

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 Contro | ol # | | | | | | |
|----------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| Address: | 212 Obser | vatory Street | Sitka | AK | 99835 | | | | | |
| | Street or POB | | City | State | Zip | | | | | |
| 907 | 623-8084 | naomibuck | | | | | | | | |
| Area Code | Phone # | E-mail Addr | ess | | | | | | | |
| Federal ID # | | Or Soc. Sec. #: _ | Alaska | Business License # | 1062294 | | | | | |
| July 1, | Jun | e 30, | □W-9 | □W-9 Submitted | | | | | | |
| 2019 | 2020 | , | Attached | Previously | | | | | | |
| Start Date: | | Date: | | | | | | | | |
| (mmddyy) | (mm | ddyy) | | | | | | | | |
| | - | teachers, school initiatives. Attend on-site an Assist in the deve Provide distance manager(s) of t compliance in t procedure, and S | | ervice providers, an SPED and complian ntation of SPED pro- nd training to SPEI ools as mutually a mentation as per N | id other NSBSD ice support. cesses. D teacher(s)/case agreed to ensure [SBSD policy & | | | | | |
| | | Maintain confidentiality of student(s) information and NSBSD as per NSBSD Board Policy, state and federal laws. | | | | | | | | |
| | | Maintain contact office staff to fa submission, etc. procedures for SI Provide NSBSD | with assigned teachers acilitate on-going supp in compliance with PED implementation. detailed invoices outli and on-site support. | s, psychologist, and oort, timeline monito SPED law and NS | oring, paperwork BSD's policy & | | | | | |
| District Contr | act Person: | Lori Roth | Phone #: | 907-852-9636 | Ext: 4636 | | | | | |
| Email Addres | s: | Lori.Roth@nsb | sd.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 Sitka, 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 \$ 1,500.00. 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 \$600 per day for up to 90 days of professional services on mutually agreed upon schedule. | | | | | | |
| | | | | | | | |
| Payment Terms: | Net 30 days upor | 2 30 days upon receipt and approval of Contractor invoice. | | | | | |
| Enter Account Code as | Account #: | 285.200.220.000.410 (45 days) | Amount | Up to \$ 27,000.00 | | | |
| | | 100.200.220.000.410 (45 days) | _ | Up to \$ 27,000.00 | | | |
| MOA Nette Free 1 | ¢ 55 500 00 | Decide of Accellencife A | Total: | Up to \$ 54,000.00 | | | |
| MOA Not to Exceed: | \$ 55,500.00 (including travel expenses) | Budget Authority App | coval: | | | | |

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 Business Manager.
- 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 Business Manager.
- 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 has 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 30 day 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.

| Business Manager | | | Business Manager's Signature | | | Da | Date (mmddyy) | | | |
|--------------------------|--|------------------------|------------------------------|-------|-----------------------------------|------------|---------------|----------------|--|--------------------|
| Superintendent, NSBSD | | | Superintendent's Signature | | | Da | Date (mmddyy) | | | |
| Naomi Buck Contractor | | Contractor's Signature | | | <u>0 4 30 19</u> Date (mmddyy) | | | | | |
| Routing: | | Biz Mger. | | Supt. | | Contractor | | Contact Person | | Admin. Srvs. Dept. |

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