## Browning Public Schools **Board Agenda Request**Meeting To Be Held: 05/14/24



Recognit	ion: Students	Staff	Parents		
Informat	ion: 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		
Date:	04/20/24				
To:	Corrina Guardipee-Hall Superintendent		ebecca Rappold terim Director of Special Education		
Subject: Contract Service Agreement: Occupational Therapist 2024-2025					
<b>Description:</b> Recommend Angela Boyd to provide Occupational Therapy Services for the 2024-2025 school year.					
Financial Impact: \$ 67,320.00					
Funding Source (Budget/grant, etc.): 115.76.456.2160.330.613					
Attachment(s): Contract Service Agreement					
Approval: Superintendent's Office/Finance/Personnel as applicable (Initial)					
Comments:					
Board Ac	ction: N/A (Info)	Approved Denied	Tabled to:		

## Browning Public Schools CONTRACT SERVICE AGREEMENT

(406) 338-2715 • (406) 338-2708

**Board Approval:** May 14, 2024

Contractor: Angela Boyd	<b>Phone:</b> <u>423-383-5470</u>					
Address: 103 Culbert Private Dr. Apt. 2 City:	Elizabethton	State: TN	<b>Zip:</b> 37643			
Type of Project/Service (be specific): The Occupation therapy of referred students. Assesses through appropriate records to meet state and district requirem adopted 2024-2025 school year calendar, excludes identification that district with appropriate proof of current licensure, required for termination of contract for contractor or Br. Contracted Dates: 08/19/24 to 06/06/25	nal Therapist will ropriate testing a cial education s conduct evaluation tents. The O. T. vontified BPS holida and individual lia	conduct appropand diagnostic ystem. The One of and IEP reposed will follow the ays and weeken ability insurance	riate assessments via tele- practices. Provides case T. will perform testing, ort meetings and maintain Browning Public Schools ids. The O.T. will provide			
Rate per hour/per day: \$45.00 x up to \$45/hr x 40hrs/wk 1496 hrs or 187 days = \$67,320.00						
Per Diem/per day: x # of Days	<u>x 1470 ms or 107</u>	$=\frac{4ays}{}$	,520.00			
Mileage: miles @ per mile		=				
Other costs (explain): Not to exceed total \$ amount		=				
	Total Project Co	$= \underline{\$67}$	7,320.00			
Contract to be paid from:	Independent	Contractor:				
<u>115-76-456-2160-330-613</u>	Invoice	/Payment Mont	hly			
	Other _					
	Employee:					
	Submit	timesheet throu	ıgh 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.						
	Rebecca Ra	appold				
Contractor's Signature	Principal/Supe	ervisor				
N/A						
Federal ID Number/EIN	Superintenden	t				
An Independent Contractor must provide Browning Pu License or sign an Independent Contractor's Exempt						

White – Contractor

Worker's Compensation Insurance and Unemployment Insurance for employees.

Date: May 7, 2024

Yellow – Business Office