Contract Committee Review Request MUST BE COMPLETED IN FULL

Date: 4/29/2024

Contract/Agreement Vendor:

Vector Solutions / Julia 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/Audlence to benefit

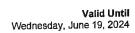
05/06/2024

80E Date

\$ 21,422.40

Person Submitting Contract/Agreement for Review: Lesley Self / Andrea Jackson PLEASE SEND THROUGH APPROPRIATE ROUTING BEFORE SENDING TO BOARD CLERK Principal & /or Director or Administrator: Does this Contract/Agreement utilize technology If yes, Technology Admin: Cabinet Team Member: Funding Source: GENERAL 11.184.2575.810.000.0000.000.050 Fund/Project OCAS Coding 80 Accept and approve the RENEWAL agreement between Broken Arrow Public Schools and Scenario Learning, LLC d/b/a Vector Solutions providing a Safe Schools online staff training system for the 2024/2025 school year. Cost to the District is \$21,422.40 Consent and will be paid from General Funds. Action 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.



**Contact Name** Julia Konys



## Schedule A - Revision

This Contract Revision Form replaces and supersedes Schedule A to the Client Agreement signed on **6/5/2023** between the Vector Solutions entity and the Client named below as of the Effective Date (Contract Revision Order No. 1 Effective Date).

Data: Manday April 29 2024

Date: Monday, April 29, 2024  Client Information				
Client Name: Broken Arrow Public Sci	hools			
Address: 701 South Main Street Broken Arrow, OK 74012-5531				
Primary Contact Name: Lesley Self	Primary Contact Ph (918) 259-5753	Primary Contact Phone: (918) 259-5753		
Agreement Term				
Effective Date: 07/01/2024	Initial Term: 12 months	100		
Invoicing Contact Information (Pl	ease fill in missing information)			
Billing Contact Name: Lesley Se	lf			
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	

Product Code	Product Name	Description	Qty	Price	Sub Total
SLSST	Vector Training, Employee Safety and Compliance Library	Vector Training, K-12 Edition - Employee Safety and Compliance Library - Annual Subscription	2,601	\$7.30	\$18,987.30
SLSSSDS	Vector SDS and Chemical Management, K12 Edition	Vector SDS and Chemical Management, K12 Edition - Annual Subscription	30	\$81.17	\$2,435.10

**Grand Total:** \$21,422.40

Please note that this is not an invoice. An invoice will be sent within fourteen (14) business days.

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
ву: <b>©</b> Katie Hoffman	Ву:
Printed Name: Katie Hoffman	Printed Name:
Title: Renewal Management Team Lead	Title:
Date: 4/29/2024	Date: