Browning Public Schools **Board Agenda Request**Meeting to Be Held: 6/29/16



Recognit	tion: Students	Staff	Parents	
Informa	tion:	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	o Elementary (only)	☐ High School/District Wide	
Date:	6/16/16			
To:	John Rouse Superintendent	From: Matthew Johnson Title: Director		
Subject:	CPR/FIRST AID FOR SUM	MER EE KAH KI MA	HT STAFF	
Descript Charlies	ion: Matthew Johnson, Direct Farmer to provide first aid and	tor of Alternative Education CPR training to all summ	on, is recommending contracting with ner Ee-Kah-Ki-Maht staff members.	
Financia	d Impact: \$720.00			
Funding	Source (Budget/grant, etc.):	126.64.170.1340.120		
_	Source (Budget/grant, etc.): ed against budget for respective		Salaries, benefits, and payroll costs to as applicable.)	
Attachm	ent(s): Contract Service Agr	reement		
Approva	d: Superintendent's Office/Fin	nance/Personnel as applica	able (Initial)	
Commer	nts:			
Board A	ction: N/A (Info)	Approved Denie	d Tabled to:	

Browning Public Schools

CONTRACT SERVICE AGREEMENT (406) 338-2715 • (406) 338-3200

Date: June 20, 2016	Board Approval	Board Approval:			
Contractor: Charles Farmer	Phone:				
Address: P.O Box	Browning	MT	59417		
P.O. Box or Street Address	City	State	Zip		
Type of Project/Service (be specific): G	Contractor will provide services	for the Summ	ner Ee Kah Ki		
Maht Summer School Camp/Recreation	for CPR/1st Aid. They will have	e one full da	y of training for		
the Summer Rec Program on 6/3/16.					
Contracted Dates: 6/3/16					
Rate per hour/per day: 18 adults for 1 da	y of training 18 x \$40.00	=\$72	0.00		
Per Diem/per day:x	# of Days	= N/A	<u> </u>		
Mileage:miles @	per mile	= N/A	<u> </u>		
Other costs (explain): Not to excee	ed total \$ amount	= N/A	<u> </u>		
	Total Project Cost	= \$ <u>720.0</u>	00		
Contract to be paid from:	Independent Co	Independent Contractor:			
<u>126.64.170.1340.120</u>	Submit invo	oice on compl	letion		
EE KAH KI MAHT GRANT	Other				
	Employee:				
	X Submit time	sheet through	ı payroll		
The above terms and conditions constitute a Schools for the contractor to render service unforeseen problems, this agreement shall b	s, as indicated. In the event of no				
	Matthew Johns	on			
Contractor's Signature	Principal/Superviso	r			
SSN/Federal ID Number/EIN	Superintendent				
An Independent Contractor must provide Br License or sign an Independent Contractor Worker's Compensation Insurance and Une	r's Exemption Application Affida	vit waiving th			
White - Contractor	Yellow – Busi	iness Office			