

SCHOOL BOARD OF CLAY COUNTY
Consultant Services Agreement

Date 7-1-14

Jordan Bright (A Consultant@) AGREES TO PROVIDE CONSULTANT SERVICES FOR INSERVICE TRAINING ACTIVITY TITLED Safe Crisis Management

TO BE HELD AT TBD (Title of Workshops/Activity) Re-Certs 9, 10, 11, & 12/14, 2/15
(Location of Workshop/Activity) ON Initial Cert Aug/Sept '14, Jan '15
(Dates)

8:00 a.m. - 4:00 p.m. THE CONSULTANT FEE IS SET AT \$ 33.00 PER HOUR/DAY PLUS \$
(Times) NOT TO EXCEED
FOR MILEAGE FOR A TOTAL CONSULTANT FEE AMOUNT OF \$ \$3200.00

It is the intent of the parties to this agreement that a minimum of NA () attendees attend this training activity. In the event that attendance falls below the minimum number, the amount of the consultant fee shall be reduced by NA for each unfilled available attendee position below the minimum attendance level set forth above. In the event that attendance is less than NA attendees, this agreement may be cancelled by SBCC at any time prior to commencement of the presentation with no obligation for payment of the consultant fee.

This information is necessary for those who will be interacting with students using demonstrations of materials, etc.
Liability Insurance: Yes Policy # _____ No Not Necessary

LIABILITY INSURANCE CARRIER _____

POLICY LIMITS _____

MAILING ADDRESS: _____

E-MAIL ADDRESS: _____

TELEPHONE NUMBERS: HOME: () - _____ BUSINESS: () - _____ FAX: () - _____

Consultant shall indemnify the School Board of Clay County, Florida (A School Board@) and hold and save it harmless from and against any and all actions or causes of action, claims, demands, liabilities, loss, damage or expense of whatsoever kind and nature including attorney's fees, whether incurred under retainer or salary or otherwise, which the School Board shall or may at any time sustain or incur by reason of this Agreement, or which it may sustain or incur in connection with any litigation, investigation or expenses incident to such provision of this Agreement, including any suit instituted to enforce the obligations of this agreement of indemnification, and Consultant shall pay to School Board all sums of money, with interest which School Board shall or may loan, advance pay or cause to be paid, or become liable to pay on account of or in connection with this Agreement. In addition, Consultant shall pay to any party directed by the School Board for any loss, claim, damage or expense incurred by the School Board arising out of this Agreement. Consultant shall furnish to the School Board receipts of all claims, expenses, liabilities, damages paid by Consultant as a result of the Agreement.

Consultant, or any employees or volunteers employed or utilized by Consultant shall, at their own expense, undergo and pass a Level 2 background screening as required by sec. 1012.465 Florida Statutes prior to entering upon any School Board public school campus while students are present.

PLEASE SIGN, DATE AND RETURN THIS CONSULTANT SERVICES AGREEMENT WITHIN TEN WORKING DAYS KEEPING THE PINK COPY FOR YOUR RECORDS.

Jordan Bright
(TYPE OR PRINT CONSULTANT NAME)

(CONSULTANT SIGNATURE)

Outside Consultants must attach IRS form W9

COPIES: Copy 1: Accounts Payable Dept. Copy 2: Professional Development Dept. Copy 3: School/Dept. Copy 4: Consultant
SCH-1-2161 (DATE)
E 09/16/2013

SCHOOL BOARD OF CLAY COUNTY
Consultant Services Agreement

Date 7-1-14

William Fletcher (A Consultant@) AGREES TO PROVIDE CONSULTANT SERVICES FOR INSERVICE TRAINING ACTIVITY TITLED Safe Crisis Management

TO BE HELD AT TBD (Title of Workshops/Activity) Re-Certs 9, 10, 11, & 12/14, 2/15
(Location of Workshop/Activity) ON Initial Cert Aug/Sept '14, Jan '15
(Dates)

8:00 a.m. - 4:00 p.m. (Times) THE CONSULTANT FEE IS SET AT \$ 33.00 PER HOUR/DAY PLUS \$ _____
FOR MILEAGE FOR A TOTAL CONSULTANT FEE AMOUNT OF \$ 3200.00 NOT TO EXCEED

It is the intent of the parties to this agreement that a minimum of NA () attendees attend this training activity. In the event that attendance falls below the minimum number, the amount of the consultant fee shall be reduced by NA for each unfilled available attendee position below the minimum attendance level set forth above. In the event that attendance is less than NA attendees, this agreement may be cancelled by SBCC at any time prior to commencement of the presentation with no obligation for payment of the consultant fee.

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Liability Insurance: Yes Policy # _____ No Not Necessary

LIABILITY INSURANCE CARRIER _____

POLICY LIMITS _____

MAILING ADDRESS: _____

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TELEPHONE NUMBERS: HOME: () - - BUSINESS: () - - FAX: () - -

Consultant shall indemnify the School Board of Clay County, Florida (ASchool Board@) and hold and save it harmless from and against any and all actions or causes of action, claims, demands, liabilities, loss, damage or expense of whatsoever kind and nature including attorney=s fees, whether incurred under retainer or salary or otherwise, which the School Board shall or may at any time sustain or incur by reason of this Agreement, or which it may sustain or incur in connection with any litigation, investigation or expenses incident to such provision of this Agreement, including any suit instituted to enforce the obligations of this agreement of indemnification, and Consultant shall pay to School Board all sums of money, with interest which School Board shall or may loan, advance pay or cause to be paid, or become liable to pay on account of or in connection with this Agreement. In addition, Consultant shall pay to any party directed by the School Board for any loss, claim, damage or expense incurred by the School Board arising out of this Agreement. Consultant shall furnish to the School Board receipts of all claims, expenses, liabilities, damages paid by Consultant as a result of the Agreement.

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William Fletcher
(TYPE OR PRINT CONSULTANT NAME)

(CONSULTANT SIGNATURE)

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E 09/16/2013

SCHOOL BOARD OF CLAY COUNTY
Consultant Services Agreement

Date 7-1-14

Carolyn Hayward (A Consultant@) AGREES TO PROVIDE CONSULTANT SERVICES FOR INSERVICE TRAINING ACTIVITY TITLED Safe Crisis Management

TO BE HELD AT TBD (Title of Workshops/Activity) Re-Certs 9, 10, 11, & 12/14, 2/15
(Location of Workshop/Activity) ON Initial Cert Aug/Sept '14, Jan '15
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Liability Insurance: Yes Policy # _____ No Not Necessary

LIABILITY INSURANCE CARRIER _____

POLICY LIMITS _____

MAILING ADDRESS: _____

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TELEPHONE NUMBERS: HOME: () - - BUSINESS: () - - FAX: () - -

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Carolyn Hayward
(TYPE OR PRINT CONSULTANT NAME)

(CONSULTANT SIGNATURE)

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SCH-1-2161 (DATE)
E 09/16/2013

SCHOOL BOARD OF CLAY COUNTY
Consultant Services Agreement

Date 7-1-14

Kathryn Nelson (A Consultant@) AGREES TO PROVIDE CONSULTANT SERVICES FOR INSERVICE TRAINING ACTIVITY TITLED Safe Crisis Management

TO BE HELD AT TBD (Location of Workshop/Activity) ON Re-Certs 9, 10, 11, & 12/14, 2/15 (Title of Workshops/Activity)
Initial Cert Aug/Sept '14, Jan '15 (Dates)

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Liability Insurance: Yes Policy # _____ No Not Necessary

LIABILITY INSURANCE CARRIER _____

POLICY LIMITS _____

MAILING ADDRESS: _____

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Kathryn Nelson
(TYPE OR PRINT CONSULTANT NAME)

(CONSULTANT SIGNATURE)

Outside Consultants must attach IRS form W9

(DATE)

SCHOOL BOARD OF CLAY COUNTY
Consultant Services Agreement

Date 7-1-14

Stacy Powers (A Consultant@) AGREES TO PROVIDE CONSULTANT

SERVICES FOR INSERVICE TRAINING ACTIVITY TITLED Safe Crisis Management
(Title of Workshops/Activity)

TO BE HELD AT TBD ON Re-Certs 9, 10, 11, & 12/'14, 2/'15
(Location of Workshop/Activity) (Dates)

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(Times) NOT TO EXCEED
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Liability Insurance: Yes Policy # _____ No Not Necessary

LIABILITY INSURANCE CARRIER _____

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MAILING ADDRESS: _____

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TELEPHONE NUMBERS: HOME: () - BUSINESS: () - FAX: () -

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Stacy Powers
(TYPE OR PRINT CONSULTANT NAME)

(CONSULTANT SIGNATURE)

Outside Consultants must attach IRS form W9

(DATE)

SCHOOL BOARD OF CLAY COUNTY
Consultant Services Agreement

Date 7-1-14

Jennifer Zimmerman (AConsultant@) AGREES TO PROVIDE CONSULTANT

SERVICES FOR INSERVICE TRAINING ACTIVITY TITLED Safe Crisis Management

(Title of Workshops/Activity)

TO BE HELD AT TBD ON Re-Certs 9, 10, 11, & 12/'14, 2/'15
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(Dates)

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(Times)

FOR MILEAGE FOR A TOTAL CONSULTANT FEE AMOUNT OF \$ NOT TO EXCEED 3200.00

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Jennifer Zimmerman

(TYPE OR PRINT CONSULTANT NAME)

(CONSULTANT SIGNATURE)

Outside Consultants must attach IRS form W9

(DATE)