



# North Slope Borough School District

P.O. Box 169, Utqiagvik, 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: Alaska Staff Development Network MOA Control # \_\_\_\_\_

Address: Juneau AK 99801  
234 Gold St  
Street or POB City State Zip

907 364-3802 ktonsmeire@alaskaacsa.org  
Area Code Phone # E-mail Address:

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

W-9 Attached  W-9 Submitted Previously

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
(mmddyy) (mmddyy)

Contractor Agrees To: ASDN will provide the Project Director and administrative and technical support for the project.  
ASDN will create teams, facilitate grant related activities, when needed will oversee contracts for professional learning and evaluation.  
ASDN will work with evaluators and district personnel to ensure the completion of all federal reporting requirements.  
ASDN will with approval of the NSBSD develop dissemination materials and conduct dissemination activities, create and maintain a project website, and provide webinar and online learning support for NSBSD educators. ASDN will contract with professional learning providers in mathematics and positive behavioral supports when requested by NSBSD. ASDN will arrange for college credit for NSBSD certified personnel engaged in professional learning activities.  
ASDN will invoice NSBSD with detailed invoices outlining hours worked by date and purpose on a regular basis.

District Contract Person: Emily Roseberry Phone #: 907-852-9683 Ext \_\_\_\_\_

Email Address: Emily.roseberry@nsbsd.org Fax: \_\_\_\_\_

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 Federal Programs.

NSBSD agrees to draw down grant funding from the appropriate so that the work that is completed will be evident to the grantor.

Payment Terms:

Enter Account Code as      Account #: 366.200.      Amount      \_\_\_\_\_  
Total:      \_\_\_\_\_  
\$230,579  
MOA Not to Exceed:      \_\_\_\_\_ Budget Authority Approval:      \_\_\_\_\_

NSBSD MOA (08-22-18)

### 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 Business Manager.
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 Business Manager.
5. The Contact Person must approve for payment all contract invoices and receipt documentation prior to submission for payment to the Business Manager.
6. When the MOA involves travel paid by the NSBSD; a CTR (Contracted 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 has 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.

\_\_\_\_\_  
Business Manager                                      Business Manager's Signature                                      Date (mmddyy)

\_\_\_\_\_  
Superintendent, NSBSD                                      Superintendent's Signature                                      Date (mmddyy)

\_\_\_\_\_  
Contractor                                      Contractor's Signature                                      Date (mmddyy)

Routing:     Biz Mger.                       Supt.                       Contractor                       Contact Person                       Admin. Svcs. Dept.

h/sh/executive admin/MOA/MOA template 2018-2019

NSBSD-MOA (08-22-18)