

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)

Flinn Quote 278495 has been provided for prices and shipping costs of materials to be purchased. If school district decides to proceed, provide purchase order or credit card to place order.

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")

Total quote amount: \$11,596.37

3. WHO IN THE SCHOOL DISTRICT IS SERVED?

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

Service to be provided directly to staff – no students.

4. WHO WILL PROVIDE SERVICES?

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

Cameron Dummer (Account Manager) or Customer Experience team.

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, Flinn does not subcontract.

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?)

Once order is placed, if email is provided, person will receive order confirmation, tracking information, and invoice via email.

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

Time that it takes to process purchase order and ship materials.

7. INDIVIDUALS RESPONSIBLE FOR ADMINISTERING THE CONTRACT.

Vendor Name: Flinn Scientific, Inc.

Vendor Address: 770 N. Raddant Road, Batavia, IL 60510

Vendor Phone No.: 800-452-1261

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

Vendor Contact Name: Sally Lovell

Vendor Contact Email: businessdesk@flinnsci.com

Tax ID No.: 36-2926914

School District Administrator Name: RoseAnne Collins-Judon

School District Administrator Title: Assistant Superintendent of Secondary Administration

School District Administrator Phone No.: (914) 376-8281

School District Administrator Email: rcollins-judon@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?**

No, we do not know if this is for a grant.

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

Performance Based Guidelines
Reviewed and approved by:



(Signature of School District administrator/employee)

MRS. ROSEANNE COLLINS-JUDON
(Printed Name)