



North Slope Borough School District

P.O. Box 169, Utqiagvik, AK 99723

Memorandum of Agreement

(An MOA for more than \$10,000.00 must be approved by the School Board prior to start of contract. In a fiscal year MOA to the same contractor totaling more than \$10,000.00 must be approved by the School board prior to start of the contract).

Contractor: Latitude Consulting MOA Control # _____

Address: 212 Observatory Street Soldotna AK 99669
Street or POB City State Zip

907 623-8084 naomibuck@gmail.com
Area Code Phone # E-mail Address

Federal ID # _____ Or Soc. Sec. #: _____ Alaska Business License # 1062294

July 1, June 30, ☐ W-9 *W-9 Submitted
2021 2022 Attached Previously
Start Date: End Date:
(mmddyy) (mmddyy)

Contractor Agrees To: Compliance support person reviews state and federally required special education paperwork for SPED teachers (Evaluations, Individualized Education Programs (IEP), Written Notices, Consent for Placement, etc. to support meeting state and federal requirements based on Department of Education Audit & Reporting Requirements. Provide and/or collaborate with the delivery of on-site and distance training to special education and general education staff to support understanding of individual roles and responsibilities for implementing IEP's and 504 Plans. Training opportunities include school-based or district-wide training for general education and paraprofessional staff.

Attend pre-evaluation meetings, evaluation meetings, and IEP meetings as necessary to assist with federal law and student program development, as mutually agreed upon.

Provide face-to-face or remote new hire and on-going training to Special Education teachers in the use of Embrace (special education data base), NSBSD SPED processes & procedures, distance communications, and IEP implementation.

Assist in the development and facilitation of monthly SPED meeting/training agendas to facilitate special education compliance. Assist Student Services Department with the review and updating of Sequence tracking forms and requirements.

Maintain confidentiality of student information as per NSBSD Board Policy, state, and federal laws.

Maintain contact with SPED teachers, psychologist, and Student Services Office staff to support on-going compliance, monitor time lines, and support data collection for state and federal reporting (Supplemental Workbook,

Intensive funding applications, timeline monitoring).

Provide DIAL training & support to all sites with on-going consultative support. Support screening, scoring, and identification of preschool students with potential developmental delays. Provide list of students to elementary principal's & ECE staff for monitoring and support.

District Contract Person: **Lori Roth** Phone #: **907-852-9651** Ext: _____
Email Address: **Lori.Roth@nsbsd.org** Fax: _____

District Agrees To: Purchase or reimburse CONTRACTOR for expenses directly and necessarily incurred in relation to the performance of service under this agreement if travel has been approved by the Director of Students Services. Travel expense reimbursement will include the cost incurred by the CONTRACTOR to travel from Anchorage, Alaska to Utqiagvik, Alaska as necessary during the course of this Agreement.

Assist with the purchasing of 3-week advance airline tickets from Sitka, Alaska to Utqiagvik, Alaska. NSBSD reserves the right to purchase or use airline miles. Travel expenses not to exceed **\$ 3,000.00**. Change fees shall be paid if changes are made at the direction or request of the District.

Provide lodging, whenever possible, in Barrow and NSBSD villages.

Pay the contractor **\$700** per day for up to **90 days** of professional services on mutually agreed upon schedule.

Payment Terms: Net 30 days upon receipt and approval of Contractor invoice.

Enter Account Code as Account #: **(1) 285.200.220.000.410** Amount **Up to \$ 63,000.00**
(2) 100.200.220.000.410

MOA Not to Exceed: **\$ 66,000.00** Budget Authority Approval: **Total: Up to \$ 66,000.00**
(including travel expenses)

A – GENERAL INFORMATION

1. All associated costs, not limited to fees and reimbursable, must be included in the MOA. All MOAs for more than \$10,000 require prior School Board approval before Contractor provides any service.
2. The account to be charged must be determined and approved by the individual with budget authority prior to submission of the MOA to the Chief Financial Officer.
3. Prior to the starting date of the contracted services and/or activities, the Contractor and the NSBSD must sign the MOA. The Contractor is not to be given a notice to proceed unless all the appropriate parties have signed the MOA.
4. The Contact Person will be responsible for obtaining the contractor's signature and submitting the original MOA to the Business Manager.

5. The Contact Person must approve for payment all contract invoices and receipt documentation prior to submission for payment to the Chief Financial Officer.
6. When the MOA involves travel paid by the NSBSD; a CTR (Contracted Travel Requisition) must accompany any invoice.
7. MOAs cannot be used for NSBSD employees.
8. Any NSBSD employee who authorizes services prior to the required approvals may be subject to disciplinary actions up to and including termination. (BP 4118 and 4218)

B – Contractor Responsibilities

1. Check the MOA for contents and completeness. If the terms are agreeable, sign the agreement and return to the individual named as the Contact Person.
2. In accordance with the payment terms set forth on page 1, the Contractor shall submit an invoice with the appropriate documentation (copies of airline tickets, hotel bills, etc.) to the Contact Person for approval of payment. This MOA Control #: must be on the invoice.
3. As a condition of performance, the Contractor must pay all federal, state, and local taxes incurred by the Contractor.
4. A W-9 must be on file with the NSBSD Business Office or submitted with this MOA. No W-9, backup withholding of Federal taxes will be withheld per the present required – presently 29%.
5. The Contractor must provide proof of any liability insurance coverage required on page 1 of this MOA.
6. To the extent allowed by law, the Contractor shall indemnify, defend, and hold the NSBSD harmless from any liability resulting from or arising out of the acts of the Contractor in the performance of this MOA.
7. This contract may be terminated by either party with a 30day written notice.

I HEREBY ACCEPT THIS MOA AND THE CONDITIONS/PROVISIONS CONTAINED HEREIN.
Any changes in the terms of this MOA must be on an ADDENDUM FROM prior to any services being performed. The ADDENDUM FORM must be approved by all parties.

_____ Chief Financial Officer	_____ Chief Financial Officer Signature	_____ Date (mmddyy)
_____ Superintendent, NSBSD	_____ Superintendent's Signature	_____ Date (mmddyy)
_____ Contractor	_____ Contractor's Signature	_____ Date (mmddyy)

Routing: ☐ Biz Mger. ☐ Supt. ☐ Contractor ☐ Contact Person ☐ Admin. Svcs. Dept.

h/sh/executive admin/MOA/MOA template 2018-2019