

**North Slope Borough School District**  
**P.O. Box 169, Barrow, AK 99723**

**Memorandum of Agreement**

(An MOA for more than \$10,000.00 must be approved by the School Board prior to start of contract. In a fiscal year MOA to the same contractor totaling more than \$10,000.00 must be approved by the School board prior to start of the contract).

Contractor: EdTech Infusion (Ella Bredthauer) MOA Control # \_\_\_\_\_

Address: PO Box 1482 Haines AK 99827  
Street or POB City State Zip

(907) 314-0836 [ellabredthauer@gmail.com](mailto:ellabredthauer@gmail.com)  
Area Code Phone # E-mail Address:

Federal ID # \_\_\_\_\_ Or Soc. Sec. #: \_\_\_\_\_ Alaska Business License # 1032394

August 7, 2020 June 30, 2021  W-9  W-9 Submitted  
Start Date: End Date: Attached Previously  
(mmddyy)

Contractor Agrees To: Prepare and present in-service trainings in person and via distance for school climate interventions and academic supports.  
In collaboration wit the Iñupiaq Ed Department and Student Services, provide support and culturally integrated materials for the implementation of School-wide Positive Behavior Interventions & Supports (SW-PBIS) and classroom management techniques for all schools based on the Iñupiaq Learning Framework.  
Prepare and present in-service trainings in person on Non-violent crisis intervention verbal de-escalation, restorative practices, restorative circles.  
Update the website with SW-PBIS materials and artifacts, as appropriate.  
Prepare and present trainings in person and via distance and provide on-site support for the use of the iPad, Kubi distance delivery system, and apps for special education, on-line/computerized programs/curriculum interventions, speech/language, etc. Contractor will provide training in Zoom, Googlemeet, and systems development for distance social emotional supports.  
Provide other supports to the Instructional Department as mutually agreed upon.  
Maintain confidentiality of information as per NSBSD Board Policy, state and federal laws.  
Provide NSBSD detailed invoices outlining days worked by date reflecting office, distance, and on-site support.

District Contract Person: Lori Roth Phone #: (907) 852-9651 Ext 9651

Email Address: Lori.Roth@nsbsd.org Fax: (907) 852-9796

District Agrees To: Reimburse CONTRACTOR for expenses directly and necessarily incurred in relation to the performance of service under this Agreement upon approval of the Director of Student Services. Travel expense reimbursement will include the cost incurred by the CONTRACTOR to travel from New Mexico or Anchorage, Alaska to Barrow, Alaska whichever is cheaper. Travel to/from remote villages during the course of this Agreement will be funded thru this agreement.

Provide lodging in Barrow and NSBSD villages, and if necessary, in Kotzebue, and Fairbanks. Hotel fees accrued during travel must be pre-approved by Director of Student Services on an individual basis.

*Note: Travel expenses not to exceed \$6,000.00. Any change fee incurred that is not made at the direction or request of the District shall be at the expense of the Contractor.*

Provide historical presentations with the training and implementation of the NSBSD SW-PBIS model.

Pay the contractor **\$700.00** per day for up to **70** for professional fees up to **\$49,000.00**

Payment Terms: Net 30 days upon receipt and approval of Contractor invoice.

Enter Account Code as Account #: 100.200.220....410 Amount: \$49,000.00  
100.200.220....410

MOA Not to Exceed: \$ 55,000.00 Budget Authority Approval: Total: Up to 55,000.00  
(including travel expenses)

NSBSD MOA (07-08-15)

## A – GENERAL INFORMATION

1. All associated costs, not limited to fees and reimbursable, must be included in the MOA. All MOAs for more than \$10,000 require prior School Board approval before Contractor provides any service.
2. The account to be charged must be determined and approved by the individual with budget authority prior to submission of the MOA to the Director of Financial Services – Gregory Stone.
3. Prior to the starting date of the contracted services and/or activities, the Contractor and the NSBSD must sign the MOA. The Contractor is not to be given a notice to proceed unless all the appropriate parties have signed the MOA.
4. The Contact Person will be responsible for obtaining the contractor’s signature and submitting the original MOA to the Director of Financial Services – Gregory Stone.
5. The Contact Person must approve for payment all contract invoices and receipt documentation prior to submission for payment to the Director of Financial Service – Gregory Stone.
6. When the MOA involves travel paid by the NSBSD; a Travel Requisition must accompany any invoice.
7. MOAs cannot be used for NSBSD employees.

8. Any NSBSD employee who authorizes services prior to the required approvals may be subject to disciplinary actions up to and including termination. (BP 4118 and 4218)

**B – Contractor Responsibilities**

1. Check the MOA for contents and completeness. If the terms are agreeable, sign the agreement and return to the individual named as the Contact Person.
2. In accordance with the payment terms set forth on page 1, the Contractor shall submit an invoice with the appropriate documentation (copies of airline tickets, hotel bills, etc.) to the Contact Person for approval of payment. This MOA Control #: must be on the invoice.
3. As a condition of performance, the Contractor must pay all federal, state, and local taxes incurred by the Contractor.
4. A W-9 must be on file with the NSBSD Business Office or submitted with this MOA. No W-9, backup withholding of Federal taxes will be withheld per the present required – presently 29%.
5. The Contractor must provide proof of any liability insurance coverage required on page 1 of this MOA.
6. To the extent allowed by law, the Contractor shall indemnify, defend, and hold the NSBSD harmless from any liability resulting from or arising out of the acts of the Contractor in the performance of this MOA.
7. This contract may be terminated by either party with a 30-day written notice.

I HEREBY ACCEPT THIS MOA AND THE CONDITIONS/PROVISIONS CONTAINED HEREIN.  
Any changes in the terms of this MOA must be on an ADDENDUM FROM prior to any services being performed. The ADDENDUM FORM must be approved by all parties.

\_\_\_\_\_  
 Director of Financial Services

\_\_\_\_\_  
 Financial Service Director’s Signature

\_\_\_\_\_  
 Date (mmddyy)

\_\_\_\_\_  
 Superintendent, NSBSD

\_\_\_\_\_  
 Superintendent’s Signature

\_\_\_\_\_  
 Date (mmddyy)

\_\_\_\_\_  
 Contractor

\_\_\_\_\_  
 Contractor’s Signature

\_\_\_\_\_  
 Date (mmddyy)

Routing:     Dir. Fin. Svcs.     Supt.     Contractor     Contact Person     Admin. Svcs. Dept.