

Browning Public Schools  
**Board Agenda Request**  
Meeting to Be Held: 6/13/17



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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:**    06/05/17

**To:**        **John Rouse**  
                  Superintendent

**From:**    Kimberly Tatsey-McKay  
                  Title:    Good Medicine Program Director

**Subject:** **Contract Service Agreement - Youth Mental Health First Aid Training**

**Description:** Kimberly Tatsey, Good Medicine Program Director, is recommending CSA for a weekend YMHFA Training in the month of June 2017. Contractor will provide a 2 day (12 hour) Youth Mental Health First Aid Training on June 16, 2017 & June 23, 2017 at the board approved training rate of \$225.00 per day outside of normal working hours.

✚ Jennifer Ehlers, \$225 board approved daily rate x 2 days for training = \$450.00

**Financial Impact:** \$450.00

**Funding Source (Budget/grant, etc.):** 115.90.465.2213.150.205

**Attachment(s):** YMHFA Sample CSA

**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:** June 5, 2017

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

**Contractor:** Jennifer Ehlers

**Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

P.O. Box or Street Address

City

State

Zip

**Type of Project/Service** (be specific): Contractor will facilitate the Youth Mental Health training on June 16, 2017 and June 23, 2017. Contractor will be required to complete the full two 6 hours' days of professional development facilitation to receive payment. No partial payments will be made. Contractor will complete a timesheet to document the hours of participation upon completion of the training.

**Contracted Dates:** June 16 and June 23, 2017

Rate per hour/per day: \$225 x 2 less deduction required by law = \$450.00

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** = \$450.00

**Contract to be paid from:**

115.90.465.2213.150.205

**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**

Kimberly Tatsey-McKay  
**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**