REQUEST FOR BOARD APPROVAL OF

PERSONAL SERVICES CONTRACT

Pursuant to House Bill 3372 (Effective June 22, 2025)

INSTRUCTIONS: This form must be submitted at least five (10) school days prior to a regularly scheduled Board meeting, but earlier submission is strongly encouraged. A copy of the written personal services contract must be attached to receive consideration. Incomplete forms or late submissions may result in delays or denial of review.

Administrator Information

Full Name: Lauren Benner
Full Name:
Job Title/Position: Elementary ELAR Coordinator
Campus/Department: Department of Instruction
Email Address: _laurenbenner@misdmail.org
Phone Number: 817-299-4399
Contracting Entity Information
Name of Contracting Entity: Education Elements
Does the entity conduct or solicit business with Mansfield ISD?
☐ Yes → STOP. This arrangement may not qualify for an exception under HB 3372. You are advised to seek legal counsel.
ĭ No
Type of Entity (Check one):
☐ Business (conducts or solicits business with the District)
☑ Education Business (provides services regarding curriculum/administration)
☐ Public Education Institution (e.g., charter school, regional education service center, other ISD)
Contract Information
Title of Services to Be Performed: Consulting
Brief Description of Services:
Independent consulting for the Strong Foundations project would involve providing general support to districts and campuses as they implement key project requirements. This may include offering guidance,
collaboration, and problem-solving to help ensure smooth and effective implementation.

Total Compensation to Be Received: \$ 50 per hour
Term/Duration of Contract: 11 months
Will any services be performed during your regular work hours?
\square Yes \rightarrow STOP. Services must be performed entirely on personal time.
ĭ No
Attach a copy of the written contract describing the services to be performed.
☑ Attached
Acknowledgments
(Please initial each statement)
<u>LB</u> I acknowledge that the services described will be performed entirely on my personal time, outside of my work hours with the District.
<u>LB</u> I acknowledge that the contract does not create a conflict of interest with my duties to the District.
<u>LB</u> I acknowledge that the arrangement will not harm the District or interfere with District operations.
LB I acknowledge that the contract is subject to disclosure under the Texas Public Information Act.
<u>LB</u> I acknowledge that violation of HB 3372 may result in personal civil penalties up to \$10,000 per violation.
Signature: Signature
Date: 12/3/25

[Remainder of page intentionally left blank]

District Use Only

Date Received:
Reviewed by (Name & Title):
☐ Contract Attached.
☐ Administrator is not a Superintendent, Associate Superintendent, or Board of Managers member.
\square Administrator's responsibilities do not primarily involve classroom instruction.
☐ Administrator is not a Trustee.
Recommendation:
☐ Forward to Board for Consideration
☐ Returned – Not Eligible
☐ Returned – Incomplete
Board of Trustees Action
(To be completed following Board review)
□ Approved
☐ Denied
Board Meeting Date:
Comments or Conditions (if any):
•
Board President Signature:
Date: