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MT. DIABLO UNIFIED SCHOOL DISTRICT
1936 Carlotta Drive
Concord, CA 94519

BUDGET & FISCAL SERVICES

On File
Attached ✓
W-9 Insurance

**AGREEMENT BETWEEN
MT. DIABLO UNIFIED SCHOOL DISTRICT
AND INDEPENDENT CONTRACTOR**

THIS AGREEMENT is made this 14 day of July 2016, by and between the Mt. Diablo Unified School District (hereinafter "District") and Priscilla Hopkins, Partners for Educational Excellence (hereinafter "Contractor").

District hereby engages Contractor to render services under the terms and conditions of this Agreement.

1. Performance of Services

(a) Contractor agrees to perform the services described on Exhibit "A" (hereinafter "Services") on page 4 of this Agreement as an independent contractor. Contractor will determine the means, manner, method, and details of performing the Services. Contractor shall be responsible for providing the materials, tools and transportation necessary for the performance of the services. Contractor may, at Contractor's own expense, use non-District employees to perform the Services under this Agreement. Subcontractors may be used only with the written approval of the District.

(b) Contractor represents that Contractor has the qualifications and ability to perform the Services in a professional manner, without the advice, control, or supervision of the District. Contractor shall be solely responsible for the professional performance of the services, and shall receive no assistance, direction, or control from District. Contractor shall have sole discretion and control of Contractor's services and the manner in which they are performed.

2. Compensation. District agrees to compensate Contractor for the performance of the services on the following basis:

Not to exceed \$ <u>14,495.00</u> for Services	<u>462</u> - <u>3070</u> - <u>10</u> - <u>5800</u>	\$ <u>14,495.00</u>
The basis of the fee for Services shall be as follow	<u>504</u> - <u>3065</u> - <u>36</u> - <u>5800</u>	\$ <u>16,000.00</u>
a. \$ _____ per hour,	_____ - _____ - _____ - _____	\$ _____
b. \$ _____ per day, or	BUDGET CODE(S)	
c. \$ <u>1,115.00</u> per engagement.		

Check One:

- Partial Payments: Contractor shall invoice District on a monthly basis or as agreed to for all hours worked pursuant to this Agreement.
- Partial Payments: District shall make a payment per schedule detailed in Exhibit A. District Administrator will verify invoice indicating that all required services have been performed by each timeline.
- Payment in Full: Contractor shall invoice District on completion of services. District Administrator will verify invoice indicating that all required services have been performed.

Contractor shall be responsible for all expenses incurred in association with the performance of the Services.

3. Term and Termination. This Agreement will become effective on July 14, 2015. This Agreement will terminate upon the completion of the Services or when terminated as set forth below.

Either party may terminate this Agreement at any time by giving thirty (30) days written notice to the other party. Should either party default in the performance of this Agreement or materially breach any of its provisions, the non-breaching party may terminate this Agreement by giving written notice to the breaching party. Termination shall be effective immediately on receipt of said notice.

4. Relationship of the Parties. Contractor enters into this Agreement as, and shall continue to be, an independent contractor. Under no circumstances shall Contractor be considered an employee of District within the meaning of any federal, state, or local law or regulation including, but not limited to, laws or regulations governing unemployment insurance, old age benefits, workers' compensation, industrial illness or accident coverage, taxes, or labor and employment in general. Under no circumstances shall Contractor look to District as his/her employer, or as a partner, agent, or principal. Contractor shall not be entitled to any benefits accorded to District's employees, including, without limitation, workers' compensation, disability insurance, vacation, or sick pay. Contractor shall be responsible for providing, at Contractor's expense, and in the Contractor's name, disability, workers' compensation or other insurance, as well as licenses and permits usual or necessary for conducting the Services hereunder.

Contractor shall pay, when and as due, any and all local, state and federal income or other taxes incurred as a result of Contractor's compensation hereunder, including estimated taxes, and shall provide District with proof of said payments upon demand.

5. Fingerprinting and Criminal Records Check of Contractor's Employees. Contractor shall comply with the provisions of California Education Code §45125.1 regarding the submission of fingerprints to the California Department of Justice and the completion of criminal background investigations of the contractor and/or its employees. To the extent Education Code §45125.1 is applicable, Contractor shall not permit any employee to have any contact with District pupils until such time as Contractor has verified in writing to the governing board of the District that such employee has not been convicted of a felony, as defined in Education Code §45125.1. Contractor shall provide the certification document attached hereto as Exhibit ____ prior to commencing work under this Agreement.
6. Rules and Regulations. All rules, policies, and regulations of the Mt. Diablo Unified School District Board of Education and all federal, state, and local laws, ordinances and regulations are to be observed strictly by Contractor pursuant to this Agreement.
7. Indemnification. Contractor shall hold harmless, defend and indemnify District and its officers, elected and appointed officials, employees and volunteers from and against any and all liability, loss, damage, expense, costs (including without limitation costs and fees of litigation) of every nature arising out of or in connection with Contractor's performance of work hereunder or its failure to comply with any of its obligations contained in this agreement, except such loss or damage which was caused by the sole negligence or willful misconduct of the District.
8. Insurance. Contractor shall procure and maintain for the duration of the agreement insurance against claims for injuries to persons or damages to property which may arise from or in connection with the performance of the work hereunder and the results of that work by the Contractor, his agents, representatives, employees or subcontractors. Insurance is to be placed with insurers with a current A.M. Best's rating of no less than A:VII, unless otherwise acceptable to the District.

Coverage shall be at least as broad as:

1. **Commercial General Liability (CGL):** Insurance Services Office Form CG 00 01 covering CGL on an "occurrence" basis, including products and completed operations, property damage, bodily injury and personal & advertising injury with limits no less than \$2,000,000 per occurrence. If a general aggregate limit applies, either the general aggregate limit shall apply separately to this project/location or the general aggregate limit shall be twice the required occurrence limit. **EXCEPTION:** Contracts of less than \$5,000 need only provide general liability insurance of \$1,000,000 per occurrence.
2. **Automobile Liability:** ISO Form Number CA 00 01 covering any auto (Code 1), or if Contractor has no owned autos, hired, (Code 8) and non-owned autos (Code 9), with a limit no less than \$1,000,000 per accident for bodily injury and property damage.
3. **Workers' Compensation:** as required by the State of California, with Statutory Limits, and Employer's Liability Insurance with limit of no less than \$1,000,000 per accident for bodily injury or disease.
4. **Professional Liability/Errors & Omissions Liability,** if applicable: \$1,000,000 per occurrence.

If the contractor maintains higher limits than the minimums shown above, the District requires and shall be entitled to coverage for the higher limits maintained by the contractor.

The insurance policies are to contain, or be endorsed to contain, the following provisions:

Additional Insured Status

The District, its officers, officials, employees, and volunteers are to be named as additional insured by endorsement to the Commercial General Liability policy with respect to liability arising out of work or operations performed by or on behalf of the Contractor including materials, parts or equipment furnished in connection with such work or operations.

Primary Coverage

For any claims related to this contract, the Contractor's insurance coverage shall be primary insurance as respects the District, its officers, officials, employees, and volunteers. Any insurance or self-insurance maintained by the District, its officers, officials, employees, or volunteers shall be excess of the Contractor's insurance and shall not contribute with it.

Notice of Cancellation

Each insurance policy required above shall provide that coverage shall not be canceled, except with notice to the District.

INSURANCE REQUIREMENTS

No waiver will be granted to eliminate the insurance requirements outlined in this contract. However, in special circumstances, certain insurance requirements may be modified or waived. The following items in Insurance section 8 are hereby waived or modified as follows:

Limits: _____

Other: _____

The initials of the Superintendent, or his/her designee, and the General Counsel, are **required** to waive or modify any Insurance requirements in this Agreement:

Superintendent

General Counsel

- 9. **Ownership of Designs and Plans.** Contractor agrees that all designs, plans, reports, specifications, drawings, schematics, prototypes, models, inventions and all other information and items made during the course of this Agreement and arising from the Services shall be owned by and assigned to District as its sole and exclusive property.
- 10. **Notice.** Any notice required or permitted to be given under this Agreement shall be deemed to have been given, served and received if given in writing and either personally delivered or deposited in the United States mail, registered or certified mail, postage prepaid, return receipt required, or sent by telegram, overnight delivery service, or facsimile transmission, addressed as follows:

DISTRICT

Mt. Diablo Unified School District
1936 Carlotta Drive
Concord, CA 94519-1397
Attn: Superintendent

CONTRACTOR

Name: Partners for Educational Excellence
Attn: Priscilla Hopkins
Address: 269 Woodland Avenue
San Rafael, CA 94907
Phone: 415-457-3521
Fax: _____
Tax ID #: _____

Any notice personally given or sent by telegram or facsimile transmission shall be effective upon receipt. Any notice sent by overnight delivery service shall be effective the next business day following delivery thereof to

the overnight delivery service. Any notice given by mail shall be effective three (3) days after deposit in the United States mail.

- 11. 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.
- 12. California Law. This Agreement shall be governed by and the rights, duties and obligations of the parties shall be determined and enforced in accordance with the laws of the State of California. The parties further agree that any action or proceeding brought to enforce the terms and conditions of this Agreement shall be maintained in Contra Costa County, California.
- 13. Attorneys' Fees. If either party files any action or brings any proceedings against the other arising out of this Agreement, the prevailing party shall be entitled to recover, in addition to its costs of suit and damages, reasonable attorneys' fees to be fixed by the court. The "prevailing party" shall be the party who is entitled to recover its costs of suit as awarded by a court of competent jurisdiction, whether or not suit proceeds to final judgment. No sum for attorneys' fees shall be counted in calculating the amount of a judgment for purposes of determining whether a party is entitled to its costs or attorneys' fees.
- 14. Waiver. The waiver by either party of any breach of any term, covenant, or condition herein contained shall not be deemed to be a waiver of such term, covenant, condition, or any subsequent breach of the same or any other term, covenant, or condition herein contained.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the date first above written.

MT. DIABLO UNIFIED SCHOOL DISTRICT ^{7/20/16}
 By: [Signature] ^{7/14/2016}
 Signature of Principal/Budget Administrator Date

Partners for Educational Excellence/Priscilla Hopkins
 Name of Company/Organization or Independent Contractor/Consultant
 By: [Signature] *
 Signature of Contractor/Consultant Date

Title: Lysie Castellano, Principal
 Print Name and Title

Title: Priscilla Hopkins
 Print Name and Title

Authorized and Approved by:
[Signature] ^{9/12/16}
 Superintendent or Designee Date

[Signature]
 Assistant Superintendent
 Middle School 9/20/16

Prior to commencement of service, sign and forward completed original contract to Fiscal Services.

[Signature] ^{7/20/16}
[Signature] ^{7/14/2016}
 Originator's Signature Date

Site/Department Originating this Contract

Lysie Castellano, Principal
 Print Name of Originator and Title

Billing Address if reimbursed by outside agency—i.e. ASB, PTA, PFC

Distribution	
original:	Fiscal Services for payment
copy:	Contractor
copy:	Originator/Budget Administrator

EXHIBIT A

LIST OF SERVICES, INCLUDING DATE(S), TO BE PERFORMED BY CONTRACTOR

IF PARTIAL PAYMENTS ARE TO BE MADE TO CONTRACTOR ON A SCHEDULE
AS INDICATED ON PAGE 1, PLEASE LIST PAYMENT SCHEDULE HERE

Services will be delivered to Olympic High School/ Alliance Program.

Description of Services:

1. Support Principal and the school Art & Science leadership team as requested to refine and implement organizational and instructional policies and practices.
2. Continue to refine the Question of Practice as related to Instructional Rounds.
3. Facilitate at least eight instructional rounds sessions with teachers and administrators on site.
4. Provide planning , guidance and feedback on site based projects as requested.
5. Provide follow up consultation, problem solving, lesson design to individual teachers as requested.
6. Provide research based instructional training, lesson ideas and strategies related to the Question of Practice, weighted heavily in language rich practices specifically for ELL students.
7. Travel, materials and preparation included.

Period of Agreement:

13 days/sessions at \$1,115.00 per day to be scheduled by the Principal, at least one day per month starting in Sept. 2016 through June 2017.

Cost and payment schedule:

Total cost for services is \$14,495.00 to be paid in two equal payments of \$7,247.50 . Payments will be invoiced approximately at the end of Dec. 2016 and June 2017.

*SPSA ref- Goal 1, 1.3 pg. 14 All staff to participate in Instructional Rounds



In addition, Ms. Hopkins will provide
District wide professional development
for administrators for instructional Rounds
that will be charged to 504-3045-36-5800

EXHIBIT B

Contractor REQUIRED to Complete


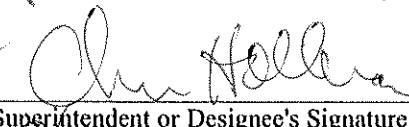
CRIMINAL BACKGROUND CHECK CERTIFICATION

**Mt. Diablo Unified School District
Consultant/Independent Contractor Agreement - Criminal Background Check**

Name of Independent Consultant/Contractor:	Priscilla Hopkins
Services to be performed under the Agreement:	Consultant
Schools/Locations where services will be performed:	Olympic High School
Total amount to be paid by the District under this Agreement:	\$ 14,495.00
Term of Agreement:	6/30/17
<i>Check the applicable box(es) and fill in any blanks.</i>	
1	<input checked="" type="checkbox"/> I certify that none of my employees, nor myself, will have more than limited contact (as defined by the District) with District students during the term of the Agreement. Therefore, we have not been fingerprinted.
2A	<input type="checkbox"/> If this box is checked, then Box 2B also applies and must be checked to indicate these employees have been fingerprinted. The following employees will have more than limited contact (as defined by the District) with District students during the term of the Agreement (attach and sign additional pages, as needed):
2B	<input type="checkbox"/> I certify that the employees noted in 2A above have been fingerprinted under procedures established by the California Department of Justice, and the results of those fingerprints reveal that none of these employees have been arrested or convicted of a serious or violent felony, as defined by the California Penal Code.

Certification by Contractor/Consultant

"I certify that the information provided herein is true and accurate. I further acknowledge that during the term of my Agreement with the District, if I learn of additional information which differs from the responses provided above, I promise to forward this additional information to the District immediately."

 _____ Independent Contractor/Consultant Signature	 _____ Superintendent or Designee's Signature
Priscilla Hopkins _____ Print Name	Chris Holleran 9/12/16 _____ Print Name
_____ Date	_____ Date
Independent Contractor/Consultant	Superintendent or Designee's Signature

POLICY NUMBER: 57 SBA AM5715



THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - PERSON-ORGANIZATION

MOUNT DIABLO SCHOOL DISTRICT
1936 CARLOTTA DR
CONCORD, CA 94519
LOC 001 BLDG 001



CSAA Insurance Exchange
 PO Box 22221
 Oakland, CA 94623-2221

925-682-8080
 ok. 4082

Automobile Policy Declarations

Please keep with your policy. See Important Notice on reverse.
 For questions or changes call: (800) 922-8228



1. Name and Address of Insured

PRISCILLA HOPKINS
 269 WOODLAND AVE
 SAN RAFAEL CA 94901-6016

POLICY INFORMATION	Declarations Type	Renewal Certificate	Process Date	07-26-2016
	Policy Number	CAAS200008228	Insured Since	2011
	Your Policy Period	From	12:01 A.M. Standard Time at the address of the Named Insured, but not prior to the time applied for or, if this is a replacement declarations, not prior to the time coverage change was requested.	
		To	12:01 A.M. Standard Time at the address of the Named Insured.	
Alternate Number		Telephone Number	(415) 457-3521	

Alternate Address: Retired
 Occupation: Retired

VEHICLES	Item	Make	Model Yr	Body Type	Vehicle Identification No.	DRIVERS	Name	
							PRISCILLA	
	1	TOYOTA	2007	WAGON 4 DOOR	JTMZD33V876044971	Drivers do not necessarily correspond to principally operated vehicles.		

Coverage	Liability Limits		Item 1		Deductible	Premium	Deductible	Premium	Deductible	Premium
	Each Person	Each Occurrence	Deductible	Premium						
Bodily Injury	1,000,000	1,000,000		\$327						
Medical Payments	No Coverage		No Coverage							
Uninsured Motorists	1,000,000	1,000,000		\$64						
Property Damage		1,000,000		\$290						
Comprehensive	Actual Cash Value Less Deductible		100	\$69						
Full Comprehensive Safety Glass Endorsement (\$0 deductible)			NO COV							
Collision	Actual Cash Value Less Deductible		500	\$369						
Enhanced Transportation Expense \$25 per day/\$750 aggregate				\$28						
All Risks	Actual Cash Value Less Deductible		No Coverage							
Vehicle Loan/Lease Protection Endorsement			No Coverage							
New Car Added Protection Endorsement			No Coverage							
Original Equipment Manufacturer Parts (OEM) Endorsement			No Coverage							
Ride-sharing Coverage Endorsement			No Coverage							
TOTAL PREMIUM PER VEHICLE >				\$1,147						Premium

* Automobile Death Benefits \$15,000 per deceased insured person

Premium Summary
 This is not a bill.

CA Surcharge: \$0
 CA Special Fraud Assessment Fee: \$1.76

Total Premium: \$1,147.00
 Total Premium shown is for the Member Advantage™ Program.

EXCLUSIONS

There is no coverage provided by this Policy while the following individual(s) operate a motor vehicle:
 None

CHANGES

Schedule of Changes

(Continued on back)