

Browning Public Schools  
**Board Agenda Request**  
Meeting to Be Held: 05-28-2025



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**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

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**Date:**            05-14-2025

**To:**              **Rebecca Rappold**  
                          Supervisor

**From: Francis Wayne Bull Calf**  
                          Title: Transportation Supervisor

**Subject: First Aid/ CPR 2025**

**Description:** Request for Brenda Guardipee to put on a First Aid/CPR class for Transportation on 06-05-2025 for bus driver's that are required to have this class.

**Financial Impact: \$700.00**

**Funding Source (Budget/grant, etc.):110/210-96-167-2700-330**

**Attachment(s):** CSA

**Approval:** Superintendent's Office/Finance/Personnel as applicable (Initial) \_\_\_\_\_

**Comments:** \_\_\_\_\_

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**Board Action:**     N/A (Info)     Approved     Denied     Tabled to: \_\_\_\_\_

Browning Public Schools  
**CONTRACT SERVICE AGREEMENT**  
(406) 338-2715 • (406) 338-3200

**Date:** 05-14-2025

**Board Approval:** 5/28/25

**Contractor** Brenda Guardipee

P.O. Box or Street Address: 1342 City Browning State Mt. Zip 59417

**Type of Project/Service** (be specific): First Aid/ CPR Class for Driver's required to drive school bus.

**Contracted Dates:** 06-05-2025 to 06-05-2025

Rate per hour/per day: 50.00+cards=20.00 ea x 10 people # of Days = \$700.00

Per Diem/per day: \_\_\_\_\_ x \_\_\_\_\_ # of Days = \_\_\_\_\_

Mileage: \_\_\_\_\_ miles @ \_\_\_\_\_ per mile = \_\_\_\_\_

Other costs (explain): \_\_\_\_\_ = \_\_\_\_\_

**Total Project Cost = \$ 700.00**

**Contract to be paid from:**

110-96-167-2700-330

210-96-167-2700-330

**Independent Contractor:**

Submit invoice on completion

Other \_\_\_\_\_

Employee:

Submit timesheet through 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.

Brenda Guardipee

**Contractor's Signature**

517-74-9408

**SSN/Federal ID Number/EIN**

Francis Wayne Bull Calf

**Principal/Supervisor**

**Superintendent**

An Independent Contractor must provide Browning Public Schools with a Federal ID Number, State Contractor License or sign an Independent Contractor's Exemption Application Affidavit waiving their rights under the Worker's Compensation Insurance and Unemployment Insurance for employees.