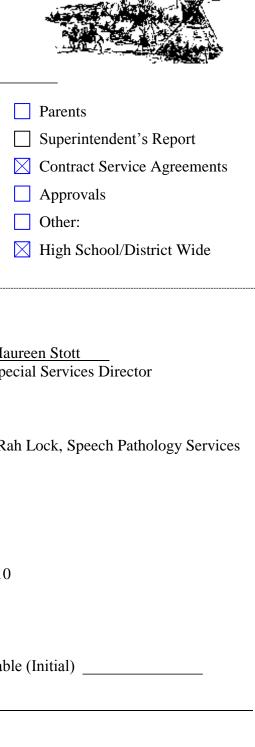
Browning Public Schools Board Agenda Request

Meeting To Be Held: 08/13/19



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				
Date:	08/13/19						
To:	Board of Trustees Browning Public Schools	From: Maureen Stott Title: Special Services Director					
Subject: CSA-Speech Pathologist 2019-2020							
Description: Request a Contract Service Agreement for Cheryl Rah Lock, Speech Pathology Services for the 2019-2020 School Year.							
Financial Impact: \$ 24,320.00							
Funding Source (Budget/grant, etc.): 115-76-456-2152-330-610							
Attachment(s): Contract Service Agreement							
Approval: Superintendent's Office/Finance/Personnel as applicable (Initial)							
Comments:							
Board Ac	etion: N/A (Info)	Approved Denied	Tabled to:				

Browning Public Schools

CONTRACT SERVICE AGREEMENT

(406) 338-2715 • (406) 338-3200

Board Approval: _____

Contractor:	Cheryl Rah Lock	Phone: (406) 845-8015				
Address _	P.O. Box 499	Babb	MT	59411		
	P.O. Box or Street Address	City		State	Zip	
services to inclevaluation reports meetings as near requirements.	ct/Service (be specific): The Speech/L lude but will not be limited to testing, ort meetings, supervising therapy aide, ecessary, writing therapy reports and values. The speech/language pathologist with ters' compensation exemption and indiv	diagnosis, therapy writing individual will maintain appro Il provide the dis	y, writin educati priate re trict wi	g evaluation r on plans (IEP ecords to mee	eports, conducting) and conduct IEP t state and district	
Rate per hour/p Per Diem/per d Mileage:	htes: 09/03/19 to 06/08/20 oer day: \$40.00 x 8 hrs./ 2 days per wk (ay: x # of Days _ miles @ per mile plain): Not to exceed total \$ amo	, 	st	= \$24,320.00 = = = = \$24,320.00		
Contract to be 115-76-456-21.	-	Other _ Employee:	invoice	ctor: on completion et through pay		
Schools for the	ns and conditions constitute an agreement contractor to render services, as indicablems, this agreement shall be changed	cated. In the even			_	
Contractor's Signature		Principal/Supervisor				
SSN/Federal I	D Number/EIN	Superintendent				
License or sign	nt Contractor must provide Browning F n an Independent Contractor's Exemp pensation Insurance and Unemploymen	otion Application A	Affidavi			

White - Contractor

Date: August 6, 2019

Yellow – Business Office