

## MEASURE N COMMISSION

1000 Broadway, Suite 680  
Oakland, CA 94607-4099



**OAKLAND UNIFIED  
SCHOOL DISTRICT**

Community Schools, Thriving Students

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### Measure N - College & Career Readiness - Commission

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| Board Office Use: Legislative File Info. |           |
|--|-----------|
| File ID Number                           | 21-0788   |
| Introduction Date                        | 4/14/2021 |
| Enactment Number                         |           |
| Enactment Date                           |           |

## Memo

**To** Board of Education

**From** Measure N Commission  
Jason Gumataotao, Chairperson  
Louise Waters, Vice Chair  
Whitney Dwyer, Secretary  
Emma Paulino, Member  
James Harris, Member

**Board Meeting Date** April 14, 2021

**Subject** Budget Modification Form  
Services for: Sojourner Truth Independent Study

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**Action Requested and Recommendation** Adoption by Board of Education of a 2020-2021 budget modification request Sojourner Truth Independent Study transferring \$4,000.00, from strategic action, Consultant Contracts (no impact- given the pandemic we were not able to hire someone full time for distance learning support technology access and needs) to Consultant Contracts, as stated in the justification section of the New or Revised Strategic Action Section of the Budget Modification Form. All other terms and conditions of the Plan, including the budget, not otherwise modified by this action, remain in full force and effect.

**Background**

*(Why do we need these services? Why have you selected this vendor?)*

Sojourner Truth Independent Study would like to modify their Measure N Educational Improvement Plan to decrease the approved strategic action, Consultant Contracts, by \$4,000.00, and use that money to increase the approved strategic action, Consultant Contracts.

**Competitively Bid**

Was this contract competitively bid? No

If no, exception: N/A

**Fiscal Impact**

Funding resource(s): Measure N

**Attachments**

- Budget Modification Form

## Measure N Budget Modification Form OUSD Schools

|  |                 |               |                    |
|--|-----------------|---------------|--------------------|
| Date:  | 3/15/2021       | Principal:    | Willie Thompson    |
| School Name:   | Sojourner Truth | Site #:       | 330                |
| Pathway(s):<br>(required for multiple use of programs) | Tech Pathway    | Requested By: | Alessandra Cabrera |

### Step 1:

#### a. Add the Original Approved Strategic Action from the Measure N EIP:

*Directions: Copy & paste the original strategic action below. The original strategic action is where you plan to take money from and use it for a new purpose.*

| Measure N Plan & Pathway | Budget Action Item # | Original Amount Approved | Measure N Budget Original Strategic Action (proper & full justification)   | Total Amount Transferred |
|--------------------------|----------------------|--------------------------|--|--------------------------|
| Whole School Tab         | #67                  | \$20,000.00              | Family Tech Liaison:<br>Liaison will connect with students' parent(s)/guardian(s) to assess and support family digital needs. The vision for the pathway is to have a hub where the family tech liaison and SJT students support Oakland families with bridging the Digital Divide that exists--that is: access to hardware, software, online access, maintenance, and repair. | \$4,000.00               |

#### b. What will be the impact on your Measure N plan, pathway development, and students for not doing your original strategic action? (\*Do not insert links or use Acronyms)

No impact, given the pandemic, we were not able to hire someone full time for distance learning support under the Family Tech Liaison. We are having teachers create the relationships with families to address and support technology access and needs. It is not comprehensive, and we know that in the future we will need this position.

#### c. Enter the Account String for the Original Approved Strategic Action:

| Fund | Resource | Year | Goal | Function | Object | Site | Manager | Program | LCAP | Optional |
|------|----------|------|------|----------|--------|------|---------|---------|------|----------|
| 010  | 9333     | 0    | 3800 | 1000     | 5825   | 330  | 3300    | 1690    | 9999 | 99999    |

d. Total amount being transferred: \$ 4,000.00

- ☐ Please check this box if this is a **NEW** expenditure and it's not in the approved Measure N Budget.
- ☒ Please check this box if this is an **EXISTING** expenditure and you're only amending the approved amount.

**Step 2.**

**a. Enter the New or Revised Strategic Action (Explicitly state the expenditure type and how it supports pathway development?):**

*This will become the new proper justification for this expenditure. \*Only justification allowed. \*You'll use this new or revised justification for all future applicable requests connected to this modification.*

| Measure N Plan & Pathway | Budget Action Item # | Original Amount Approved | New or Revised Measure N Strategic Action<br>(provide a proper & full justification - do not insert links or use Acronyms)  | New or Amended Amount |
|--------------------------|----------------------|--------------------------|---|-----------------------|
| Whole School Tab         | #66                  | \$8,000.00               | Consultant Contract with Oakland Ed Fund to provide student internships with the Exploring College, Career, and Community Opportunities (ECCCO) Summer Internship Program: issue student internships as part of the technology pathway. | \$12,000.00           |

**b. Enter the New or Revised Account String:**

| Fund | Resource | Year | Goal | Function | Object | Site | Manager | Program | LCAP | Optional |
|------|----------|------|------|----------|--------|------|---------|---------|------|----------|
| 010  | 9333     | 0    | 3800 | 1000     | 5825   | 330  | 3300    | 1690    | 9999 | 99999    |

**Signature of Approvals:** *(Please insert the team member's name below the signature line)*

\_\_\_\_\_  
Name:  
Teacher Leader/Pathway Director  
Signature

\_\_\_\_\_  
Date

Alessandra Cabrera  
Name: Alessandra Cabrera  
Principal Signature Required

03.15.21  
Date

**FOR MEASURE N STAFF USE ONLY**

Date BMF Received: 3/15/2021

Escape Budget Transfer or Journal Entry Link No: \_\_\_\_\_

Program Manager, Approval Signature: *Danny Gomez*

Date: 3/15/2021

H.S. Network Superintendent, Approval Signature: *Matin Abdel-Qawi*

Date: 3/16/21