

**FOLLOW ALL PROCEDURES ON BACK OF THIS FORM**

Contract # 260055  
 Number Assigned by Purchasing Dept.



# CONTRACT REVIEW

**BOARD MEETING DATE:**  
 WHEN BOARD APPROVAL IS REQUIRED DO NOT PLACE ITEM ON AGENDA UNTIL REVIEW IS COMPLETED  
 Must Have Board Approval over \$100,000.00

Date Submitted: 11/10/2025

Name of Contract Initiator: Tabbatha Johns Telephone #: 904-336-6937

School/Dept Submitting Contract: Climate & Culture Cost Center # 9004

Vendor Name: Walsh University

Contract Title: Affiliation Agreement

Contract Type: New  Renewal  Amendment  Extension  Previous Year Contract # \_\_\_\_\_

Contract Term: 1/8/2026 through 1/8/2027 Renewal Option(s): Automatic yearly extension

Contract Cost: 0

**BUDGETED FUNDS – SEND CONTRACT PACKAGE DIRECTLY TO PURCHASING DEPT**  
 Funding Source: Budget Line # \_\_\_\_\_  
 Funding Source: Budget Line # \_\_\_\_\_

**NO COST MASTER (COUNTY WIDE) CONTRACT - SEND CONTRACT PACKAGE DIRECTLY TO PURCHASING DEPT**

**INTERNAL ACCOUNT - IF FUNDED FROM SCHOOL IA FUNDS – SEND CONTRACT PACKAGE DIRECTLY TO SBAO**

**REQUIRED DOCUMENTS FOR CONTRACT REVIEW PACKAGE (when applicable):**

**RECEIVED**  
 By Bertha Staefe at 3:31 pm, Nov 21, 2025

- \_\_\_\_\_ Completed Contract Review Form
- \_\_\_\_\_ SBAO Template Contract or other Contract (NOT SIGNED by District / School)
- \_\_\_\_\_ SIGNED Addendum A (if not an SBAO Template Contract) - **When using the Addendum A, this Statement MUST BE included in the body of the Contract: "The terms and conditions of Addendum A are hereby incorporated into this Agreement and the same shall govern and prevail over any conflicting terms and/or conditions herein stated."**
- \_\_\_\_\_ Certificate of Insurance (COI) for General Liability & Workers' Compensation that meet these requirements:  
 COI must list the School Board of Clay County, Florida as an Additional Insured and Certificate Holder. Insurer must be rated as A- or better.  
 General Liability = \$1,000,000 Each Occurrence & \$2,000,000 General Aggregate.  
 Auto Liability = \$1,000,000 Combined Single Limit (\$5,000,000 for Charter Buses).  
 Workers' Compensation = \$100,000 Minimum  
 [If exempt from Workers' Compensation Insurance, vendor/contractor must sign a Release and Hold Harmless Form. If not exempt, vendor/contractor must provide Workers' Compensation coverage].
- \_\_\_\_\_ State of Florida Workers Comp Exemption (<https://apps.fldfs.com/bocexempt/>) (If Applicable)
- \_\_\_\_\_ Release and Hold Harmless (If Applicable)

**\*\*AREA BELOW FOR DISTRICT PERSONNEL ONLY \*\***

| CONTRACT REVIEWED BY:   | COMMENTS BELOW BY REVIEWING DEPARTMENT  |
|---|---|
| Purchasing Department<br><br><div style="border: 1px solid black; padding: 2px; width: fit-content;"> <b>REVIEWED</b><br/>                         By Bertha Staefe at 3:34 pm, Nov 21, 2025                     </div> | <u>No Cost</u><br><hr/> <hr/>   |
| School Board Attorney <u>JPS</u><br><u>11/24</u><br>Review Date   | <u>Legally sufficient.</u><br><hr/> <hr/>   |
| Other Dept. as Necessary<br><br>Review Date   | <hr/> <hr/>   |
| PENDING STATUS: <input type="checkbox"/> YES <input type="checkbox"/> NO  | <b>IF YES, HIGHLIGHTED COMMENTS ABOVE MUST BE CORRECTED BY INITIATOR</b>  |
| FINAL STATUS  | <div style="border: 2px solid red; padding: 5px; text-align: center;">                         Tentatively Approved<br/>                         Pending Required Signatures                     </div> |