SAN LEANDRO UNIFIED SCHOOL DISTRICT
# CONTRACTED SERVICES AGREEMENT

INSTRUCTIONS:

1. Submit Contracted Services Agreement to Assistant Superintendent, Educational Services, 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. Educational Services will facilitate this with HR once the contract is received.

Requested by/ Colleen G. Palia / Colleen G Palia / 7-9-2019
(SLUSD) Print Name — Signature — Date

Name of Consultant/Organization: The Burkard School

| 2333 Palm Avenue | San Mateo | CA | 94403 |
|---|---|---|---|
| Address | City | State | Zip |

| 650-918-9945 | | aburkard@theburkardschool.org |
|---|---|---|
| Telephone Number | Fax Number | Cell # or E-Mail Address |

SCOPE OF WORK: Annual tuition prorated to the date of enrollment for one SLUSD student during the 2019/2020 school year.

LOCATION OF SERVICES: 2333 Palm Avenue, San Mateo, CA 94403

DATE(S) OF SERVICE: 9/3/19 – 6/12/20

ESTIMATED COST: not to exceed $40,500.00 (and/or hourly) Rate: _____

NAME OF PROGRAM: Special Services Department

BUDGET NUMBER: 010-5809-6500-5001-2100-049-49-441 (or ASB funds—)

Administrator/Program Manager Approval:

Colleen G. Palia / Colleen G Palia / Date: 7-9-2019
Print Name — Signature

Consultant/Contractor:

Agapi Burkard, Director / [signature] / Date: 7/10/2019
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:
___Assistant Superintendent, Educational Services ___Human Resources ___Purchasing Department