

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)

To make arrangements of travel for a three day/two-night tour of Washington DC and to provide transportation, accommodations, entertainment, and other travel-related services.

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")

Monetary Value is \$550 per student for a two night/three-day all-inclusive tour of Washington DC.

3. WHO IN THE SCHOOL DISTRICT IS SERVED?

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

Services are to be provided directly to the 8th grade students and staff chaperones for the Barack Obama School for Social Justice.

4. WHO WILL PROVIDE SERVICES?

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

Tallyho Travel Inc. 317 Elwood Avenue, Hawthorne NY 10532

- 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?)

By providing a fully comprehensive written (brochure -like) itinerary to be given to each student, parent and school chaperones.

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

Meetings with the administration, staff, students and parents.

7. INDIVIDUALS RESPONSIBLE FOR ADMINISTERING THE CONTRACT.

Vendor Name: Tallyho Travel Inc.
Vendor Address: 317 Elwood Avenue, Hawthorne, NY 10532
Vendor Phone No.: 914- 592-4316
Vendor Business Status: corporation
Vendor Contact Name: Sheila Bergman/Burton Falkenstein
Vendor Contact Email: tallyho475@aol.com
Tax ID No.: 13-2802521

School District Administrator Name: Sabree Webb
School District Administrator Title: Executive Director
School District Administrator Phone No.: 914-376-8183
School District Administrator Email: swebb@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 services provided support the 1003a 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.**

N/A

Performance Based Guidelines
Reviewed and approved by:

Eric Wright (u) 5/1/25
(Signature of School District administrator/employee)

Eric Wright
(Printed Name)