

PERFORMANCE BASED CONTRACT GUIDELINES

1. WHAT IS THE PURPOSE AND SCOPE OF THE SERVICE? (Describe in detail any services to be provided or materials to be purchased)

Etiquette classes to prepare parents and students for career presentation, college interviews, and networking opportunities.

2. AMOUNT OF SERVICE?

(Set forth the monetary value of the proposed agreement and quantities and/or amounts of time required to be devoted to the contract and describe where services are to be provided as specified in Schedule "B")

Etiquette Workshops/Classes for parents and students from identified schools.

3. WHO IN THE SCHOOL DISTRICT IS SERVED?

(Describe whether services are to be provided directly to students, to staff, etc.)

To be decided by Yonkers School District. Appropriate for students, staff, parents, and community.

4. WHO WILL PROVIDE SERVICES?

(If individual providers are contemplated, set forth the names and qualifications of the service providers)

Joan Jerkins DBA

Act As If Etiquette + Protocol

4a. WILL THE CONTRACTOR BE UTILIZING ANY SUBCONTRACTORS OR VOLUNTEERS IN FURTHERANCE OF THIS AGREEMENT? **IF YES, PLEASE LIST ALL OF THEIR NAMES AND CONTACT INFORMATION.**

No

5. WHAT WILL BE COMMUNICATED TO DISTRICT PERSONNEL, PARENTS, OTHERS ABOUT PROGRESS AND RESULTS OF THE SERVICES?

(How specifically will the contractor report to the School District (or parents, if applicable) about their progress towards achieving the goals of the contract?)

Direct contact with District personnel

6. HOW WILL THE SCHOOL DISTRICT JUDGE THE QUALITY OF SERVICES? (Set forth the method which will be used to evaluate contractor's performance)

District personnel; participant evaluations

7. INDIVIDUALS RESPONSIBLE FOR ADMINISTERING THE CONTRACT.

Vendor Name: Joan Jerkins d/b/a Act as if Etiquette + Protocol
Vendor Address: 61 East 20th Street, Huntington Station, NY 11746
Vendor Phone No.: 561-889-4464
Vendor Business Status: (corporation, non-profit individual, unincorporated)
Vendor Contact Name: Joan Jerkins
Vendor Contact Email: actasif.etiquette@aol.com
Tax ID No.:113-54-8066

School District Administrator Name: Elaine Shine
School District Administrator Title: Executive Director
School District Administrator Phone No.: 914-376-8183
School District Administrator Email: eshine@yonkerspublicschools.org

8. ARE THE SERVICES PURSUANT TO A GRANT AGREEMENT? **IF YES, WHAT IS THE GRANT, AND WHAT ARE THE GRANT REQUIREMENTS RELATED TO THIS AGREEMENT?**


Yes, the grants goal is to build relationships and prepare the YPS community for college and career.

9. WILL THE CONTRACTOR BE RECEIVING ANY STUDENT DATA OR OTHER DATA FROM YONKERS PUBLIC SCHOOLS? **IF YES, PLEASE DESCRIBE. IF STUDENT DATA IS BEING SHARED, PLEASE PROCEED TO QUESTION 10 BELOW.**

No

10. WILL THE STUDENT DATA BE USED FOR THE PURPOSE OF DEVELOPING, VALIDATING, ADMINISTERING STUDENT AID PROGRAMS, OR IMPROVING INSTRUCTION? **IF YES, PLEASE SPECIFICALLY DESCRIBE.**

No

<p>Performance Based Guidelines Reviewed and approved by:</p> <p></p> <p>_____ (Signature of School District administrator/employee)</p> <p>_____ (Printed Name)</p>
