

LAKEWOOD BOARD OF EDUCATION
200 RAMSEY AVE
LAKEWOOD, NJ 08701

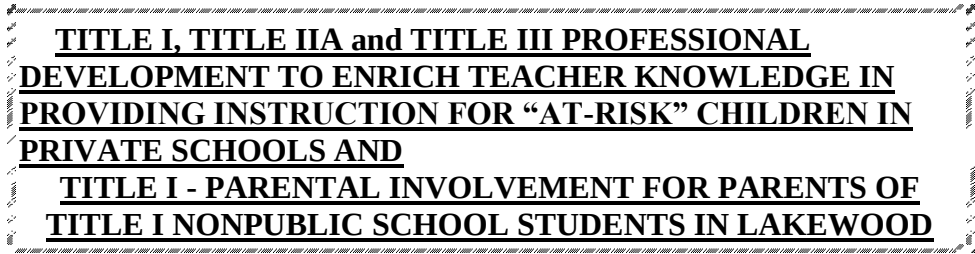
ADDENDUM 01 FOR CC 04-1920

TITLE I, TITLE IIA AND TITLE III PROFESSIONAL DEVELOPMENT TO
ENRICH TEACHER KNOWLEDGE IN PROVIDING INSTRUCTION FOR
“AT-RISK” CHILDREN IN PRIVATE SCHOOLS AND
TITLE I PARENTAL INVOLVEMENT FOR PARENTS OF TITLE I
NONPUBLIC SCHOOL STUDENTS IN LAKEWOOD

1. **Page 29 Title IIA Professional Development.** Addition of the following bullets.
 - Substitutes must meet the NJ certification requirements for substitute teachers.
 - Substitutes shall be an employee of the provider and not be employed by the nonpublic school.
 - Statute, as well as the U.S. Constitution, requires that educational services, or other benefits, including materials and equipment, be secular, neutral and non-ideological. As such, substitutes shall be secular, neutral and non-ideological.
2. **Page 31 G Fee Schedule item 1 Professional Development**
Add: Professional Development can be considered as such when four or more participants are present.
3. **Page 31 G Fee Schedule Professional Development.**
 - Add: “Audio and Audio Visuals that are off-the-shelf may not be billed for more than its Retail Value.”
 - Change: “The cost of other Audio and Audio Visual presentations shall not exceed the cost of 25% of Live Presentations”
4. **Page 32 Add item 2. Teacher Mentoring and Coaching (Title I, Title IIA and Title III).**
 - Teacher mentoring and coaching activities are to be considered as such when there are three or less participants present.
 - The cost of coaching activities shall not exceed the cost of 50% of Live Presentations.

- The respondents are to submit on an hourly fee basis. Hotel, travel, and meal expenses shall not be included in the proposed cost nor will such costs be allowable for payment or reimbursement. The successful company must submit original BLUE INK sign-in sheets including; original names printed in BLUE INK, original legible signatures in BLUE INK and dated and original workshop evaluation forms that are narrative in form with original signatures in BLUE INK from each participant.
 - Change Parental Involvement from item 2 to item 3
5. **Page 38.** Replace with the new Proposal Form attached.

To be completed, signed below and returned with proposal.
Proposal Form



CC 04-1920

Date: Tuesday, April 30, 2019 @ 1:00 p.m.

LAKEWOOD BOARD OF EDUCATION
Business Office
200 Ramsey Avenue
Lakewood, New Jersey 08701

Proposal Form – To be completed, signed below and returned with proposal.

**TITLE I, TITLE IIA and TITLE III PROFESSIONAL DEVELOPMENT TO ENRICH TEACHER KNOWLEDGE IN
PROVIDING INSTRUCTION FOR “AT-RISK” CHILDREN IN PRIVATE SCHOOLS AND
TITLE I - PARENTAL INVOLVEMENT FOR PARENTS OF TITLE I NONPUBLIC SCHOOL STUDENTS IN
LAKEWOOD**

Proposal No: **CC 04-1920**

Proposal Date: **Tuesday, April 30, 2019 @ 1:00 p.m.**

I/we hereby submit the following proposal for CONSOLIDATED SOLICITATION - TITLE I PARENTAL INVOLVEMENT, TITLE I & TITLE III PROFESSIONAL DEVELOPMENT AND TITLE IIA PROFESSIONAL DEVELOPMENT FOR NONPUBLIC SCHOOLS IN LAKEWOOD:

Proposed Price of Services: \$ _____ PER HOUR for Professional Development conducted within a school.

Proposed Price of Services: \$ _____ PER REGISTRANT for Professional Development conducted outside of a school in public facilities/locations but **not** in a private residence or any area not generally available to the general public.

Proposed Price of Services: \$ _____ PER REGISTRANT for Professional Development conducted through the use of Audio or Audio Visual means.

Proposed Price of Services: \$ _____ PER HOUR for Parental Involvement Services within a school or public facilities/locations but **not** in a private residence or any area not generally available to the general public.

Proposed Price of Services: \$ _____ PER HOUR for Substitute teacher for coverage for those teachers attending a Professional Development event.

Proposed Price of Service: \$ _____ PER HOUR for Mentoring/Coaching for three or less participants.

Signature on following page

Name of Company _____

Address _____

City, State, Zip _____

Telephone No. _____ Ext. _____ Fax No. _____

E-Mail : _____

Tax ID No. _____

Authorized Agent _____ Date _____

Authorized Signature _____ Date _____

****The Due Date for this solicitation will remain April 30, 2019 @ 1:00 p.m.****