

## 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)

**Consultative Planning – Family Engagement Professional Learning Sessions**

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”) **\$3,999 per day**

3. WHO IN THE SCHOOL DISTRICT IS SERVED?

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

8 schools identified by the district: **Museum School 25, Thomas Cornell Academy, YMHS, Eugenio Mara de Hostos, Las Hermanas Mirabel Community School, Yonkers Early Childhood Academy, Kahlil Gibran, Cross Hill Academy**

4. WHO WILL PROVIDE SERVICES?

(If individual providers are contemplated, set forth the names and qualifications of the service providers) **Tavia Crumpler and Cheryl Adler Walls FACE Specialists with Scholastic Education Solutions.**

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?)

**We will provide updates after each PL session is completed with the schools. We will also share end of session survey data with the district.**

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

**End of session survey feedback.**

7. INDIVIDUALS RESPONSIBLE FOR ADMINISTERING THE CONTRACT.

Vendor Name: Scholastic

Vendor Address: 130 Mercer Street NY NY 10012

Vendor Phone No.: 203-797-3846

Vendor Business Status: (corporation, non-profit individual, unincorporated)

Vendor Contact Name: Suzanne Lucas

Vendor Contact Email: [Sulucas@scholastic.com](mailto:Sulucas@scholastic.com)

Tax ID No.: 13-1824190

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

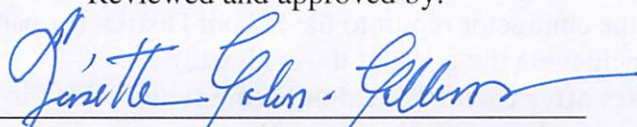
8. ARE THE SERVICES PURSUANT TO A GRANT AGREEMENT? **IF YES, WHAT IS THE GRANT, AND WHAT ARE THE GRANT REQUIREMENTS RELATED TO THIS AGREEMENT?**

The services are aligned with the MBK Family and Community Engagement Grant to increase and improve family and community engagement program at schools.

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.**

Performance Based Guidelines  
Reviewed and approved by:  
  
(Signature of School District administrator/employee)  
LISSETTE COLON-COLLINS  
(Printed Name)