



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: Dr. Shelly Wall MOA Control # _____

Address: 1576 Millfleet Dr. Windsor CO 80550
Street or POB City State Zip

307 389-0920 shellyrwall@gmail.com
Area Code Phone # E-mail Address

The contractor is required to hold and provide a certificate of insurance that is current for the term of the contract for the following:

General Liability Insurance Professional liability / Errors & Omissions

Federal ID # _____ Or Soc. Sec. #: _____ Alaska Business License # _____

July 1, June 30, W-9 *W-9 Submitted
2026 2027 Attached Previously
Start Date: End Date:
(mmddyy) (mmddyy)

Contractor Agrees To: Compliance support person reviews state and federally required special education and 504 paperwork for SPED teachers (Evaluations, Individualized Education Programs (IEP), Written Notices, Consent for Placement, etc.) to support meeting state and federal requirements based on Department of Education Audit & Reporting Requirements.
Provide face-to-face or remote New Hire In-service training. Provide on-going training to special education teachers in NSBSD SPED processes & procedures, distance communications, and IEP implementation.
Attend monthly SPED PLCs to facilitate special education compliance. Assist Student Services Department with the review and updating of Sequence tracking forms and reporting requirements.
Maintain confidentiality of student information as per NSBSD Board Policy, state, and federal laws.
Maintain contact with SPED teachers, psychologist, and Student Services Office staff to support on-going compliance, monitor time lines, and support data collection for state and federal reporting (Supplemental Workbook, Intensive funding applications, timeline monitoring).
Upon request, complete yearly audits of intensive Initial/Three-Year Evaluations and Individual Education Programs (IEP) to ensure State and Federal compliance.
Provide and/or collaborate with the delivery of on-site and distance training to special education and general education staff to support understanding of

individual roles and responsibilities for implementing IEP's and 504 Plans. Training opportunities include school-based or district-wide training for general education and paraprofessional staff.

It is the responsibility of the contractor to monitor work days, and not exceed, the amount approved by the NSBSD School Board. Contract days are to extend from the students first day of school through the end of the school as per the NSBSD Board approved calendar.

Contractor agrees to have the technology necessary to implement the required activities of this MOA.

Upon request, complete and submit a background check. Maintain up to date insurance, AK Business License, Type A certification (special education).

District Contract Person: **Michael Hautala** Phone #: **907-852-9651** Ext: _____
Email Address: **michael.hautala@nsbsd.org** Fax: _____

District Agrees To: Reimburse CONTRACTOR for expenses directly and necessarily incurred in relation to the performance of service under this agreement. Travel expense reimbursement will include the cost incurred by the CONTRACTOR to travel from Denver, CO to Utqiagvik, AK as necessary during the course of this Agreement.

Assist or reimburse tickets from Denver, CO to Utqiagvik, AK. Travel expenses for up to 1 trip will include the cost incurred by the CONTRACTOR to travel from Denver, CO to Utqiagvik, Alaska for New Hire In-service. Hotel rooms may be reserved by the District but paid for by Contractor and submit for reimbursement. Travel expenses not to exceed **\$3,500.00**. NSBSD will pay change fees if changes are made at the direction or request of the District.

Provide lodging, whenever possible, in Utqiagvik.

Pay the contractor **\$850** per day for up to **90 days** of professional services on mutually agreed upon schedule.

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

Enter Account Code as:	285.200.220.000.410	Amount:	\$76,500.00 (daily rate total)
	<u>100.200.220.000.410</u>		<u>\$3,500.00 (travel total)</u>
		Total:	<u>\$80,000.00</u>

MOA Not to Exceed: \$80,000.00 Budget Authority Approval: _____

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 Chief Financial Officer.
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 Chief Financial Officer.
5. The Contact Person must approve for payment all contract invoices and receipt documentation prior to submission for payment to the Chief Financial Officer.
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 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 that all required certificates of insurance listed on page 1 of this MOA are current for the term of the contract.
6. The contractor must maintain a current Alaska Business License for the term of the contract.
7. 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.
8. 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 FORM prior to any services being performed. The ADDENDUM FORM must be approved by all parties.

Chief Financial Officer	Chief Financial Officer’s Signature	Date (mmddyy)
Superintendent, NSBSD	Superintendent’s Signature	Date (mmddyy)
Contractor	Contractor’s Signature	Date (mmddyy)

Routing: Biz Mgr. Supt. Contractor Contact Person Admin. Srvs. Dept.

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