| Board Office Use: Legislative File Info. | | | | |
|------------------------------------------|------------|--|--|--|
| File ID Number: | 14-1252 | | | |
| Introduction Date: | 06/25/2014 | | | |
| Enactment Number: | | | | |
| Enactment Date: | | | | |



Memo

Board of Education To:

GARY YEE, EdD, ACTING SUPERINTENDENT: By: MARIA SANTOS, Deputy Superintendent From:

Board Meeting Date: 06/25/2014

Professional Service Contract Subject:

> **Contractor:** Aspiranet, dba Experience Corps of San Francisco, CA

Services for: 146-PIEDMONT AVENUE

Board Action Requested Ratification by the Board of Education of a Professional Services Contract between the District and and Recommendation: Aspiranet, dba Experience Corps, San Francisco, CA, for the latter to provide: trained academic tutors to address the academic needs of students performing basic to below basic on the Common Core and various district benchmark exams. They will support the school in meeting the needs of all students including but not limited to English Language Learners for the period of 09/16/2013 through 06/12/2014 in an amount not to exceed \$7,000.00.

Background:

(A one paragraph explanation of why the consultant's services are needed.) Many students at Piedmont Avenue Elementary continue to struggle to meet grade level benchmark. They have an increasing need for individualized support on a consistent basis and would greatly benefit from one-on-one and/or small group tutoring.

Discussion:

(QUANTIFY what is being purchased.)

trained academic tutors to address the academic needs of students performing basic to below basic on the Common Core and various district benchmark exams. They will support the school in meeting the needs of all students including but not limited to English Language Learners

| Board Office Use: Legislative File Info. | | | |
|------------------------------------------|--|--|--|
| File ID Number: 14-1252 | | | |
| Introduction Date: 06/25/2014 | | | |
| Enactment Number: | | | |
| Enactment Date: | | | |



Fiscal Impact: Funding resources below not to exceed \$7,000.00

\$7,000.00 General Purpose-Unrestricted

Attachments: Professional Services Contract including Scope of Work

Waiver Summary

Resume / Statement of Qualifications

EPLS Search Results Page

Insurance Certification (if no Waiver was granted)

| Board Office Use: Legislative File Info. | | | | | |
|------------------------------------------|------------|--|--|--|--|
| File ID Number 14-1252 | | | | | |
| Introduction Date | 06/25/2014 | | | | |
| Enactment Number | | | | | |
| Enactment Date | | | | | |

profession for services to California school districts.

eRev. 3/11/13



PROFESSIONAL SERVICES CONTRACT 2013-2014

| Thi | is Agreement is entered into between Aspiranet, dba Experience Corps |
|--------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| (Cothe | ONTRACTOR) and Oakland Unified School District (OUSD). OUSD is authorized by Government Code Section 53060 to contract for furnishing of special services and advice in financial, economic, accounting, engineering, legal, and administrative matters with persons ecially trained, experienced, and competent to perform such services. CONTRACTOR warrants it is specially trained, experienced, and mpetent to provide such services. The parties agree as follows: |
| 1. | Services : CONTRACTOR shall provide the ("Services" or "Work") as described in Exhibit "A," attached hereto and incorporated herein by reference. |
| 2. | Terms : CONTRACTOR shall commence work on09/16/2013, or the day immediately following approval by the Superintendent |
| | if the aggregate amount CONTRACTOR has contracted with the District is belows84,100.00 in the current fiscal year; or, approval |
| | by the Board of Education if the total contract(s) exceed, whichever is later. The work shall be completed no later than |
| 3. | Compensation: OUSD agrees to pay CONTRACTOR for services satisfactorily rendered pursuant to this Agreement. The compensation under this Contract shall not exceed |
| | Dollars (\$7,000.00) [per fiscal year], at an hourly billing rate not to exceed per hour. 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: No Reimbursements |
| | Payment for Work shall be made for all undisputed amounts in monthly installment payments within forty-five (45) days after 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. |
| 4. | Equipment and Materials : CONTRACTOR shall provide all equipment, materials, and supplies necessary for the performance of this NONE |
| | Agreement except: |
| | which shall not exceed a total cost of |
| 5. | 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 |

6. **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. Invoices shall include, but not be limited to: Contractor name, Contractor address, invoice date, invoice number, purchase order number, name of school or department service was provided to, period of service, name of the person performing the service, date service was rendered, brief description of services provided, number of hours of service, hourly rate, total payment requested.

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

7. **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:

| Requisition No. R0412500 | P.O. No. |
|--------------------------|------------|
| requisition No. | 1 .0. 110. |

Professional Services Contract

| OUSD Re | presentative: | CONTRA | ACTOR: |
|------------|-----------------------|----------|-------------------------|
| Name: | ZARINA AHMAD | Name: _ | Vernon Brown |
| Site /Dept | . 146-PIEDMONT AVENUE | Title: | CEO |
| Address: | 4314 Piedmont Ave | Address: | 3925 Noriega Street |
| ·- | Oakland, CA 94611 | | San Francisco, CA 94122 |
| Phone: | 510-654-7377 | Phone: | 510-495-4966 |

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.

8. **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.

9. **Insurance**:

- 1. 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

eR

- 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.
- 10. Licenses and Permits: CONTRACTOR shall obtain and keep in force all licenses, permits, and certificates necessary for the performance of this Agreement.
- 11. **Assignment**: The obligations of CONTRACTOR under this Agreement shall not be assigned by CONTRACTOR without the express prior written consent of OUSD.
- 12. **Non-Discrimination**: It is the policy of OUSD that in connection with all work performed under Contracts there be no discrimination because of race, color, ancestry, national origin, religious creed, physical disability, medical condition, marital status, sexual orientation, gender, or age; therefore, 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, 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.

| | | R0412500 | P1411188 |
|-------------|-------------|----------|----------|
| ev. 3/11/13 | Page 2 of 6 | | P.O No |
| | 9 | | |

- 13. **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 controlled substances, alcohol or tobacco on these sites.
- 14. **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.
- 15. 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.
- 16. **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.
- 17. **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.
- 18. **Conduct of CONTRACTOR**: CONTRACTOR will adhere to the following staff requirements and provide OUSD with evidence of staff qualifications, which include:
 - 1. **Tuberculosis Screening**: CONTRACTOR is required to screen employees who will be working at OUSD sites for more than six hours. CONTRACTOR affirms that each employee has current proof of negative TB testing on file and TB results are monitored.
 - 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.

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

- 19. **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.
- 20. OUSD's Evaluation of CONTRACTOR and CONTRACTOR's Employees and/or Subcontractors. OUSD may evaluate 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.
 - Announced and unannounced observance of CONTRACTOR, CONTRACTOR's employee(s), and/or subcontractor(s).
- 21. 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.
- 22. **Confidentiality**: 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

| | | R0412500 | P1411188 | |
|---------------|-------------|-----------------|----------|--|
| eRev. 3/11/13 | Page 3 of 6 | Requisition No. | P.O No | |

Professional Services Contract

OAKLAND UNIELED COUGOL DISTRICT

access to student data only where permissible under state and federal law and only after executing OUSD's Confidentiality Agreement Regarding Student Data.

- 23. **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.
- 24. **Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion**: CONTRACTOR certifies to the best of his/her/its knowledge and belief, that it and its principals: Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency according to Federal Acquisition Regulation Subpart 9.4, and by signing this contract, certifies that this vendor does not appear on the Excluded Parties List. (https://www.epls.gov/epls/search.do)
- 25. **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.
- 26. **Incorporation of Recitals and Exhibits**: The Recitals and each exhibit attached hereto are hereby incorporated herein by reference.
- 27. **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.
- 28. **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.
- 29. **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.
- 30. Contract Contingent on Governing Board Approval: OUSD shall not be bound by the terms of this Agreement until it has been formally approved by OUSD'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.

CONTRACTOR

| CARLAND UNIT IED SCHOOL DISTRIC | , 1 | CONTRACTOR | | | |
|---------------------------------------------------------------|------------|-----------------------|------------|--|--|
| MARIA SANTOS | 05/27/2014 | Vernon Brown | 05/27/2014 | | |
| ☐ President, Board of Education ☐ Superintendent or Designee | Date | Contractor eSignature | Date | | |
| | | Vernon Brown, | CEO | | |
| Secretary, Board of Education | Date | Print Name, Title | | | |

eRev. 3/11/13 Page 4 of 6 Requisition No. ______ P.O No. _____

EXHIBIT "A" SCOPE OF WORK

[IF A CONTRACTOR PROVIDES AN ACCEPTABLE DESCRIPTION OF SERVICES AS PART OF A PROPOSAL, THAT DESCRIPTION OF SERVICES MAY BE ATTACHED <u>WITHOUT</u> ANY TERMS, CONDITIONS, LIMITATIONS, ETC., FROM THAT PROPOSAL.]

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.

Experience Corps, an award-winning, innovative nonprofit organization, will provide fully screened and trained tutors and mentors to support underserved students in K-3 classrooms, providing one-on-one and/or small group support, with a focus on literacy. Specifically at Piedmont Avenue Elementary, Experience Corps will focus on grades K-3 and provide a minimum of 50 hours of support per week to a minimum of eight (8) classrooms for a total minimum of 250 hours of tutoring and mentoring support. There will also be a Site Coordinator to support all program efforts, including liaising between tutors, teachers and other school staff, overseeing all administrative duties, including program monitoring, data gathering and program evaluation.

R0412500 P1411188 eRev. 3/11/13 Page 5 of 6 Requisition No. _____ P.O. No. ______.

| 2. | of the sattendi Oaklan | service(s): 1) How many more Oakland children are ng school 95% or more? 3) How many more stude d children have access to, and use, the health s | from the services of this Contract? Be specific. For example, as a result e graduating from high school? 2) How many more Oakland children are ents have meaningful internships and/or paying jobs? 4) How many more services they need? Provide details of program participation (Students etc). NOT THE GOALS OF THE SITE OR DEPARTMENT. |
|----|---------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | provide | e students with high quality instruction and enrement is expected to increase as a result of the | upport the overall goals of Piedmont Avenue Elementary to ichment both during and after the school day. Student e program integration and strategic support provided by |
| | | | |
| | | | |
| | | | |
| • | A I: a.u. | no má viith Diotriot Cároto nio Dlong le die de de | |
| 3. | | nent with district Strategic Plan: Indicate the all that apply.) | e goals and visions supported by the services of this contract: |
| | ⋉ En: | sure a high quality instructional core | Prepare students for success in college and careers |
| | ⋉ De | velop social, emotional and physical health | Safe, healthy and supportive schools |
| | 区re | eate equitable opportunities for learning | Accountable for quality |
| | ⊠ Hig | h quality and effective instruction | ▼ Full service community district |
| 4. | Please | select: | Plan – CSSSP (required if using State or Federal Funds): |
| | | tion Item included in Board Approved CSSSP: (| no additional documentation required) |
| | _ | Item Number(s): Not Applicable | |
| | | No Restricted Funds | |
| | | | |
| | | tion Item added as modification to Board A anager either electronically via email of scanned do | pproved CSSSP – Submit the following documents to the Resource cuments, fax or drop off. |
| | 1. | Relevant page of CSSSP with action item highlig date, school site name, both principal and school | hted. Page must include header with the word "Modified", modification site council chair initials and date. |
| | 2. | Meeting announcement for meeting in which the | CSSSP modification was approved. |
| | 3. | Minutes for meeting in which the CSSSP modification | ation was approved indicating approval of the modification. |
| | 4. | Sign-in sheet for meeting in which the CSSSP me | odification was approved. |
| | | | |
| | | | |
| | | | |

eRev. 3/11/13 Page 6 of 6 Requisition No. _____ P.O. No. _____

ContractsOnline: Contract Waiver Summary

Site Number-Name: 146-PIEDMONT AVENUE

Principal / Department Head: ZARINA AHMAD

Contractor Name: Vernon Brown

Business Name: Aspiranet, dba Experience Corps

Contract Type: Standard

Anticipated Start Date: 09/16/2013 Contract End Date: 06/12/2014

Rate Type: FLAT Contract Amount: \$7,000.00

Applicable Waivers

Approved by Risk Management

Insurance-Reduction Waiver Status: NA

Waiver-Reduction Type: \$1,000,000 Required

Other Reduction Amount: NA

Approval Date:

Approved by Deputy Superintendent

Billing Waiver Status: Approved Approval Date: 05/23/2014

Fingerprint Waiver Status: NA Approval Date:

TB Test Waiver Status: NA Approval Date:





2013-14 School Year

To Whom It May Concern:

Experience Corps Bay Area submits this Statement of Qualifications to the Oakland Unified School District (OUSD) to support our work in Oakland in a unique intervention program which addresses two of the community's major challenges: improving academic achievement among at-risk elementary school students and increasing healthy aging behaviors among older adults. Experience Corps Bay Area¹ (ECBA), operating successfully since 1998, is a unique civic engagement program – based on a national model (currently in 20 cities) – which recruits, trains and engages teams of local older adults (50+) to work as tutors and mentors before, during and after school in low-performing schools with students who have poor grades and/or test scores, learning disabilities or are limited English-proficient. Launched in three elementary schools in Oakland in 2005, EC Oakland is now in eight (8) of OUSD's most vulnerable Title I elementary schools, where significant proportions of children are students of color, economically disadvantaged and/or English language learners. Our mission is to increase the academic performance and self-confidence of these students by providing focused, individualized attention, as well as create an intergenerational bridge between children and older adults, thereby enhancing the school and the overall community. It is a unique multi-level approach to health improvement that has tremendous benefits, and coupled with its youth education focus, serves a dual-benefit to society.

All members of the ECBA staff have either extensive professional experience and/or educational backgrounds, including education, youth development, gerontology, training, and/or program evaluation. For example, all of our Site Coordinators have BA or BS degrees, some Masters degrees, and one a PhD in Education. The Member Support Director has her Masters Degree in English, college-level teaching experience and six years of on-the-ground recruitment experience. Our Literacy Trainer is a credentialed teacher with nearly a decade of experience teaching low-income students. While our Special Projects Coordinator managed the implementation of complex evaluations, including federal grant reporting requirements, and has her degree from UC Davis. Full staff resumes are available upon request.

All ECBA tutors/mentors have completed written applications, been interviewed in person, received fingerprint/background/reference checks (DOJ and FBI), been cleared for TB, and completed pre-service and in-service training in youth development, tutoring techniques, mentoring skills, conflict resolution, behavioral management topics. They also continue to receive on-site support and on-the-job training through our Site Coordinators and monthly team meetings.

In terms of intended outcomes and evaluating our success, the program tracks educational outcomes for students (based on teacher assessments) – for example: ECBA Members impact on students' concentration in class, students' attainment of grade level benchmarks, and students' motivation to learn (as well as the mental and physical health outcomes for older adults). In addition, ECBA members receive regular performance reviews to ensure they are providing high quality services. All of these result in increased academic benchmarks for a greater number of Oakland students as well as improved health benchmarks for local older adults. This intensive focus on results can also make OUSD confident that its support in Experience Corps will be well invested.

If you have any questions or wish to discuss this further, please do not hesitate to reach me at 510-495-4966 or dmoren@aspiranet.org.

Best regards,

David Moren

Director of School Relations, Experience Corps Bay Area

P.S. We are also proud to have been given OUSD's 2012-13 "Partner Organization of the Year" Award.

Experience Corps Bay Area is a program of Aspiranet, a California 501(c)3 non-profit serving children, families and communities since 1975.

ACORD ™ CERTIFICATE OF LIABILITY INSURANCE

Date (MM/DD/YR) 12/13/13

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 require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of

such endorsement(s).

PRODUCER

| Heffernan Insurance Brokers |
|-----------------------------|
| 1350 Carlback Avenue |
| Walnut Creek, CA 94596 |
| CA License #0564249 |
| |

CONTACT NAME:

PHONE (A/C,No,Ext): **925-934-8500**

FAX (A/C,No):

925-934-8278

EMAIL ADDRESS

INSURERS AFFORDING COVERAGE

INSURER A: Lexington Ins. Co. 19437

INSURER B: Granite State Ins. Co. 23809

INSURER C:

INSURER D: INSURER E: INSURER F:

INSURED Aspiranet

400 Oyster Point Blvd., Suite 501 South San Francisco, CA 94080

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT 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.

| 30011 | T OLICILO. LIMITO STIOVVIA MIAT TIAVE DELIA NE | | | ID OLI (IIVIO. | T . | 1 | T | |
|-------------|--------------------------------------------------------------|----------------------|-------------|--------------------|----------------------------|----------------------------|------------------------------------------------------------------------|-------------------------------------------|
| INSR LTR | TYPE OF INSURANCE | ADD L INS R | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS | |
| | GENERAL L LIABILITY | | | | | | EACH OCCURRENCE | \$ 1,000,000 |
| Α | X COMMERCIAL GENERAL LIABILITY | Х | | 41-LX-008996132-8 | 12/16/13 | 12/16/14 | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 200,000 |
| | CLAIMS-MADE X OCCUR | | | | | | MED EXP (Any one person) | \$ 5,000 |
| | X \$25,000 Per Occurrence Deductible | | | | | | PERSONAL & ADV INJURY | \$ 1,000,000 |
| | | | | | | | GENERAL AGGREGATE | \$ 3,000,000 |
| | GEN'L. AGGREGATE LIMIT APPLIES PER | | | | | | PRODUCTS - COMP/OP AGG | \$ 1,000,000 |
| | X POLICY PROJECT LOC | | | | | | | \$ |
| | AUTOMOBILE LIABILITY | | | | | | COMBINED SINGLE LIMIT (Ea accident) | \$ 1,000,000 |
| В | X ANY AUTO | | | 02-CA-003893706-8 | 12/16/13 | 12/16/14 | BODILY INJURY (Per person) | \$ |
| | ALL OWNED AUTOS SCHEDULED AUTOS | | | | | | BODILY INJURY (Per accident) | \$ |
| | HIRED AUTOS NON-OWNED AUTOS | | | | | | PROPERTY DAMAGE (Per accident) | \$ |
| | X Comp Ded \$1,000 X Coll Ded \$1,000 | | | | | | | \$ |
| | UMBRELLA LIAB X OCCUR | | | | | | EACH OCCURRENCE | \$ 2,000,000 |
| Α | EXCESS LIAB CLAIMS-MADE | | | 41-UD-000273533-08 | 12/16/13 | 12/16/14 | AGGREGATE | \$ 2,000,000 |
| | DED X RETENTION \$10,000 | | | | | | | \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N | | | | | | WC STATU- TORY LIMITS | OTHER |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE/ | N1/A | | | | | E.L. EACH ACCIDENT | \$ |
| | OFFICER/MEMBER EXCLUDED? (Mandatory in N.H.) | N/A | | | | | E.L. DISEASE - EA EMPLOYEE | \$ |
| | If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | E.L. DISEASE - POLICY LIMIT | \$ |
| В | Crime – Employee Theft | | | 02-LX-008996141-8 | 12/16/13 | 12/16/14 | Limit: \$ 500,000 | Ded: \$500 |
| Α | Professional Liability – Claims Made Retro Date: 12/16/00 | | | 41-LX-008996132-8 | 12/16/13 | 12/16/14 | Each Wrongful Act Aggregate Limit Deductible – Each Wrongful Act | \$ 1,000,000 \$ 3,000,000 \$ 25,000 |

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

Re: As Per Contract or Agreement on File with Insured. Oakland Unified School District, its Officers, Employees, Volunteers or Agents are named as additional Insured on General Liability as per attached CG2026.

CERTIFICATE HOLDER

CANCELLATION

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

Oakland Unified School District 1025 2nd Street Oakland, CA 94606

ACORD 25 (2010/05)

©1-8-2010 ACORD CORPORATION. All rights reserved.

DESCRIPTION OF OPERATIONS CONTINUED:

INSURED'S NAME: Aspiranet

CERT HOLDER NAME: Oakland Unified School District

Abuse and Molestation Coverage: Claims Made

Insurer Letter Policy Number Effective Expiration Limits of Insurance:

41-LX-008996132-8 12/16/13 12/16/14 \$2,000,000 Each Incident Limit \$2,000,000 Aggregate Limit

\$0 SIR/Deductible

Retroactive Date: 12/16/2006

COMMERCIAL GENERAL LIABILITY

CG 20 26 07 04

Insured Name: Aspiranet

Policy Number: 41-LX-008996132-8 Effective Dates: 12/16/13-12/16/14

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Additional Insured Person(s) or Organization(s)

Oakland Unified School District, its Officers, Employees, Volunteers or Agents

Information required to complete this Schedule, if not shown above, will be shown in the Declarations

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury," "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your ongoing operations; or
- B. In connection with your premises owned by or rented to you.

ACORD ™ CERTIFICATE OF LIABILITY INSURANCE

Date (MM/DD/YR) 12/6/13

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 require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

CONTACT **PRODUCER** NAME: Heffernan Insurance Brokers PHONE FAX 925-934-8500 925-934-8278 1350 Carlback Avenue (A/C,No,Ext) (A/C,No) Walnut Creek, CA 94596 **EMAIL** ADDRESS CA License #0564249 **INSURERS AFFORDING COVERAGE** NAIC# INSURED INSURER A: Lexington Ins. Co. 19437 23809 INSURER B: Granite State Ins. Co. Aspiranet INSURER C: 400 Oyster Point Blvd., Suite 501 INSURER D: South San Francisco, CA 94080 INSURER E:

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT 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 REDUICED BY PAID CLAIMS

INSURER F:

| SUCH | POLICIES. LIMITS SHOWN MAY HAVE BEEN RI | | DBYPA | ID CLAIMS. | 1 | 1 | | |
|-------------|--------------------------------------------------------|----------------------|-------------|--------------------|----------------------------|----------------------------|------------------------------------------------------------------|-------------------------------------------|
| INSR LTR | TYPE OF INSURANCE | ADD L INS R | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS | |
| | GENERAL L LIABILITY | | | | | | EACH OCCURRENCE | \$ 1,000,000 |
| Α | X COMMERCIAL GENERAL LIABILITY | × | | 41-LX-008996132-8 | 12/16/13 | 12/16/14 | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 200,000 |
| | CLAIMS-MADE X OCCUR | | | | | | MED EXP (Any one person) | \$ 5,000 |
| | X \$25,000 Per Occurrence Deductible | | | | | | PERSONAL & ADV INJURY | \$ 1,000,000 |
| | | 1 | | | | | GENERAL AGGREGATE | \$ 3,000,000 |
| | GEN'L. AGGREGATE LIMIT APPLIES PER | 1 | | | | | PRODUCTS - COMP/OP AGG | \$ 1,000,000 |
| | X POLICY PROJECT LOC | | | | | | | \$ |
| | AUTOMOBILE LIABILITY | | | | | | COMBINED SINGLE LIMIT (Ea accident) | \$ 1,000,000 |
| В | X ANY AUTO | | | 02-CA-003893706-8 | 12/16/13 | 12/16/14 | BODILY INJURY (Per person) | \$ |
| | ALL OWNED AUTOS SCHEDULED AUTOS | | | | | | BODILY INJURY (Per accident) | \$ |
| | HIRED AUTOS NON-OWNED AUTOS | | | | | | PROPERTY DAMAGE (Per accident) | \$ |
| | X Comp Ded \$1,000 X Coll Ded \$1,000 | | | | | | | \$ |
| | UMBRELLA LIAB X OCCUR | | | | | | EACH OCCURRENCE | \$ 2,000,000 |
| Α | EXCESS LIAB CLAIMS-MADE | | | 41-UD-000273533-08 | 12/16/13 | 12/16/14 | AGGREGATE | \$ 2,000,000 |
| | DED X RETENTION \$10,000 |] | | | | | | \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N | | | | | | WC STATU- TORY LIMITS | OTHER |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE/ | N/A | | | | | E.L. EACH ACCIDENT | \$ |
| | OFFICER/MEMBER EXCLUDED? (Mandatory in N.H.) | | | | | | E.L. DISEASE - EA EMPLOYEE | \$ |
| | If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | E.L. DISEASE - POLICY LIMIT | \$ |
| В | Crime | | | 02-LX-008996141-8 | 12/16/13 | 12/16/14 | Limit: \$ 500,000 | Ded: \$500 |
| Α | Professional Liability | | | 41-LX-008996132-8 | 12/16/13 | 12/16/14 | Each Wrongful Act Aggregate Limit Deductible – Each Wrongful Act | \$ 1,000,000 \$ 3,000,000 \$ 25,000 |

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

Re: As Per Contract or Agreement on File with Insured.

Oakland Unified School District, its Officers, Employees, Volunteers or Agents are named as additional Insured on General Liability as per attached CG2026.

CERTIFICATE HOLDER CANCELLATION

Oakland Unified School District 1025 2nd Street 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

MA.

ACORD 25 (2010/05)

©1-8-2010 ACORD CORPORATION. All rights reserved.

COMMERCIAL GENERAL LIABILITY CG 20 26 07 04

Insured Name: Aspiranet

Policy Number: 41-LX-008996132-8 Effective Dates: 12/16/13-12/16/14

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Additional Insured Person(s) or Organization(s)

Oakland Unified School District, its Officers, Employees, Volunteers or Agents

Information required to complete this Schedule, if not shown above, will be shown in the Declarations

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury," "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your ongoing operations; or
- B. In connection with your premises owned by or rented to you.

ERTIFICATE OF LIABILITY INSURANCE

Date (MM/DD/YR) 12/6/13

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 require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of

| PRODUCER | | CONTACT | | | | |
|-----------------------------------------------------|---------------------------------|-------------------|-----------------------|--------------|-------|--|
| Heffernan Insurance Brokers 1350 Carlback Avenue | NAME: PHONE (A/C,No,Ext): | 925-934-8500 | FAX (A/C,No): | 925-934-8278 | | |
| Walnut Creek, CA 94596 CA License #0564249 | | EMAIL ADDRESS: | | | | |
| CIT Electise #0301219 | | INSURERS | AFFORDING CO | VERAGE | NAIC# | |
| INSURED | | INSURER A: | Granite State Ins. Co |). | 23809 | |
| Aspiranet | | INSURER B: | | | | |
| 400 Oyster Point Blvd., Suite 501 | | INSURER C: | | | | |
| | | INSURER D: | | | | |
| South San Francisco, CA 94080 | | INSURER E: | | | | |
| | | INSURER F: | | | | |
| COVERAGES | CERTIFICATE NUMBER | • | REVISION | NIIMBER: | • | |

THIS IS TO CERTIFY THAT 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.

| NSR LTR | TYPE OF INSURANCE | ADD L INS R | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS | |
|------------|---------------------------------------------------------------------------------|----------------------|-------------|-------------------|----------------------------|----------------------------|----------------------------------------------|------------|
| | GENERAL L LIABILITY | | | | | | EACH OCCURRENCE | \$ |
| | COMMERCIAL GENERAL LIABILITY | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ |
| | CLAIMS-MADE OCCUR | | | | | | MED EXP (Any one person) | \$ |
| | | | | | | | PERSONAL & ADV INJURY | \$ |
| | | 1 | | | | | GENERAL AGGREGATE | \$ |
| | GEN'L. AGGREGATE LIMIT APPLIES PER | | | | | | PRODUCTS - COMP/OP AGG | \$ |
| | POLICY PROJECT LOC | | | | | | | \$ |
| | AUTOMOBILE LIABILITY | | | | | | COMBINED SINGLE LIMIT (Ea accident) | \$ |
| | ANY AUTO | | | | | | BODILY INJURY (Per person) | \$ |
| | ALL OWNED AUTOS SCHEDULED AUTOS | | | | | | BODILY INJURY (Per accident) | \$ |
| | HIRED AUTOS NON-OWNED AUTOS | | | | | | PROPERTY DAMAGE (Per accident) | \$ |
| | | | | | | | | \$ |
| | UMBRELLA LIAB OCCUR | | | | | | EACH OCCURRENCE | \$ |
| | EXCESS LIAB CLAIMS-MADE | | | | | | AGGREGATE | \$ |
| | DED RETENTION \$ | | | | | | | \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE/ | | | | | | WC STATU- TORY LIMITS | OTHER |
| | | | | | | | E.L. EACH ACCIDENT | \$ |
| | OFFICER/MEMBER EXCLUDED? (Mandatory in N.H.) | N/A | | | | | E.L. DISEASE - EA EMPLOYEE | \$ |
| | If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | E.L. DISEASE - POLICY LIMIT | \$ |
| ١. | Crime | | | 02-LX-008996141-8 | 12/16/13 | 12/16/14 | Limit: \$ 500,000 | Ded: \$500 |

Re: As Per Contract or Agreement on File with Insured.

Oakland, CA 94606

CERTIFICATE HOLDER CANCELLATION

> 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 Oakland Unified School District 1025 2nd Street

ACORD 25 (2010/05)

©1-8-2010 ACORD CORPORATION. All rights reserved.