

Browning Public Schools
Board Agenda Request
Meeting to Be Held: 05-28-2025



Recognition: ☐ 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 to ☐ Elementary (only) ☒ High School/District Wide

Date: 05-14-2025

To: Rebecca Rappold
 Superintendent

From: Belinda Turley
Title: Special Services Director

Subject: **CSA: Speech-Language Pathologist 2025-2026**

Description: Request approval of contract service agreement for Carol E. Neumann to provide Speech-Language Pathology Services for the 2025-2026 school year.

Financial Impact: \$88,832.48

Funding Source (Budget/grant, etc.): 115-76-456-2152-330-612

Attachment(s): Contract Service Agreement

Approval: Superintendent's Office/Finance/Personnel as applicable (Initial) _____

Comments: _____

Board Action: ☐ N/A (Info) ☐ Approved ☐ Denied ☐ Tabled to: _____

Browning Public Schools
CONTRACT SERVICE AGREEMENT
(406) 338-2715 • (406) 338-2708

Date: May 19, 2025

Board Approval: 5/28/25

Contractor: Carol E. Neumann

Phone: 406-202-6420

Address: 3470 Cove View Drive **City:** Helena **State:** MT **Zip:** 59602

Type of Project/Service (be specific): The Speech/Language Pathologist will provide speech/language tele-therapy services to include but not be limited to testing, identification, therapy, writing evaluation reports, conducting evaluation report meetings, supervising therapy aide, writing individual education plans (IEP) and conduct IEP meetings as necessary, writing therapy reports, and will maintain appropriate records to meet state and district requirements. The SLP is contracted for 187 days to follow the Browning Public Schools adopted 2025-2026 school year calendar (PI & PIR Days). Contractor will be required to work additional days due to emergency cancellations (weather, water, etc.) without additional compensation, and also excludes identified BPS holidays and weekends. A 30-day notice is required for termination of contract by contractor or by Browning Public Schools. The speech/language pathologist will provide the district with appropriate proof of current licensure, individual liability insurance, and W-9.

Contracted Dates: 08/18/25 to 06/05/26

Rate per hour/per day: \$59.38 x up to 1496 hrs = \$88,832.48

Per Diem/per day: x # of Days =

Mileage: miles @ per mile =

Other costs (explain): Not to exceed total \$ amount =

Total Project Cost **\$88,832.48**

Contract to be paid from:

115-76-456-2152-330-612

Independent Contractor:

☒ Submit invoice Monthly

☐ Other

Employee:

☐ Submit timesheet through payroll

The above terms and conditions constitute an agreement by and between the contractor and the Browning Public Schools for the contractor to render services, as indicated. In the event of non-completion of services or other unforeseen problems, this agreement shall be changed accordingly.

Contractor's Signature

Principal/Supervisor

N/A

Federal ID Number/EIN

Superintendent

An Independent Contractor must provide Browning Public Schools with a Federal ID Number, State Contractor License or sign an Independent Contractor's Exemption Application Affidavit waiving their rights under the Worker's Compensation Insurance and Unemployment Insurance for employees.

White – Contractor

Yellow – Business Office