

Browning Public Schools  
**Board Agenda Request**  
Meeting To Be Held: 8/17/16



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**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

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**Date:**      8/10/16

**To:**          **Board of Trustees**  
                  Browning Public Schools

**From:**      Carrie R Hirst  
**Title:**       Parent Outreach Coordinator

**Subject:** **Contract Service Agreement - Charles Farmer**

**Description:** Request approval of Contract Service Agreement for Charles Farmer to do Heartsaver First Aid and CPR on August 24, 2016.

**Financial Impact:** \$ 270.00

**Funding Source (Budget/grant, etc.):**

**Attachment(s):** Contract Service Agreement

**Approval:** Superintendent's Office/Finance/Personnel as applicable (Initial) \_\_\_\_\_

**Comments:** \_\_\_\_\_

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**Board Action:**    ☐ N/A (Info)    ☐ Approved    ☐ Denied    ☐ Tabled to: \_\_\_\_\_

Browning Public Schools  
**CONTRACT SERVICE AGREEMENT**  
(406) 338-2715 • (406) 338-3200

**Date:** August 10, 2016

**Board Approval:** \_\_\_\_\_

**Contractor:** Charles C Farmer

**Phone:** 406-873-2084

<b>Address:</b> <u>Box</u>	<u>Browning,</u>	<u>MT</u>	<u>59417</u>
<b>P.O. Box or Street Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>

**Type of Project/Service** (be specific): Conduct American Heart Association Cardiopulmonary Resuscitation and First Aid Course to Child Care Staff.

**Contracted Dates:** August 24, 2016

Rate per hour/per day: \$45.00 per student X 6 students = \$ 270.00

Per Diem/per day: \_\_\_\_\_ x \_\_\_\_\_ # of Days = N/A

Mileage: \_\_\_\_\_ miles @ \_\_\_\_\_ per mile = N/A

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

**Total Project Cost = \$ 270.00**

**Contract to be paid from:**

**170-72-920-3200-0582**

**Independent Contractor:**

☐ Submit invoice on completion

☐ 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**

\_\_\_\_\_  
**SSN/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**