

|   |                   |
|---|-------------------|
| <b>Board Office Use: Legislative File Info.</b> |                   |
| File ID Number                                  | 12-0551           |
| Introduction Date                               | 3/14/12           |
| Enactment Number                                | 12-0873           |
| Enactment Date                                  | 3-14-12 <i>fg</i> |



**OAKLAND UNIFIED  
SCHOOL DISTRICT**

*Community Schools, Thriving Students*

# Memo

**To** Board of Education  
Tony Smith, Ph.D., Superintendent

**From** By: Maria Santos, Deputy Superintendent, Instruction, Leadership & Equity-in-Action  
Vernon Hal, Deputy Superintendent, Business & Operations

**Board Meeting Date** 3-14-12  
(To be completed by Procurement)

**Subject** Professional Services Contract Amendment - 1  
We Lead Ours Oakland CA (Contractor, City/State) -  
193/Reach Academy (site/department)

**Action Requested** Ratification by the Governing Board of the amendment to the professional services contract between the District and We Lead Ours. Services to be primarily provided to 193/Reach Academy for the period of 11/30/2011 through 06/15/2012, in an amount not to exceed \$ 16,000.00.

**Background**  
*A one paragraph explanation of why an amendment is needed.*

1) We Lead Ours will provide 520 hours of coverage support for Principal and TSA at recess for P.E. instruction to teach students team sports, build community through play, and engage students in healthy activities, and problem solving techniques.  
2) In addition, consultant will provide an additional 120 hours for classroom support to daytime instructors for ELA and Math intervention utilizing Read Naturally, CST release questions, and ORC reteach to work with small groups who are in need of support in decoding. The focus is on reading comprehension, fluency, and writing conventions. They will work in small groups practicing math facts. Groups will be determined by teacher, TSA, and Principal using data results of benchmark assessments.

**Discussion**  
*One paragraph summary of the amended scope of work.*

Ratification by the Board of Education of Amendment No. 1 of the Professional Services Contract between Oakland Unified School District and We Lead Ours, Oakland, CA, for the latter to provide an additional 640 hours of service for leveled physical education instruction to grades K-5; work with students daily during all recess periods throughout the school day to teach students how to play with each other, how to participate in group exercises, and team sports; also provide support coverage to teachers for ELA and Math intervention at Reach Academy for the period of November 30, 2011 through June 15, 2012, for an amount not to exceed \$16,000.00, increasing the agreement from \$10,416.00, to a not-to-exceed amount of \$26,416.00.

**Recommendation** Ratification by the Governing Board of the amendment to the professional services contract between the District and We Lead Ours. Services to be primarily provided to 193/Reach Academy for the period of 11/30/2011 through 06/15/2012, in an amount not to exceed \$ 16,000.00.

**Fiscal Impact** Funding resource name (please spell out) 0000/General Purpose  
not to exceed \$16,000.00

**Attachments**

- Contract Amendment
- Copy of original contract

|   |         |
|---|---------|
| Board Office Use: <b>Legislative File Info.</b> |         |
| File ID Number                                  | 12-0551 |
| Introduction Date                               | 3/14/12 |
| Enactment Number                                | 12-0873 |
| Enactment Date                                  | 3-14-12 |



**AMENDMENT NO. 1  
TO PROFESSIONAL SERVICES CONTRACT**

This Amendment is entered into between the Oakland Unified School District (OUSD) and We Lead Ours (CONTRACTOR). OUSD entered into an Agreement with CONTRACTOR for services on 11/30, 2011, and the parties agree to amend that Agreement as follows:

1. **Services:**     The scope of work is unchanged.                     The scope of work has changed.  
**If the scope of work has changed:** Provide brief description of revised scope of work including a measurable description of expected final results, such as services, materials, products, and/or reports; attach additional pages as necessary.  
 Revised scope of work attached. **OR,** The CONTRACTOR agrees to provide the following amended services:  
  
See scope of work.

2. **Terms (duration):**     The term of the contract is unchanged.                     The term of the contract has changed.  
**If the term has changed:** The contract term is extended by an additional \_\_\_\_\_ (days/weeks/months), and the amended expiration date is 06/15/2012.

3. **Compensation:**     The contract price is unchanged.                     The contract price has changed.  
**If the compensation has changed:** The contract price is amended by  
 Increase of \$ 16,000.00 to original contract amount  
 Decrease of \$ \_\_\_\_\_ to original contract amount  
and the new contract total is Twenty Six Thousand, Four Hundred Sixteen dollars (\$ 26,416.00 )

4. **Remaining Provisions:** All other provisions of the Agreement, and prior Amendment(s) if any, shall remain unchanged and in full force and effect as originally stated.

5. **Amendment History:**

There are no previous amendments to this Agreement.     This contract has previously been amended as follows:

| No. | Date | General Description of Reason for Amendment | Amount of Increase (Decrease) |
|-----|------|---|-------------------------------|
|     |      |   | \$                            |
|     |      |   | \$                            |
|     |      |   | \$                            |

6. **Approval:** This Agreement is not effective and no payment shall be made to Contractor until it is approved. Approval requires signature by the State Administrator, the Board of Education, and/or the Interim Superintendent as their designee.

OAKLAND UNIFIED SCHOOL DISTRICT

CONTRACTOR

Maria Santos  
 President, Board of Education  
 Superintendent or Designee

2-20-2012  
Date

[Signature]  
Contractor Signature

2-13-  
Date

Certified: [Signature]  
3/15/12  
Date

Trestia George  
Print Name, Title

Edgar Rakestraw, Jr., Secretary  
Board of Education

**LEGISLATIVE FILE**

File ID Number 12-0551  
Introduction Date 3-14-12  
Enactment Number 12-0873  
Enactment Date 3-14-12 PD



EXHIBIT "A" Scope of Work

DESCRIPTION OF SERVICES TO BE PERFORMED BY CONTRACTOR

CONTRACTOR's entire Proposal is not made part of this Agreement. [IF A CONTRACTOR PROVIDES AN ACCEPTABLE DESCRIPTION OF SERVICES AS PART OF A PROPOSAL, THAT DESCRIPTION OF SERVICES CAN BE ATTACHED WITHOUT ANY TERMS, CONDITIONS, LIMITATIONS, ETC., FROM THAT PROPOSAL.]

Summary for Board Memo and Board Agenda – Must accurately align with scope of work below.

Ratification by the Board of Education of Amendment No. 1 of the Professional Services Contract between Oakland Unified School District and We Lead Ours, Oakland, CA, for the latter to provide an additional 640 hours of service for leveled physical education instruction to grades K-5; work with students daily during all recess periods throughout the school day to teach students how to play with each other, how to participate in group exercises, and team sports; also provide support coverage to teachers for ELA and Math intervention at Reach Academy for the period of November 30, 2011 through June 15, 2012, for an amount not to exceed \$16,000.00, increasing the agreement from \$10,416.00, to a not-to-exceed amount of \$26,416.00.

SCOPE OF WORK

We Lead Ours will provide a maximum of 640.00 hours of services at a rate of \$ 25.00 per hour for a total not to exceed \$16,000.00. Services are anticipated to begin on 11/30/2011 and end on 06/15/2012.

1. Description of Services to be Provided: Provide a description of the service(s) the contractor will provide. Be specific about what service(s) OUSD is purchasing and what this Contractor will do.

Consultant will support school day teachers in the classroom to provide ELA and Math intervention utilizing Read Naturally, CST release questions, and ORC reteach in small groups in need of support in decoding. Reading comprehension, fluency, and writing conventions. Contractor will also work in small groups practicing math facts. Groups will be determined by the teacher, TSA, and Principal using data results from benchmark assessments; work with teacher to provide students with collaborative sports and physical education during morning and afternoon recess periods; assist school day staff with conflict management; consultant will provide monthly reports regarding student progress during physical education workshops.

2. Specific Outcomes: What are the expected outcomes from the services of this Contract? Be specific. For example, as a result of the service(s): 1) How many more Oakland children are graduating from high school? 2) How many more Oakland children are attending school 95% or more? 3) How many more students have meaningful internships and/or paying jobs? 4) How many more Oakland children have access to, and use, the health services they need? Provide details of program participation (Students will...) and measurable outcomes (Participants will be able to...). NOT THE GOALS OF THE SITE OR DEPARTMENT.

Students will participate in physical education workshops with We Lead Ours. The consultant will instruct 1 physical education workshop daily by grade level. Contractor will instruct 2 physical education workshops on Fridays. Provide 6 workshops per week with additional opportunities to participate in team sports; provide students with leadership roles and responsibilities to assist the instructor with games or other services needed during recess.

3. Alignment with District Strategic Plan: Indicate the goals and visions supported by the services of this contract: (Check all that apply.)

- Ensure a high quality instructional core
Develop social, emotional and physical health
Create equitable opportunities for learning
High quality and effective instruction
Prepare students for success in college and careers
Safe, healthy and supportive schools
Accountable for quality
Full service community district

**4. Alignment with Single Plan for Student Achievement (required if using State or Federal Funds)**

Please select:

- Action Item included in Board Approved SPSA (no additional documentation required)** – Action Item Number: \_\_\_\_\_
  
  - Action Item added as modification to Board Approved SPSA** – Submit the following documents to the Resource Manager either electronically via email of scanned documents, fax or drop off.
    1. Relevant page of SPSA with action item highlighted. Page must include header with the word "Modified", modification date, school site name, both principal and school site council chair initials and date.
    2. Meeting announcement for meeting in which the SPSA modification was approved.
    3. Minutes for meeting in which the SPSA modification was approved indicating approval of the modification.
    4. Sign-in sheet for meeting in which the SPSA modification was approved.
-



# CERTIFICATE OF LIABILITY INSURANCE

WELANDOV

DATE (MM/DD/YYYY)

9/28/2011

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER License # 0167057  
McDermott-Costa Co., Inc.  
PO Box 758  
San Leandro, CA 94577

CONTACT NAME:  
PHONE (A/C, No, Ext): (510) 351-7460 FAX (A/C, No): (510) 357-3230  
E-MAIL ADDRESS:

| INSURER(S) AFFORDING COVERAGE     | NAIC # |
|-----------------------------------|--------|
| INSURER A: Berkeley Life & Health |        |
| INSURER B:                        |        |
| INSURER C:                        |        |
| INSURER D:                        |        |
| INSURER E:                        |        |
| INSURER F:                        |        |

INSURED  
  
We Lead Ours/Trestin George  
Lamont Robinson  
587 105th Avenue #7  
Oakland, CA 94603

**COVERAGES**                      **CERTIFICATE NUMBER:**                      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE   | ADDL INSR                                | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS   |
|----------|---|--|----------|---------------|-------------------------|-------------------------|--|
| A        | GENERAL LIABILITY   |  |          | WRD180035     | 1/26/2011               | 1/26/2012               | EACH OCCURRENCE \$ 1,000,000                         |
|          | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY  |  |          |               |                         |                         | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 |
|          | <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR                            |  |          |               |                         |                         | MED EXP (Any one person) \$ 5,000                    |
|          | GEN'L AGGREGATE LIMIT APPLIES PER:  |  |          |               |                         |                         | PERSONAL & ADV INJURY \$ 1,000,000                   |
|          | <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC |  |          |               |                         |                         | GENERAL AGGREGATE \$ 2,000,000                       |
|          | AUTOMOBILE LIABILITY  |  |          |               |                         |                         | PRODUCTS - COMP/OP AGG \$ 2,000,000                  |
|          | <input type="checkbox"/> ANY AUTO   |  |          |               |                         |                         | COMBINED SINGLE LIMIT (Ea accident) \$               |
|          | <input type="checkbox"/> ALL OWNED AUTOS  | <input type="checkbox"/> SCHEDULED AUTOS |          |               |                         |                         | BODILY INJURY (Per person) \$                        |
|          | <input type="checkbox"/> HIRED AUTOS  | <input type="checkbox"/> NON-OWNED AUTOS |          |               |                         |                         | BODILY INJURY (Per accident) \$                      |
|          | UMBRELLA LIAB   | <input type="checkbox"/> OCCUR           |          |               |                         |                         | PROPERTY DAMAGE (Per accident) \$                    |
|          | EXCESS LIAB   | <input type="checkbox"/> CLAIMS-MADE     |          |               |                         |                         | \$   |
|          | DED   | RETENTION \$                             |          |               |                         |                         | EACH OCCURRENCE \$                                   |
|          | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY   |  |          |               |                         |                         | AGGREGATE \$   |
|          | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)                               | <input type="checkbox"/> Y/N             | N/A      |               |                         |                         | WC STATUTORY LIMITS OTH-ER                           |
|          | If yes, describe under DESCRIPTION OF OPERATIONS below  |  |          |               |                         |                         | E.L. EACH ACCIDENT \$                                |
|          |   |  |          |               |                         |                         | E.L. DISEASE - EA EMPLOYEE \$                        |
|          |   |  |          |               |                         |                         | E.L. DISEASE - POLICY LIMIT \$                       |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

The Oakland Unified School District is Named as Additional Insured with respect to contract for services (Management Consultant).

10 Days notice of cancellation in the event of non-payment of premium.

**CERTIFICATE HOLDER****CANCELLATION**

The Oakland Unified School District  
1025 2nd Avenue  
Oakland, CA 94606

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

*Linda Brian*

© 1988-2010 ACORD CORPORATION. All rights reserved.



## PROFESSIONAL SERVICES CONTRACT AMENDMENT ROUTING FORM 2011-2012

### Directions

Services beyond the original contract cannot be provided until the amendment has been fully approved and the Purchase Order amount has been increased by Procurement.

1. Contractor and OUSD contract originator reach agreement on modification to original contract.
2. Insert the amendment number (i.e. if this is the first amendment enter "1," second enter "2," etc.) at the top of the amendment.
3. If contract total amount has increased, the scope of work has changed. OUSD contract originator **creates new requisition with the original PO number referenced in the item description.**
4. OUSD contract originator submits amendment packet to Procurement for approval within two weeks of creating the requisition.

When the contract amendment is approved Procurement will add additional funds to the original Purchase Order.

|                             |   |
|-----------------------------|---|
| <b>Attachment Checklist</b> | <input type="checkbox"/> Contract amendment packet including Board Memo and Amendment Form<br><input type="checkbox"/> Amended Scope of work (be specific as to what is changing)<br><input type="checkbox"/> Copy of original contract |
|-----------------------------|---|

**OUSD Staff Contact** Emails about this contract should be sent to: [renee.mcmearn@ousd.k12.ca.us](mailto:renee.mcmearn@ousd.k12.ca.us)

### Contractor Information

|                  |                         |                  |                      |       |    |
|------------------|-------------------------|------------------|----------------------|-------|----|
| Contractor Name  | We Lead Ours            | Agency's Contact | Trestin George       |       |    |
| OUSD Vendor ID # | v060235                 | Title            | Instructor           |       |    |
| Street Address   | 587 - 105th Avenue, # 7 | City             | Oakland              | State | CA |
| Telephone        | (510) 415-0216          | Zip              | 94603                |       |    |
|                  |                         | Email            | welosports@yahoo.com |       |    |

### Compensation and Terms – Must be within the OUSD Billing Guidelines

|                           |              |                    |            |          |            |
|---------------------------|--------------|--------------------|------------|----------|------------|
| Original Contract Amount  | \$ 10,416.00 | Original PO Number | P1204225   |          |            |
| Amended Amount            | \$ 16,000.00 | New Requisition #  | R0203267   |          |            |
| New Total Contract Amount | \$ 26,416.00 | Start Date         | 11/30/2011 | End Date | 06/15/2012 |

### Budget Information

*If you are planning to multi-fund a contract using LEP funds, please contact the State and Federal Office before completing requisition.*

| Resource # | Resource Name | Org Key    | Object Code | Amount       |
|------------|---------------|------------|-------------|--------------|
| 0000       | General       | 1931110101 | 5825        | \$ 16,000.00 |
|            | Purpose       |            | 5825        | \$           |
|            |               |            | 5825        | \$           |

### Approval and Routing (in order of approval steps)

Additional services above original contract amount cannot be provided before the amendment is fully approved and the Purchase Order amount has been increased by Procurement.

|    |  |   |                  |                 |               |           |  |
|----|--|---|------------------|-----------------|---------------|-----------|--|
|    | <b>Site Administrator or Manager</b>   | Name  | Patricia Sheehan | Phone           | 5107207775    | Fax       | 5107297779   |
| 1. | Site / Department  | 193/Reach Academy   |                  |                 |               |           |  |
|    | Signature  |  |                  |                 | Date Approved | 2-13-12   |  |
| 2. | <b>Resource Manager</b> , if using funds managed by: <input type="checkbox"/> State and Federal <input type="checkbox"/> Quality, Community, School Development <input checked="" type="checkbox"/> Complementary Learning / After School Programs |   |                  |                 |               |           |  |
|    | Signature  |   |                  |                 | Date Approved |           |  |
|    | Signature  |   |                  |                 | Date Approved |           |  |
| 3. | <b>Regional or Executive Officer</b>   |   |                  |                 |               |           |  |
|    | Signature  |  |                  |                 | Date Approved | 2/17/12   |  |
| 4. | <b>Deputy Superintendent Instructional Leadership / Deputy Superintendent Business Operations</b>  |   |                  |                 |               |           | <input type="checkbox"/> Consultant Aggregate Under \$50,000 |
|    | Signature  |  |                  |                 | Date Approved | 2-20-2012 |  |
| 5. | <b>Superintendent or Board of Education</b> Signature on the legal contract  |   |                  |                 |               |           |  |
|    | <b>Legal</b> Required if not using standard contract   | Approved  |                  | Denied - Reason |               | Date      |  |
|    | <b>Procurement</b>   | Date Received   |                  | PO Number       | P1204225      |           |  |



|   |            |
|---|------------|
| Board Office Use: <b>Legislative File Info.</b> |            |
| File ID Number                                  | 11-3134    |
| Introduction Date                               | 01/11/2012 |
| Enactment Number                                | 12-0030    |
| Enactment Date                                  | 1-11-12 JS |



OAKLAND UNIFIED  
SCHOOL DISTRICT

Community Schools, Thriving Students

# Memo

**To** Board of Education

**From** Tony Smith, Ph.D., Superintendent  
By: Maria Santos, Deputy Superintendent, Instruction, Leadership & Equity-in-Action  
Vernon Hal, Deputy Superintendent, Business & Operations

**Board Meeting Date**  
(To be completed by Procurement) January 11, 2012

**Subject** Professional Services Contract - We Lead Ours (contractor) - 193/Reach Academy (site/department)

**Action Requested** Ratification of Professional Services Contract between Oakland Unified School District and We Lead Ours, Oakland, CA. Services to be primarily provided to Reach Academy for the period of November 30, 2011 through June 15, 2012.

**Background**  
*A one paragraph explanation of why the consultant's services are needed.* Reach Academy requests the services of said contractor for the purposes of instructing a developmental program with the focus on leadership, conflict resolution and the desire to achieve academic excellence. The program is directly aligned with SPSA goals to improve the student's social and academic growth.

**Discussion**  
*One paragraph summary of the scope of work.* Ratification by Board of Education of a Professional Services Contract between Oakland Unified School District and We Lead Ours, Oakland, CA, for the latter to provide instruction to students in conflict resolution and leadership during the after school program; consultant will instruct students in grades K-5 daily for the after school program at Reach Academy for the period of November 30, 2011 through June 15, 2012, for an amount not to exceed \$10,416.00.

**Recommendation** Ratification of a Professional Services Contract between Oakland Unified School District and We Lead Ours. Services to be primarily provided to 193/Reach Academy for the period of November 30, 2011 through June 15, 2012.

**Fiscal Impact** Funding resource name (please spell out): 6010/After School Education and Safety (ASES) Grant in an amount not to exceed \$10,416.00.

**Attachments**

- Professional Services Contract
- Certificate of Insurance
- Scope of Work
- Statement of qualifications



|   |            |
|---|------------|
| Board Office Use: <b>Legislative File Info.</b> |            |
| File ID Number                                  | 11-3134    |
| Introduction Date                               | 1-11-12    |
| Enactment Number                                | 12-0030    |
| Enactment Date                                  | 1-11-12 JZ |



OAKLAND UNIFIED SCHOOL DISTRICT

**PROFESSIONAL SERVICES CONTRACT 2011-2012**

This Agreement is entered into between the Oakland Unified School District (OUSD) and We lead Ours (CONTRACTOR). OUSD is authorized by Government Code Section 53060 to contract for the furnishing of special services and advice in financial, economic, accounting, engineering, legal, and administrative matters with persons specially trained, experienced, and competent to perform such services. CONTRACTOR warrants it is specially trained, experienced, and competent to provide such services. The parties agree as follows:

- Services:** CONTRACTOR shall provide the services described in **Exhibit "A,"** attached hereto and incorporated herein by reference ("Services" or "Work").
- Terms:** CONTRACTOR shall commence work on 11/30/2011, or the day immediately following approval by the Superintendent if the aggregate amount CONTRACTOR has contracted with the District is below \$78,500 in the current fiscal year; or, approval by the Board of Education if the total contract(s) exceed \$78,500, whichever is later. The work shall be completed no later than 06/15/2012.
- Compensation:** OUSD agrees to pay CONTRACTOR for services satisfactorily rendered pursuant to this Agreement, a total fee not to exceed ten thousand four hundred and sixteen dollars and no cents. Dollars (\$ 10,416.00 ). This sum shall be for full performance of this Agreement and includes all fees, costs, and expenses incurred by Contractor including, but not limited to, labor, materials, taxes, profit, overhead, travel, insurance, subcontractor costs, and other costs.

If CONTRACTOR will be compensated hourly for services provided under this Contract, CONTRACTOR shall describe in Exhibit "A," attached hereto, the specific scope of services to be delivered on an hourly basis to OUSD.

OUSD shall not be liable to CONTRACTOR for any costs or expenses paid or incurred by CONTRACTOR in performing services for OUSD, except as follows: \_\_\_\_\_

Payment for Work shall be made for all undisputed amounts in monthly installment payments within forty-five (45) days after the CONTRACTOR submits an invoice to OUSD for Work actually completed and after OUSD's written approval of the Work, or the portion of the Work for which payment is to be made.

The granting of any payment by OUSD, or the receipt thereof by CONTRACTOR, shall in no way lessen the liability of CONTRACTOR to correct unsatisfactory work, although the unsatisfactory character of that work may not have been apparent or detected at the time a payment was made. Work, which does not conform to the requirements of this Agreement, may be rejected by the District and in that case must be replaced by CONTRACTOR without delay.

- Submittal of Documents:** CONTRACTOR shall not commence the Work under this Contract until CONTRACTOR has submitted and OUSD has approved evidence of the following:
  - Individual consultants:
    - Tuberculosis Clearance – Documentation from health care provider showing negative TB status within the last four years.
    - Completion of Pre-Consultant Screening Process – Attach letter from Human Resources Support Services showing completion of Pre-Consultant Screening for this current fiscal year.
    - Insurance Certificates and Endorsements – General Liability insurance in compliance with section 9 herein.
  - Agencies or organizations:
    - Insurance Certificates and Endorsements – Workers' Compensation insurance in compliance with section 9 herein.

- Equipment and Materials:** CONTRACTOR shall provide all equipment, materials, and supplies necessary for the performance of this Agreement *except*: \_\_\_\_\_ which shall not exceed a total cost of \$ \_\_\_\_\_.

**6. CONTRACTOR Qualifications / Performance of Services.**

**CONTRACTOR Qualifications.** CONTRACTOR warrants it is specially trained, experienced, competent and fully licensed to provide the Services required by this Agreement in conformity with the laws and regulations of the State of California, the United States of America, and all local laws, ordinances and/or regulations, as they may apply.

**Standard of Care.** CONTRACTOR warrants that CONTRACTOR has the qualifications and ability to perform the Services in a professional manner, without the advice, control, or supervision of OUSD. CONTRACTOR's services will be performed, findings obtained, reports and recommendations prepared in accordance with generally and currently accepted principles and practices of its profession for services to California school districts.

- Notices:** All notices and invoices provided for under this Agreement shall be in writing and either personally delivered during normal business hours or sent by U.S. Mail (certified, return receipt requested) with postage prepaid to the other party at the address set forth below:



Professional Services Contract

**OUSD Representative:**

Name: Patricia Sheehan  
Site /Dept.: 193/Reach Academy  
Address: 9860 Sunnyside St.  
Oakland, CA  
Phone: (510) 720-7775

**CONTRACTOR:**

Name: We Lead Ours  
Title: After School Instructor  
Address: 587 105th ave apt 7  
Oakland Ca 94603  
Phone: (510) 415-0216

Notice shall be effective when received if personally served or, if mailed, three days after mailing. Either party must give written notice of a change of address. CONTRACTOR shall submit invoices in a form that includes the name of the person providing the service, the service performed, the date service was rendered, and the hours spent on the work.

**8. Invoicing**

Invoices furnished by CONTRACTOR under this Agreement must be in a form acceptable to OUSD. All amounts paid by OUSD shall be subject to audit by OUSD.

1. Invoices shall include, but not be limited to: Consultant name, consultant address, invoice date, invoice sequence number, purchase order number, name of school or department service was provided to, period of service, number of hours of service, brief description of services provided, hourly rate, total payment requested.
2. Invoices from Agencies or Organizations must include evidence of compliance with section 19 herein:
  - i. Fingerprinting of Employees and Agents: Agency or organization must provide a current list of all employees, agents and volunteers working at an OUSD site when invoicing, and must include the Department of Justice ATI number for each person, and at statement that subsequent arrest records have been requested for each person listed.
  - ii. Tuberculosis Screening: The list must also include a statement that TB Clearance is on file for each person.

**9. Status of Contractor:** This is not an employment contract. CONTRACTOR, in the performance of this Agreement, shall be and act as an independent contractor. CONTRACTOR understands and agrees that it and all of its employees shall not be considered officers, employees, agents, partner, or joint venture of OUSD, and are not entitled to benefits of any kind or nature normally provided employees of OUSD and/or to which OUSD's employees are normally entitled, including, but not limited to, State Unemployment Compensation or Worker's Compensation. CONTRACTOR shall assume full responsibility for payment of all Federal, State, and local taxes or contributions, including unemployment insurance, social security and income taxes with respect to CONTRACTOR's employees. In the performance of the work herein contemplated, CONTRACTOR is an independent contractor or business entity, with the sole authority for controlling and directing the performance of the details of the work, OUSD being interested only in the results obtained.

**10. Insurance:**

1. Commercial General Liability Insurance: Unless specifically waived by OUSD, the following insurance is required:
  - i. If CONTRACTOR employs any person to perform work in connection with this Agreement, CONTRACTOR shall procure and maintain at all times during the performance of such work, Workers' Compensation Insurance in conformance with the laws of the State of California and Federal laws when applicable. Employers' Liability Insurance shall not be less than One Million Dollars (\$1,000,000) per accident or disease.

Check one of the boxes below:

CONTRACTOR is aware of the provisions of Section 3700 of the Labor Code which require every employer to be insured against liability for workers' compensation or to undertake self-insurance in accordance with the provisions of that code, and will comply with such provisions before commencing the performance of the Work of this Contract.

CONTRACTOR does not employ anyone in the manner subject to the workers' compensation laws of California.

- ii. CONTRACTOR shall maintain Commercial General Liability insurance, including automobile coverage with limits of One Million Dollars (\$1,000,000) per occurrence for bodily injury and property damage. The coverage shall be primary as to OUSD and shall name OUSD as an additional insured. Evidence of insurance must be attached. Endorsement of OUSD as an additional insured shall not affect OUSD's rights to any claim, demand, suit or judgment made, brought or recovered against CONTRACTOR. The policy shall protect CONTRACTOR and OUSD in the same manner as though each were separately issued. Nothing in said policy shall operate to increase the Insurer's liability as set forth in the policy beyond the amount or amounts shown or to which the Insurer would have been liable if only one interest were named as an insured.
- iii. If CONTRACTOR is offering OUSD professional advice under this Contract, CONTRACTOR shall maintain Errors and Omissions insurance or Professional Liability insurance with coverage limits of One Million Dollars (\$1,000,000) per claim.

**OR**

- iv. CONTRACTOR is not required to maintain any insurance under this agreement. (Completed and approved Waiver of Insurance Form is required.) Waiver of insurance does not release CONTRACTOR from responsibility for any claim or demand.

**11. Licenses and Permits:** CONTRACTOR shall obtain and keep in force all licenses, permits, and certificates necessary for the performance of this Agreement.

12. **Assignment:** The obligations of CONTRACTOR under this Agreement shall not be assigned by CONTRACTOR without the express prior written consent of OUSD.
13. **Anti-Discrimination.** It is the policy of OUSD that in connection with all work performed under Contracts there be no discrimination against any employee engaged in the work because of race, color, ancestry, national origin, religious creed, physical disability, medical condition, marital status, sexual orientation, gender, or age and therefore the CONTRACTOR agrees to comply with applicable Federal and California laws including, but not limited to, the California Fair Employment and Housing Act beginning with Government Code Section 12900 and Labor Code Section 1735 and OUSD policy. In addition, the CONTRACTOR agrees to require like compliance by all its subcontractor(s). Contractor shall not engage in unlawful discrimination in employment on the basis of actual or perceived; race, color, national origin, ancestry, religion, age, marital status, pregnancy, physical or mental disability, medical condition, veteran status, gender, sex or sexual orientation.
14. **Drug-Free / Smoke Free Policy.** No drugs, alcohol, and/or smoking are allowed at any time in any buildings and/or grounds on OUSD property. No students, staff, visitors, CONTRACTORS, or subcontractors are to use drugs on these sites.
15. **Indemnification:** CONTRACTOR agrees to hold harmless, indemnify, and defend OUSD and its officers, agents, and employees from any and all claims or losses accruing or resulting from injury, damage, or death of any person, firm, or corporation in connection with the performance of this Agreement. CONTRACTOR also agrees to hold harmless, indemnify, and defend OUSD and its elective board, officers, agents, and employees from any and all claims or losses incurred by any supplier, contractor, or subcontractor furnishing work, services, or materials to CONTRACTOR in connection with the performance of this Agreement. This provision survives termination of this Agreement.
16. **Copyright/Trademark/Patent/Ownership.** CONTRACTOR understands and agrees that all matters produced under this Agreement shall become the property of OUSD and cannot be used without OUSD's express written permission. OUSD shall have all right, title and interest in said matters, including the right to secure and maintain the copyright, trademark, and/or patent of said matter in the name of OUSD. CONTRACTOR consents to use of CONTRACTOR's name in conjunction with the sale, use, performance and distribution of the matters, for any purpose and in any medium. These matters include, without limitation, drawings, plans, specifications, studies, reports, memoranda, computation sheets, the contents of computer diskettes, artwork, copy, posters, billboards, photographs, videotapes, audiotapes, systems designs, software, reports, diagrams, surveys, source codes or any other original works of authorship, or other documents prepared by CONTRACTOR or its Sub-CONTRACTORS in connection with the Services performed under this Agreement. All works shall be works for hire as defined under Title 17 of the United States Code, and all copyrights in those works are the property of OUSD.
17. **Waiver:** No delay or omission by either party in exercising any right under this Agreement shall operate as a waiver of that or any other right or prevent a similar subsequent act from constituting a violation of the Agreement.
18. **Termination:** OUSD may at any time terminate this Agreement upon written notice to CONTRACTOR. OUSD shall compensate CONTRACTOR for services satisfactorily provided through the date of termination. In addition, OUSD may terminate this Agreement for cause should CONTRACTOR fail to perform any part of this Agreement. In the event of termination for cause, OUSD may secure the required services from another contractor. If the cost to OUSD exceeds the cost of providing the services pursuant to this Agreement, CONTRACTOR shall pay the additional cost.
19. **Conduct of Consultant.** CONSULTANT will adhere to the following staff requirements and provide OUSD with evidence of staff qualifications, consistent with invoicing requirements outlined in Section 8, which include:
  1. **Tuberculosis Screening**
  2. **Fingerprinting of Employees and Agents.** The fingerprinting and criminal background investigation requirements of Education Code section 45125.1 apply to CONTRACTOR's services under this Agreement and CONTRACTOR certifies its compliance with these provisions as follows: "CONTRACTOR certifies that CONTRACTOR has complied with the fingerprinting and criminal background investigation requirements of Education Code section 45125.1 with respect to all CONTRACTOR's employees, subcontractors, agents, and subcontractors' employees or agents ("Employees") regardless of whether those Employees are paid or unpaid, concurrently employed by OUSD, or acting as independent contractors of CONTRACTOR, who may have contact with OUSD pupils in the course of providing services pursuant to the Agreement, and the California Department of Justice has determined that none of those Employees has been convicted of a felony, as that term is defined in Education Code section 45122.1. Contractor further certifies that it has received and reviewed fingerprint results for each of its Employees and Contractor has requested and reviews subsequent arrest records for all Employees who may come into contract with OUSD pupils in providing services to the District under this Agreement.

Contractor initial:   76  

In the event that OUSD, in its sole discretion, at any time during the term of this contract, desires the removal of any CONSULTANT related persons, employee, representative or agent from an OUSD school site and, or property, CONSULTANT shall immediately upon receiving notice from OUSD of such desire, cause the removal of such person or persons.

20. **No Rights in Third Parties.** This Agreement does not create any rights in, or inure to the benefit of, any third party except as expressly provided herein.
21. **OUSD's Evaluation of CONTRACTOR and CONTRACTOR's Employees and/or Subcontractors.** OUSD may evaluate the CONTRACTOR's work in any way that OUSD is entitled to do so pursuant to applicable law. The OUSD's evaluation may include, without limitation:
  1. Requesting that OUSD employee(s) evaluate the CONTRACTOR and the CONTRACTOR's employees and subcontractors and each of their performance.
  2. Announced and unannounced observance of CONTRACTOR, CONTRACTOR's employee(s), and/or subcontractor(s).



Professional Services Contract

- 22. **Limitation of OUSD Liability.** Other than as provided in this Agreement, OUSD's financial obligations under this Agreement shall be limited to the payment of the compensation provided in this Agreement. Notwithstanding any other provision of this Agreement, in no event, shall OUSD be liable, regardless of whether any claim is based on contract or tort, for any special, consequential, indirect or incidental damages, including, but not limited to, lost profits or revenue, arising out of, or in connection with, this Agreement for the services performed in connection with this Agreement.
- 23. **Confidentiality.** The CONTRACTOR and all CONTRACTOR's agents, personnel, employee(s), and/or subcontractor(s) shall maintain the confidentiality of all information received in the course of performing the Services. CONTRACTOR understands that student records are confidential and agrees to comply with all state and federal laws concerning the maintenance and disclosure of student records. This requirement to maintain confidentiality shall extend beyond the termination of this Agreement. Contractors will be permitted access to student data only where permissible under state and federal law and only after executing OUSD's Confidentiality Agreement Regarding Student Data.
- 24. **Conflict of Interest.** CONTRACTOR shall abide by and be subject to all applicable OUSD policies, regulations, statutes or other laws regarding conflict of interest. CONTRACTOR shall not hire any officer or employee of OUSD to perform any service by this Agreement.  
  
CONTRACTOR affirms to the best of his/her/its knowledge, there exists no actual or potential conflict of interest between CONTRACTOR's family, business or financial interest and the services provided under this Agreement, and in the event of change in either private interest or services under this Agreement, any question regarding possible conflict of interest which may arise as a result of such change will be brought to OUSD's attention in writing.  
  
Through its execution of this Agreement, CONTRACTOR acknowledges that it is familiar with the provisions of section 1090 *et seq.* and section 87100 *et seq.* of the Government Code of the State of California, and certifies that it does not know of any facts which constitute a violation of said provisions. In the event CONTRACTOR receives any information subsequent to execution of this Agreement, which might constitute a violation of said provisions, CONTRACTOR agrees it shall notify OUSD in writing.
- 25. **Integration/Entire Agreement of Parties.** This Agreement constitutes the entire agreement between the Parties and supersedes all prior discussions, negotiations, and agreements, whether oral or written. This Agreement may be amended or modified only by a written instrument executed by both Parties.
- 26. **Litigation:** This Agreement shall be performed in Oakland, California and is governed by the laws of the State of California. The Alameda County Superior Court shall have jurisdiction over any state court litigation initiated to enforce or interpret this Agreement. If litigation is initiated, the prevailing party shall be entitled to reasonable attorney's fees and costs.
- 27. **Contract Contingent on Governing Board Approval:** The District shall not be bound by the terms of this Agreement until it has been formally approved by the District's Governing Board, and no payment shall be owed or made to CONTRACTOR absent formal approval. This Agreement shall be deemed to be approved when it has been signed by the Board of Education, and/or the Superintendent as its designee.
- 28. **Signature Authority.** Each party has the full power and authority to enter into and perform this Agreement, and the person signing this Agreement on behalf of each Party has been given the proper authority and empowered to enter into this Agreement.
- 29. **Counterparts.** This Agreement and all amendments and supplements to it may be executed in counterparts, and all counterparts together shall be construed as one document.
- 30. **Incorporation of Recitals and Exhibits.** The Recitals and each exhibit attached hereto are hereby incorporated herein by reference.

Summary of terms and compensation:

Anticipated start date: 11/30/2011 Work shall be completed by: 06/15/2012 Total Fee: \$ 10,416.00

OAKLAND UNIFIED SCHOOL DISTRICT

Maria Vantes  
 President, Board of Education  
 Superintendent or Designee

[Signature]  
Secretary, Board of Education

12-12-11  
Date

[Signature]  
Date

CONTRACTOR

[Signature]  
Contractor Signature

11-1-2011  
Date  
We Lead Ours After School Instructor  
Print Name, Title

Certified: [Signature] 11/14/12  
Edgar Rakestraw, Jr., Secretary  
Board of Education

LEGISLATIVE FILE  
File ID Number 11-3134  
Introduction Date 1-11-12  
Enactment Number 12-0030  
Enactment Date 1-11-12



EXHIBIT "A" Scope of Work

DESCRIPTION OF SERVICES TO BE PERFORMED BY CONTRACTOR

CONTRACTOR's entire Proposal is not made part of this Agreement. [IF A CONTRACTOR PROVIDES AN ACCEPTABLE DESCRIPTION OF SERVICES AS PART OF A PROPOSAL, THAT DESCRIPTION OF SERVICES CAN BE ATTACHED WITHOUT ANY TERMS, CONDITIONS, LIMITATIONS, ETC., FROM THAT PROPOSAL.]

Summary for Board Memo and Board Agenda – Must accurately align with scope of work below.

Ratification by the board of education of a professional services contract between Oakland Unified School district and We Lead Ours, Oakland Ca, for latter to provide instruction to students in conflict resolution and leadership during the after school program; consultant will instruct students in grades k-5 daily for the after school program at Reach Academy for the period of 11/30/2011 through 06/15/2012 in the amount of \$10416.00.

SCOPE OF WORK

We lead Ours will provide a maximum of 416.00 hours of services at a rate of \$25.00 per hour for a total not to exceed \$10,416.00. Services are anticipated to begin on 11/30/2011 and end on 06/15/2012.

1. Description of Services to be Provided: Provide a description of the service(s) the contractor will provide. Be specific about what service(s) OUSD is purchasing and what this Contractor will do.

Contractor will work daily in the after school program from 3pm -6pm instructing, implementing and managing a leadership and conflict resolution program. Contractor will supervise interns, and tutors selected to work with specified students with a focus on those where behavior and below basic academic achievement are of concern. contractor will provide biweekly reports regarding student progress academic and otherwise to the Site Liaison.

2. Specific Outcomes: What are the expected outcomes from the services of this Contract? Be specific. For example, as a result of the service(s): 1) How many more Oakland children are graduating from high school? 2) How many more Oakland children are attending school 95% or more? 3) How many more students have meaningful internships and/or paying jobs? 4) How many more Oakland children have access to, and use, the health services they need? Provide details of program participation (Students will...) and measurable outcomes (Participants will be able to...). NOT THE GOALS OF THE SITE OR DEPARTMENT.

140 students will take leadership and or conflict resolution workshops or classes with an instructor. Students in 4th and 5th grades will take classes daily. Students in 1st -3rd will take classes twice weekly. all students will receive homework assistance, learn time management and planning skills resulting in improved academic growth. additionally students will learn a comprehensive conflict management system. With consistent attendance students will improve both social and academic skills. these statements fully support the SPSA goal of improving grades, test scores and implementing a common discipline management system within the school.

3. Alignment with District Strategic Plan: Indicate the goals and visions supported by the services of this contract: (Check all that apply.)

- Ensure a high quality instructional core
Develop social, emotional and physical health
Create equitable opportunities for learning
High quality and effective instruction
Prepare students for success in college and careers
Safe, healthy and supportive schools
Accountable for quality
Full service community district



**4. Alignment with Single Plan for Student Achievement (required if using State or Federal Funds)**

Please select:

- Action Item included in Board Approved SPSA (no additional documentation required)** – Action Item Number <sup>10</sup> \_\_\_\_\_
- Action Item added as modification to Board Approved SPSA** – Submit the following documents to the Resource Manager either electronically via email of scanned documents, fax or drop off.
1. Relevant page of SPSA with action item highlighted. Page must include header with the word "Modified", modification date, school site name, both principal and school site council chair initials and date.
  2. Meeting announcement for meeting in which the SPSA modification was approved.
  3. Minutes for meeting in which the SPSA modification was approved indicating approval of the modification.
  4. Sign-in sheet for meeting in which the SPSA modification was approved.
-

**ACORD**

TM.

**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

11/22/2011

PRODUCER Phone: 510-465-3993 Fax: 510-485-5586  
**KHOE & ASSOCIATES INSURANCE SERVICES**  
 328 15TH ST.  
 OAKLAND CA 94612

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION  
 ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE  
 HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR  
 ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

Agency Lic#: 0D06528

**INSURERS AFFORDING COVERAGE****NAIC #**

INSURED  
**TANZANIA ENSKIP**  
**TREE OF LIFE FOUNDATION**  
 3758 GRAND AVE, #30  
 OAKLAND CA 94610

INSURER A: **THE HARTFORD**

INSURER B:

INSURER C:

INSURER D:

INSURER E:

**COVERAGES**

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR<br>LTR | ADDL<br>INSRD                       | TYPE OF INSURANCE   | POLICY NUMBER      | POLICY EFFECTIVE<br>DATE (MM/DD/YY) | POLICY EXPIRATION<br>DATE (MM/DD/YY) | LIMITS  |                     |
|-------------|-------------------------------------|---|--------------------|-------------------------------------|--------------------------------------|---|---------------------|
| A           |                                     | <b>GENERAL LIABILITY</b>  | <b>57SBMBB5155</b> | <b>11/03/11</b>                     | <b>11/03/12</b>                      | EACH OCCURRENCE   | \$ <b>1,000,000</b> |
|             | <input checked="" type="checkbox"/> | COMMERCIAL GENERAL LIABILITY  |                    |                                     |                                      | DAMAGE TO RENTED PREMISES (Ea occurrence)   | \$ <b>1,000,000</b> |
|             | <input type="checkbox"/>            | CLAIMS MADE <input checked="" type="checkbox"/> OCCUR               |                    |                                     |                                      | MED. EXP (Any one person)   | \$ <b>10,000</b>    |
|             | <input type="checkbox"/>            |   |                    |                                     |                                      | PERSONAL & ADV INJURY   | \$ <b>1,000,000</b> |
|             | <input type="checkbox"/>            |   |                    |                                     |                                      | GENERAL AGGREGATE   | \$ <b>2,000,000</b> |
|             | <input type="checkbox"/>            |   |                    |                                     |                                      | PRODUCTS-COMP/OP AGG.   | \$ <b>2,000,000</b> |
|             | <input type="checkbox"/>            |   |                    |                                     |                                      | GENL AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC |                     |
|             |                                     | <b>AUTOMOBILE LIABILITY</b>   |                    |                                     |                                      | COMBINED SINGLE LIMIT (Ea accident)   | \$                  |
|             |                                     | <input type="checkbox"/> ANY AUTO                                   |                    |                                     |                                      | BODILY INJURY (Per person)  | \$                  |
|             |                                     | <input type="checkbox"/> ALL OWNED AUTOS                            |                    |                                     |                                      | BODILY INJURY (Per accident)  | \$                  |
|             |                                     | <input type="checkbox"/> SCHEDULED AUTOS                            |                    |                                     |                                      | PROPERTY DAMAGE (Per accident)  | \$                  |
|             |                                     | <input type="checkbox"/> HIRED AUTOS                                |                    |                                     |                                      |   |                     |
|             |                                     | <input type="checkbox"/> NON-OWNED AUTOS                            |                    |                                     |                                      |   |                     |
|             |                                     | <b>GARAGE LIABILITY</b>   |                    |                                     |                                      | AUTO ONLY - EA ACCIDENT   | \$                  |
|             |                                     | <input type="checkbox"/> ANY AUTO                                   |                    |                                     |                                      | OTHER THAN AUTO ONLY: EA ACC  | \$                  |
|             |                                     |   |                    |                                     |                                      | AGG   | \$                  |
|             |                                     | <b>EXCESS / UMBRELLA LIABILITY</b>                                  |                    |                                     |                                      | EACH OCCURRENCE   | \$                  |
|             |                                     | <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE |                    |                                     |                                      | AGGREGATE   | \$                  |
|             |                                     |   |                    |                                     |                                      |   | \$                  |
|             |                                     | <input type="checkbox"/> DEDUCTIBLE                                 |                    |                                     |                                      |   | \$                  |
|             |                                     | <input type="checkbox"/> RETENTION \$                               |                    |                                     |                                      |   | \$                  |
|             |                                     | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>                |                    |                                     |                                      | WC STATU-TORY LIMITS  | OTHER               |
|             |                                     | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?           |                    |                                     |                                      | E.L. EACH ACCIDENT  | \$                  |
|             |                                     | If yes, describe under SPECIAL PROVISIONS below                     |                    |                                     |                                      | E.L. DISEASE-EA EMPLOYEE  | \$                  |
|             |                                     |   |                    |                                     |                                      | E.L. DISEASE-POLICY LIMIT   | \$                  |
|             |                                     | OTHER:  |                    |                                     |                                      |   |                     |

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/ SPECIAL PROVISIONS**

THE OAKLAND UNIFIED SCHOOL DISTRICT IS NAMED ADDITIONAL INSURED WITH RESPECT TO CONTRACTOR FOR SERVICES ( MANAGEMENT CONSULTANT)

\*10 DAYS NOTICE OF CANCELLATION FOR NON-PAYMENT OF PREMIUM

**CERTIFICATE HOLDER****CANCELLATION**

THE OAKLAND UNIFIED SCHOOL DISTRICT  
 1025 2ND AVE  
 RISK MANAGEMENT DEPT, RM 115A  
 OAKLAND, CA 94606

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

Attention:

Mae



POLICY NUMBER: 57SBMBB5155

COMMERCIAL GENERAL LIABILITY

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **ADDITIONAL INSURED-OWNERS, LESSEES OR CONTRACTORS (Form B)**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY

### **SCHEDULE**

**Name of Person or Organization;** THE OAKLAND UNIFIED SCHOOL DISTRICT  
1025 2ND AVE  
RISK MANAGEMENT DEPT, RM 115A  
OAKLAND, CA 94606

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of "your work" for that insured by or for you



WELEADO-01

LINDAO

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
9/28/2011

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

|  |  |  |
|--|--|--|
| <b>PRODUCER License # 0167057</b><br>McDermott-Costa Co., Inc.<br>PO Box 758<br>San Leandro, CA 94577            | <b>CONTACT NAME:</b><br>PHONE (A/C, No., Ext): (510) 351-7460      FAX (A/C, No.): (510) 357-3230<br>E-MAIL ADDRESS: |  |
|  | <b>INSURER(S) AFFORDING COVERAGE</b> NAIC #  |  |
| <b>INSURED</b><br><br>We Lead Ours/Trestin George<br>Lamont Robinson<br>587 105th Avenue #7<br>Oakland, CA 94603 | <b>INSURER A:</b> Berkeley Life & Health   |  |
|  | <b>INSURER B:</b>  |  |
|  | <b>INSURER C:</b>  |  |
|  | <b>INSURER D:</b>  |  |
|  | <b>INSURER E:</b>  |  |
|  | <b>INSURER F:</b>  |  |

**COVERAGES**      **CERTIFICATE NUMBER:**      **REVISION NUMBER:**


THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE  | ADDL/SUBR INSR WVD  | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS                                    |              |
|----------|--|---|---------------|-------------------------|-------------------------|---|--------------|
| A        | <b>GENERAL LIABILITY</b><br><input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR   |   | WRD180035     | 1/26/2011               | 1/26/2012               | EACH OCCURRENCE                           | \$ 1,000,000 |
|          |  | GEN'L AGGREGATE LIMIT APPLIES PER:<br><input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC |               |                         |                         | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 300,000   |
|          |  |   |               |                         |                         | MED EXP (Any one person)                  | \$ 5,000     |
|          |  |   |               |                         |                         | PERSONAL & ADV INJURY                     | \$ 1,000,000 |
|          |  |   |               |                         |                         | GENERAL AGGREGATE                         | \$ 2,000,000 |
|          |  |   |               |                         |                         | PRODUCTS - COMP/OP AGG                    | \$ 2,000,000 |
|          |  |   |               |                         |                         |   | \$           |
|          | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS |   |               |                         |                         | COMBINED SINGLE LIMIT (Ea accident)       | \$           |
|          |  |   |               |                         |                         | BODILY INJURY (Per person)                | \$           |
|          |  |   |               |                         |                         | BODILY INJURY (Per accident)              | \$           |
|          |  |   |               |                         |                         | PROPERTY DAMAGE (Per accident)            | \$           |
|          |  |   |               |                         |                         |   | \$           |
|          | <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR<br><b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE<br>DED    RETENTION \$  |   |               |                         |                         | EACH OCCURRENCE                           | \$           |
|          |  |   |               |                         |                         | AGGREGATE                                 | \$           |
|          |  |   |               |                         |                         |   | \$           |
|          | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below  | Y/N<br><input type="checkbox"/> N/A   |               |                         |                         | WC STATUTORY LIMITS                       | OTHER        |
|          |  |   |               |                         |                         | E.L. EACH ACCIDENT                        | \$           |
|          |  |   |               |                         |                         | E.L. DISEASE - EA EMPLOYEE                | \$           |
|          |  |   |               |                         |                         | E.L. DISEASE - POLICY LIMIT               | \$           |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

The Oakland Unified School District is Named as Additional Insured with respect to contract for services (Management Consultant).

10 Days notice of cancellation in the event of non-payment of premium.

|  |   |
|--|---|
| <b>CERTIFICATE HOLDER</b><br><br>The Oakland Unified School District<br>1025 2nd Avenue<br>Oakland, CA 94606 | <b>CANCELLATION</b><br><br>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
|  | AUTHORIZED REPRESENTATIVE<br>   |

© 1988-2010 ACORD CORPORATION. All rights reserved.



# PROFESSIONAL SERVICES CONTRACT ROUTING FORM 2011-2012

## Basic Directions

Additional directions and related documents are in the School Operations Library (<http://intranet.ousd.k12.ca.us>)

Services cannot be provided until the contract is fully approved and a Purchase Order has been issued.

- Contractor and OUSD contract originator (principal or manager) reach agreement about scope of work and compensation.
- Ensure contractor has OUSD Vendor Number and meets the consultant requirements (including insurance and background check)
- Contractor and OUSD contract originator complete the contract packet together and attach required attachments.
- OUSD contract originator creates the requisition.
- Within 2 weeks of creating the requisition the OUSD contract originator submits complete contract packet for approval.

Attachment Checklist

- For individual consultants: HRSS Pre-Consultant Screening Letter for current fiscal year
- For individual consultants: Proof of negative tuberculosis status within past 4 years
- For All Consultants: Statement of qualifications (organization); or resume (individual consultant)
- For All Consultants: Proof of Commercial General Liability insurance naming OUSD as an Additional Insured
- For All Consultants with employees: Proof of workers compensation insurance

OUSD Staff Contact Emails about this contract should be sent to: [lavette.king@ousd.k12.ca.us](mailto:lavette.king@ousd.k12.ca.us)

## Contractor Information

|                    |   |                  |   |       |    |     |       |
|--------------------|---|------------------|---|-------|----|-----|-------|
| Contractor Name    | We lead Ours  | Agency's Contact | Trestin George  |       |    |     |       |
| OUSD Vendor ID #   | V060235   | Title            | Instructor  |       |    |     |       |
| Street Address     | 587 105th ave apt 7   | City             | Oakland   | State | Ca | Zip | 94603 |
| Telephone          | (510) 415-0216  | Email            |   |       |    |     |       |
| Contractor History | Previously been an OUSD contractor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                  | Worked as an OUSD employee? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |       |    |     |       |

## Compensation and Terms – Must be within the OUSD Billing Guidelines

|                              |            |                    |            |                       |              |
|------------------------------|------------|--------------------|------------|-----------------------|--------------|
| Anticipated start date       | 11/30/2011 | Date work will end | 06/15/2012 | Other Expenses        |              |
| Pay Rate Per Hour (required) | \$ 25.00   | Number of Hours    | 416.00     | Total Contract Amount | \$ 10,416.00 |

## Budget Information

If you are planning to multi-fund a contract using LEP funds, please contact the State and Federal Office before completing requisition.

| Resource #             | Resource Name | Org Key                      | Object Code | Amount              |
|------------------------|---------------|------------------------------|-------------|---------------------|
| 6010                   | Prop49/ASES   | 1931553401                   | 5825        | \$ 10,416.00        |
|                        |               |                              | 5825        | \$                  |
|                        |               |                              | 5825        | \$                  |
| <b>Requisition No.</b> | RO202094      | <b>Total Contract Amount</b> |             | <b>\$ 10,416.00</b> |

## Approval and Routing (in order of approval steps)

Services cannot be provided before the contract is fully approved and a Purchase Order is issued. Signing this document affirms that to your knowledge services were not provided before a PO was issued.

OUSD Administrator verifies that this vendor does not appear on the Excluded Parties List (<https://www.epls.gov/epls/search.do>)

|  |  |                         |                  |               |  |
|--|--|-------------------------|------------------|---------------|--|
| 1.   | <b>Administrator / Manager (Originator)</b>  | Name                    | Patricia Sheehan | Phone         | (510) 720-7775   |
|  | Site / Department  | 193/Reach Academy       |                  | Fax           | (510) 729-7779   |
|  | Signature  | <i>Patricia Sheehan</i> |                  | Date Approved | 11-3-2011  |
| 2.   | <b>Resource Manager, if using funds managed by:</b> <input type="checkbox"/> State and Federal <input type="checkbox"/> Quality, Community, School Development <input type="checkbox"/> Complementary Learning / After School Programs |                         |                  |               |  |
|  | <input type="checkbox"/> Scope of work indicates compliant use of restricted resource and is in alignment with school site plan (SPSA)   |                         |                  |               |  |
|  | Signature  | <i>Thommas</i>          |                  | Date Approved | 11/16/11   |
| 3.   | <b>Regional Executive Officer</b>  |                         |                  |               |  |
|  | <input checked="" type="checkbox"/> Services described in the scope of work align with needs of department or school site  |                         |                  |               |  |
|  | <input checked="" type="checkbox"/> Consultant is qualified to provide services described in the scope of work   |                         |                  |               |  |
|  | Signature  | <i>W.M.</i>             |                  | Date Approved | 12/12/11   |
| 4.   | <b>Deputy Superintendent Instructional Leadership / Deputy Superintendent Business Operations</b>  |                         |                  |               | <input type="checkbox"/> Consultant Aggregate Under \$50,000 |
|  | Signature  | <i>Maria Santa</i>      |                  | Date Approved | 12-12-11   |
| 5.   | <b>Superintendent, Board of Education</b> Signature on the legal contract  |                         |                  |               |  |
| <b>Legal</b> Required if not using standard contract |  | Approved                | Denied - Reason  | Date          |  |
| <b>Procurement</b>                                   | Date Received  | PO Number               |                  | P1204225      |  |