

AWSYC HEAD START YEARLY COMMUNITY MOU'S

October 8, 2013

SUMMARY:

- This item requests the trustees grant approval to Angela Hellman as designated signer for the Community MOU's, as listed: Foster Grandparent Program; Community Services Inc. (CSI); Absolute Smile Dental; Cumberland Presbyterian Children's Home, Inc.; Faith Tabernacle Church; Family Resource of North Texas; Friends of the Family; Hope, Inc.; Interfaith Ministries; Kiwanis Club Children's Clinic; United Way of Denton County, Inc.; Woman, Infants and Children (WIC)

Board Goal:

- I. **Vision**...In pursuit of excellence the district will
 - b. Develop and maintain a culture where learning remains our first priority.
 - e. Develop a budget focused on student and professional learning.
- VI. **Growth, Change, and Fiscal Responsibility**...In pursuit of excellence the district will
 - e. Demonstrate effective and efficient management of district resources.
 - f. Provide leadership and/or oversight to ensure District meets all fiscal, legal, and regulatory requirements.

PREVIOUS BOARD ACTION:

- None

BACKGROUND INFORMATION:

- Head Start requires the Governing Body routinely receive the information provided in this consent agenda item.

SIGNIFICANT ISSUES:

-None

FISCAL IMPLICATIONS:

- None

BENEFIT OF ACTION:

- Passage will document the Governing Body's approval of Community MOU's and permission to designate Angela Hellman as signer for community MOU's.

PROCEDURAL AND REPORTING IMPLICATIONS:

- The Governing Body's review of these reports demonstrates active involvement in Denton ISD's Head Start Program.

PUBLIC COMMENT RECEIVED:

- Comments received from public through the AWSYC Head Start Policy Council.

ALTERNATIVES:

- No alternative actions are proposed.

OTHER COMMENTS:

- None

SUPERINTENDENT'S RECOMMENDATION:

Recommend approval of the designation of Angela Hellman as signer for community MOU's.

STAFF PERSONS RESPONSIBLE:

- Angela Hellman, Head Start Director, AWSYC

ATTACHMENT:

-2013-2014 Community MOU's

APPROVAL:

Signature of Staff Member Proposing Recommendation: _____

Signature of Divisional Assistant Superintendent: _____

Signature of Superintendent: _____