

## **CONTRACT FOR EDUCATIONAL SERVICES**

### **THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA and COMMUNITY HAVEN FOR ADULTS AND CHILDREN WITH DISABILITIES, INC. D/B/A SELBY PRESCHOOL**

This Contract is entered into July 17, 2018, between THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA, a body corporate, hereinafter referred to as “THE BOARD”, and COMMUNITY HAVEN FOR ADULTS AND CHILDREN WITH DISABILITIES, INC., d/b/a SELBY PRESCHOOL, hereinafter referred to as “SELBY PRESCHOOL,” is made for the purpose of providing education to pre-kindergarten students with disabilities.

WHEREAS, pursuant to Section 1001.42, Florida Statutes, the parties wish to provide Exceptional Student Education Services, hereinafter referred to as “ESE Services” for students who have met the following criteria:

1. The student is a resident of Sarasota County, Florida and is now enrolled in or has made application for enrollment in the Sarasota County School District.
2. The student has been appropriately classified as an exceptional student (“ESE student”) by the Sarasota County School District in compliance with state statutes and all pertinent state and local school board rules and criteria.
3. An Individualized Educational Plan (“IEP”) has been established for the ESE student based on assessment results which indicate specific educational and developmental needs and such a plan and needs are agreed upon by the ESE student’s parents or legal guardians and THE BOARD.

With regard to providing education to ESE students who qualify for ESE Services, SELBY PRESCHOOL and THE BOARD agree as follows:

1. THE BOARD agrees:
  - A. It shall provide the same opportunities for inservice training for SELBY PRESCHOOL staff involved in teaching ESE students as are provided to THE BOARD staff members.
  - B. It shall provide consultation from ESE staff upon request from SELBY PRESCHOOL staff.
  - C. It shall provide evaluation and transition planning for ESE students aged 3-5 preparing to articulate from SELBY PRESCHOOL into the Sarasota County School District educational programs.

2. SELBY PRESCHOOL agrees:

A. It will provide Supplemental Educational Services to identified and eligible ESE students served at SELBY PRESCHOOL. These services may include transportation, occupational therapy, physical therapy, and language/speech therapy.

B. It shall provide developmentally appropriate education services to ESE students aged 3-5 at SELBY PRESCHOOL. A schedule of activities for ESE Services shall be provided upon request to THE BOARD.

C. It shall assure that, pursuant to Section 1012.55, Florida Statutes, each person who is employed and renders instructional services as a teacher shall hold a valid substitute, part-time, temporary, or professional Florida Teaching Certificate or shall be properly appointed by SELBY PRESCHOOL as a non-certificated instructional staff member pursuant to SBE Rule 6A-1.0503 and/or SBE Rule 6A-1.0502. SELBY PRESCHOOL shall provide written notification to THE BOARD of all persons appointed as non-certificated instructional staff. SELBY PRESCHOOL shall provide to THE BOARD the Staff Appointment Verification Form (Appendix A) with all required attachments, documenting the appointment status of each instructional staff member providing services under this Contract.

D. It assures that each of its employees assigned hereunder has been fingerprinted by an authorized law enforcement agency and processed by the State Department of Law Enforcement and the Federal Bureau of Investigation for criminal background checks. Any employee assigned hereunder must meet all screening requirements as described in Section 1012.32, Florida Statutes. The results of all such background investigation and fingerprinting, and any updated information disclosing subsequent criminal activity, shall be immediately reported in writing to the Superintendent of Schools.

E. It shall provide space with furnishings for educational classes and will provide equipment necessary for each class. Final determination as to the need for equipment and furniture shall rest with SELBY PRESCHOOL.

F. It shall provide a monthly attendance record of ESE students to THE BOARD. In addition, a report relating to student progress on meeting IEP goals shall be submitted to THE BOARD at least quarterly for each ESE student. Copies of such progress reports shall be maintained in each student's educational record.

G. It shall conduct meetings as necessary to review and revise each ESE student's IEP. SELBY PRESCHOOL shall not make any changes to the IEP unless THE BOARD has authorized the changes. The ESE student's parent or legal guardian and THE BOARD or its representative shall be involved in all decisions regarding the ESE student's IEP and shall agree to any proposed changes prior to those changes being made. THE BOARD shall have responsibility for compliance with State Board Rules.

3. Both Parties agree:

A. SELBY PRESCHOOL shall retain full control and discretion as to the appointment or removal of any instructional staff member employed by SELBY PRESCHOOL. THE BOARD may report to SELBY PRESCHOOL any SELBY PRESCHOOL employee that is deemed by THE BOARD to be performing in a manner incompatible with the provisions of an adequate educational program to ESE students.

B. Staff of THE BOARD shall be permitted to review the program provided by SELBY PRESCHOOL including the IEP, evaluation reports and progress reports, and may confer with SELBY PRESCHOOL'S staff at reasonable times, as agreed by both parties.

C. Upon request, SELBY PRESCHOOL shall provide the State Board of Education, Bureau of Exceptional Education and Student Services, with ESE students' attendance and IEP information.

D. THE BOARD agrees to pay SELBY PRESCHOOL 95% of the FTE generation utilizing the adjusted Florida DOE cost factors used to calculate the ESE guarantee fund. Funding for the regular school year will be calculated as follows for students ages 3-5:

Matrix 251 - \$5,427.84 per year

Matrix 252 - \$7,169.47 per year

Matrix 253 - \$10,449.82 per year

Matrix 254 - \$14,538.85 per year

Matrix 255 - \$22,665.98 per year

Payment shall be calculated monthly by:

Multiplying the students in each matrix category by the yearly FTE

Adding the totals

Dividing by 10

Payments shall be disbursed monthly for the months of August, 2018, through May, 2019. A student must be enrolled for a minimum of one-half of the school days in a month to be eligible for reimbursement. Extended School Year (ESY) services may be provided by SELBY PRESCHOOL if mutually agreed to by SELBY PRESCHOOL and THE BOARD. Dates of ESY services and reimbursement rates shall be agreed to by both parties prior to the initiation of any such services.

The Contract Compliance Checklist (Appendix B) with all accompanying documentation must be returned to the Pupil Support Services Department prior to any reimbursement being issued pursuant to this Contract. Total reimbursement under this Contract shall not exceed \$141,753.96.

E. Other than the payment described in Section 3, item (D), above, this Contract is not intended to provide any mechanism by which monies are paid or received from either party for the fulfillment of the duties set forth herein. Each party shall seek payment for services rendered from whatever sources are available to it and shall not look to the other party for payment for those services. This Contract is intended to set forth the agreement between the parties by which the delivery of ESE Services to students aged 3-5 may be provided at SELBY PRESCHOOL.

F. During the term of this Contract, SELBY PRESCHOOL shall maintain public liability and malpractice insurance coverage in at least the following amounts: TWO HUNDRED THOUSAND DOLLARS (\$200,000) per person; THREE HUNDRED THOUSAND (\$300,000) per occurrence; and ONE MILLION DOLLARS (\$1,000,000) umbrella coverage with THE BOARD listed as a co-insured. As evidence of such insurance coverage SELBY PRESCHOOL shall furnish THE BOARD with a Certificate of Insurance prior to commencing any services under this Contract.

G. SELBY PRESCHOOL shall hold harmless, indemnify, and defend THE BOARD, its agents, servants, employees, in their official and individual capacity, from any demand, claim, suit, loss, cost, expense or damage which may be asserted, claimed or recovered against or from THE BOARD its agents or employees, in their official or individual capacity, by reason of any damage to property or injury or death of any person which arises out of, is incident to, or in any manner connected with this Contract. Nothing in this Contract shall be deemed to constitute a waiver of sovereign immunity on the part of THE BOARD, or to affect, limit, or reduce the protection from suit afforded to the School Board under Florida law. This provision shall survive termination of this Contract and shall be binding on the parties, successors, representatives and assigns and cannot be waived or varied.

4. Other Provisions:

A. Any additions, changes, deletions, or modifications to this Contract must be agreed to in writing by both parties.

B. Any disputes relating to implementation of the provisions of this Contract may be resolved by informal meetings and/or conferences between THE BOARD's Executive Director of Pupil Support Services or his/her designee and the appropriate representative(s) of SELBY PRESCHOOL.

C. This Contract shall commence August 1, 2018, and shall terminate June 30, 2019, unless terminated at an earlier date by either party. Either party may terminate this Contract at any time without cause by giving thirty days written notice.

D. Any notice given pursuant to this Contract shall be made to SELBY PRESCHOOL to the attention of the Executive Director at 4405 DeSoto Road, Sarasota, FL 34235, and to THE BOARD to the attention of the Executive Director of Pupil Support Services at 1960 Landings Boulevard, Sarasota, FL, 34231.

E. SELBY PRESCHOOL and THE BOARD mutually warrant that the program shall be in compliance with applicable provisions of the Civil Rights Act of 1964, Title IX of the Educational Amendments of the 1974 and Section 504 of the Rehabilitative Act of 1973.

F. The sole and exclusive jurisdiction for any action brought pursuant to this Contract shall be in the County or Circuit Court of the Twelfth Judicial Circuit, in and for Sarasota County, Florida.

G. SELBY PRESCHOOL shall comply with Florida's Public Records Law including:

a) keeping and maintaining public records that ordinarily and necessarily would be required by THE BOARD in order to perform the service;

b) providing the public with access to public records on the same terms and conditions that THE BOARD would provide the records and at a cost that does not exceed the cost provided in this chapter or as otherwise provided by law;

c) ensuring that public records that are exempt or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by law; and

d) meeting all requirements for retaining public records and transfer, at no cost, to THE BOARD all public records in possession of SELBY PRESCHOOL upon termination of the Agreement and destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements. All records stored electronically must be provided to THE BOARD in a format that is compatible with the information technology systems of THE BOARD.

**IF SELBY PRESCHOOL HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES TO ITS DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT 941-927-4009, publicrecordrequest@sarasotacountyschools.net, THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA, 1960 LANDINGS BLVD., SARASOTA, FL 34231.**

IN WITNESS WHEREOF, the parties have executed this Contract as of the date first written above.

THE SCHOOL BOARD OF  
SARASOTA COUNTY, FLORIDA

COMMUNITY HAVEN FOR ADULTS  
AND CHILDREN WITH DISABILITIES, INC.,  
d/b/a SELBY PRESCHOOL

BY \_\_\_\_\_  
Bridget Ziegler, Chair

BY \_\_\_\_\_  
Brad Jones, Vice President

Approved for Legal Content,  
May 17, 2018, by Matthews Eastmoore,  
Attorneys for The School Board  
of Sarasota County, Florida  
Signed: \_\_\_\_\_ ASH

**(APPENDIX A)**

## STAFF APPOINTMENT VERIFICATION FORM

School or Agency        **COMMUNITY HAVEN FOR ADULTS AND CHILDREN WITH DISABILITIES,  
INC., d/b/a SELBY PRESCHOOL**

I do here by certify that the following staff members have been employed as instructional staff pursuant to the current agreement with the Sarasota School District.

<b>Staff Members Holding Current Florida Teacher Certification</b>		<b>Staff Members Appointed as Non-Certificated Pursuant to Florida Statutes and State Board of Education Regulations</b>	
Name	Social Security Number	Name	Social Security Number

Please attach the following documentation:  
For teachers holding a current Florida Teaching Certificate:

A copy of the current certificate

For teachers appointed as non-certificated teachers:

A copy of any and all documents verifying each teacher’s qualifications to be appointed  
(Examples might include, copies of college degree(s), resumes verifying education and experience,  
documentation of participation in specialized training, etc.)

A copy of the school or agency personnel procedures including salary schedules, procedures for dismissal or reassignment, procedures for performance assessment, and training requirements for staff.

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Signature of Agency Representative
Title
Date

(APPENDIX B)



THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA

PUPIL SUPPORT SERVICES

1960 Landings Boulevard Sarasota, Florida 34231

Phone (941) 927-9000 FAX (941) 927-4052

Sonia Figaredo-Alberts, Executive Director  
Pupil Support Services

Contract Compliance Checklist

Contracting School Or Agency **COMMUNITY HAVEN FOR ADULTS AND CHILDREN WITH DISABILITIES, INC., d/b/a SELBY PRESCHOOL**

The following documentation must be attached to the Contract Compliance Checklist and returned with the fiscal contract authorizing reimbursement. No reimbursement can be made under this Contract until all items specified on the Contract Compliance Checklist are received by the Department of Pupil Support Services at the address above.

- 1. \_\_\_\_\_ Certification that each staff member working with students has been fingerprinted pursuant to the Contract.
- 2. \_\_\_\_\_ A copy of the school or agency certificate of insurance in the amounts specified in the Contract, naming the School Board of Sarasota County as co-insured.
- 3. \_\_\_\_\_ A copy of the Staff Appointment Verification Form confirming the appointment of each teacher as certified, or non-certificated, with appropriate documentation for each.
- 4. \_\_\_\_\_ A copy of the current Individual Educational Plan (IEP) for each student served under this Contract.
- 5. \_\_\_\_\_ A copy of the daily or weekly class schedule documenting a minimum of 1500 minutes of instructional time weekly (1200 minutes minimum for Pre-K students).
- 6. \_\_\_\_\_ A copy of the DOE Information Data Base Requirements form on each employee involved with students.

Submitted by:

Signature of Agency Representative	Title	Date

For School Board Use

Contract Compliance Checklist Complete \_\_\_\_\_ Yes \_\_\_\_\_ No\_\_\_\_\_

If no, date and method of notification to school or agency regarding needed information.

\_\_\_\_\_

Signature of Executive Director of Pupil Support Services or Designee	Date

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA  
PUPIL SUPPORT SERVICES

1960 Landings Boulevard Sarasota, Florida 34231  
Phone (941) 927-9000 Fax (941) 927-4018

DOE INFORMATION DATA BASE REQUIREMENTS

COMMUNITY HAVEN FOR ADULTS AND CHILDREN WITH DISABILITIES, INC.  
D/B/A SELBY PRESCHOOL

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Sex: \_\_\_\_\_ Telephone number \_\_\_\_\_ Certificate Number: \_\_\_\_\_

Degree: (circle one)

Child Development Associate (CDA) or CDA equivalent

Associate's

Bachelor's

Master's

Specialist

Doctorate

Not applicable

Name AND State of School Degree was earned at: \_\_\_\_\_

State: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Employee Date of Hire: \_\_\_\_\_

Job Title: \_\_\_\_\_ Employee D.O.B: \_\_\_\_\_

Name of Cost Center working for \_\_\_\_\_

Race of Employee (two part question):

1) Are they Hispanic or Latino      Y      N

2) (circle as many as apply) American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, or White.

Type of Employee: ( Please Circle One)

Full Time Employee

Part Time Employee

Exempt From Public Records Law:      YES      NO

Employee's Address: \_\_\_\_\_ APT# \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail address \_\_\_\_\_

Is the Employee Paid:      Hourly      Daily      Salary (circle one)

Rate of Pay:      \$ \_\_\_\_\_

Frequency of Pay: (please circle one)      weekly      biweekly      monthly

Number of Days the Employee works in a year: \_\_\_\_\_



How many months a year does the Employee work? \_\_\_\_\_

Evaluation: **(circle one)** Needs improvement Not determined to be in need of improvement  
Not a classroom teacher

Identify each type of professional experience for instructional and instructional administrative employee (excluding substitute teachers). Put years of experience in space before each category.

\_\_\_\_ Service to the district in current job code assignment

\_\_\_\_ Teaching in current district

\_\_\_\_ Administration in education

\_\_\_\_ Military Service

\_\_\_\_ Teaching in Florida public schools

\_\_\_\_ Teaching in Florida nonpublic schools

\_\_\_\_ Teaching in out-of-state public schools

\_\_\_\_ Teaching in out-of-state non-public schools

**Staff Fiscal Year Benefits**

Health/Hosp. _____	Life Insurance _____	Social Security _____	Retirement _____
Annuity Plan _____	Unemployment _____	Worker Comp _____	Cafeteria Plan _____
Other _____	Medicare _____	Cafeteria Adm. _____	

**Teacher Exit Interviews:**

Date Left \_\_\_\_\_

Exp (years of professional experience for the teaching job "00" indicates employee in first year of assignment):

\_\_\_\_\_

**Separation reason (circle)**

- |  |                              |
|--|------------------------------|
| 1) Promotion/Transfer to a non teaching position in the district   | 2) Probationary              |
| 3) Resignation; includes retirement  | 4) Reduction in force        |
| 5) Not re-appointed to position; contract expiration   | 6) Job abandonment and death |
| 7) Performance; unsatisfactory job performance; failure to obtain adequate certification or certification expiration |                              |

**Voluntary Reasons**

- |                                    |  |
|------------------------------------|--|
| A) Inadequate salary               | B) Lack of opportunity for advancement       |
| C) Dissatisfaction with supervisor | D) Dislike/unsuitability for assigned duties |

**Future Plans**

- |  |                                       |
|--|---------------------------------------|
| A) at a nonpublic school within the district | B) within another district in Florida |
| C) outside the State of Florida              |                                       |