND TAKE APPROPRIATE ACTION ON THE REQUEST TO APPROVE TERM CONTRACTS AS PRESENTED. |                    |          |                          |         |               |
|    |   |                    |          |                          |         |               |
|    |   |                    |          |                          |         |               |
|    |   |                    |          |                          |         |               |
| C) | Funding source: Identify the source of funds if any are required.                           |                    |          |                          |         |               |
|    |   |                    |          |                          |         |               |
|    |   |                    |          |                          |         |               |
| D) | Clarification: Explain any questions or issues that might be raised regarding this item.    |                    |          |                          |         |               |
|    |   | ER SEPARATE COVER  | <u> </u> |                          |         |               |
|    |   |                    |          |                          |         |               |
|    |   |                    |          |                          |         |               |
|    |   |                    |          |                          |         |               |