



Contract Committee Review Request
MUST BE COMPLETED IN FULL

Date: 03/12/2025

Contract/Agreement Vendor:

Vector Solutions / Julie Konys

Name of Vendor & Contact Person

julia.konys@vectorsolutions.com

Vendor Email Address

Scenario Learning LLC Program for Staff Training

Describe Contract (Technology, program, consultant-prof Development, etc.)

Please use Summary below to fully explain the contract purchase, any titles, and details for the Board of Education to review.

BAPS Staff & Students

Reason/Audience to benefit

05/12/2025

BOE Date

\$ 2,556.90

Amount of agreement

Person Submitting Contract/Agreement for Review: Lesley Self / Andrea Jackson

HR/ESC

PLEASE SEND THROUGH APPROPRIATE APPROVAL ROUTING BEFORE SENDING TO BOARD CLERK

Principal &/or Director or Administrator:

Does this Contract/Agreement utilize technology? YES/NO

If yes, Technology Admin:

Cabinet Team Member:

Funding Source:

GENERAL

Fund/Project

11-180-2575-810-000-0000-000-050

OCAS Coding



Consent



Action

Accept and approve the RENEWAL Agreement between Broken Arrow Public Schools and Vector Solution for SDS and Chemical Management, K-12 Edition - Annual Subscription.

The Agreement between the District and Vector Solutions will continue from 7/01/2025 through 6/30/2026 and will be paid from General Funds.

Summary

This area must be complete with full explanation of contract

The Contract/Agreement should be received at least 2 weeks prior to a Board Meeting to ensure placement on the Agenda. The Contract Committee meets most Tuesdays at 8:00a.m. All Contracts/Agreements, regardless the amount, must be first approved by the Contract Committee and then presented to the Board of Education for approval and signature. The item will be placed on Electronic School Board for the board agenda by Janet Brown. By following this process, the liability of entering into an agreement is placed with the district rather than an individual.



Quote ID
Q-410713

Valid Until
Saturday, April 5, 2025

Contact Name
Nino Alcantara

Schedule A – Revision

This Contract Revision Form replaces and supersedes Schedule A to the Client Agreement signed on **2024-06-24** between the Vector Solutions entity and the Client named below as of the Effective Date (Contract Revision Order No. 1 Effective Date).

Date: Thursday, March 6, 2025

Client Information

Client Name: Broken Arrow Public Schools	
Address: 701 South Main Street Broken Arrow, OK 74012-5531	
Primary Contact Name: Lesly Self	Primary Contact Phone: (918) 259-5700

Agreement Term

Effective Date: 07/01/2025	Initial Term: 12 months
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Invoicing Contact Information (Please fill in missing information)

Billing Contact Name: Lesley Self			
Billing Address: 701 South Main Street Broken Arrow, Oklahoma 74012-5531		Billing Phone: 918-259-5753	
Billing Email: lself@baschools.org	PO#:	Billing Frequency: Annual	Payment Terms: Net 30

Annual Fee(s)

Product Code	Product	Description	Quantity	Price	Sub Total
SLSSSDS	Vector SDS and Chemical Management, K12 Edition	Vector SDS and Chemical Management, K12 Edition - Annual Subscription	30	\$85.23	\$2,556.90

Annual Total: \$2,556.90

Total (Annual Fee): \$2,556.90

The Parties have executed this Agreement by their authorized representatives as of the last date set forth below.

Scenario Learning, LLC d/b/a Vector Solutions
4890 W. Kennedy Blvd., Suite 300
Tampa, FL 33609

Broken Arrow Public Schools
701 South Main Street
Broken Arrow, OK 74012-5531

By:  _____

By: _____

Printed Name: Katie Hoffman

Printed Name: _____

Title: Senior Manager of Renewal Management, Education

Title _____

Date: 3/12/2025

Date: _____