SAN LEANDRO UNIFIED SCHOOL DISTRICT

CONTRACTED SERVICES AGREEMENT

INSTRUCTIONS:

1. Submit Contracted Services Agreement for Board Approval at least 1 month prior to services.
2. Forms must be completed with all required signatures and have Board approval before the consultant/independent contractor can perform services for the District. (Requests submitted after services are performed will jeopardize payment.)
3. Clearances must be obtained with Human Resources Dept. (if applicable) prior to the start of services. Originating Dept. will follow up with HR once the contract is received.

Requested by: Joanne Clark / Joanne Clark / July 1, 2018
(SLUSD) Print Name / Signature / Date

Name of Consultant/Organization: East Bay Agency for Children- South Region School Based Servcies

21455 Birch St., Suite 201 Hayward, CA 94541
Address / City / State / Zip

510.844.5370 / 510.583.0410 / nellni.singh@ebac.org
Telephone Number / Fax Number / Cell # or E-Mail Address

SCOPE OF WORK: Individual, group, collateral services with teachers and family therapy as assessed by EBAC provider for current full-scope Medi-cal with parent authorization.

LOCATION OF SERVICES: Wilson Elementary, Bancroft Middle, San Leandro High School & John Muir Middle

DATE(S) OF SERVICE: July 1, 2018- June 30,2019

ESTIMATED COST: $39,000 (3 interns at $13,000) (and/or hourly Rate: $_____)

NAME OF PROGRAM: EBAC- East Bay Agency for Children

BUDGET NUMBER: 010-5809-0888-1110-1000-018-18- -004 (or ASB funds____)

Administrator/Program Manager Approval:
Joanne Clark / Joanne Clark / Date: July 1, 2018
Print Name / Signature

Consultant/Contractor:
Nellni Hogan / Nellni Hogan / Date: 06/04//18
Print Name / Signature

Business Manager: Initial: _____ Date: _____ Human Resources: Initial: _____ Date: _____

The Contracted Services Agreement must include the following before going to Purchasing Dept. for processing. Check off and attach all documentation that applies.

___ BOARD APPROVAL DATE: _____
___ Clearances with Human Resources: _____Fingerprinting ___TB
___ Add as Vendor ___W-9 Tax Form ___EDD form (Employment Development Dept.)
___ Copy of Requisition ___Invoice Attached

Note: District staff cannot be employed as a consultant/independent contractor.

Distribution:
___Originating Department ___Human Resources ___Purchasing Department

REVISED 4-16-14 RA/RM/vkc