



# CONTRACT AGENDA ITEM REQUEST FORM

1. Complete ALL sections and submit with corresponding contract to **contracts@travisusd.org**
2. All pages of the contract must be initialed by the submitter or Supervisor
3. Contract Summary - This section needs to be detailed and transparent for Business Services and Board members
4. If any of the required information below is not stated in the contract, please attach additional supporting documentation outlining the details
5. If a Certificate of Insurance (COI) is required, you must **send an email** to the Administrative Assistant of Business Services at least 10 days before it is needed
6. All contracts must be signed by the vendor prior to obtaining signature(s) from the District.
7. Contracts will be returned to the submitter upon signature from the District.

Contracts are due to Business Services **NO LATER THAN 2 DAYS PRIOR** to submission deadlines specified in the Board Packet Planning Calendar\*\*

\*\* *Board Packet Planning Calendar provided by the Superintendent's office*

Requisition /PO #:

Vendor / Consultant:

Contract Effective /End date:

Fund Source Name:

Fiscal Impact:

Contract Summary:

Does contract require a signature prior to Board meeting? *(i.e. due to terms and/or vendor requirements)*

**If "Yes" is selected, please provide the due date:**

## CHECK APPLICABLE DISTRICT GOALS

1. Focus on instructional excellence to increase achievement for every student using support systems to improve student learning and to close achievement gaps in order to prepare students for college and career.
2. Ensure a safe and productive environment using support systems to maintain calm classrooms focused on learning and to enhance student social and emotional wellness.
3. Enhance constructive communication within and outside the school community with a special focus on involving parents as active partners in their child's education.
4. Provide basic services and manage resources responsibly while maintaining the collaborative budget process. Enhance, create, and modernize facilities that support lifelong educational programs.

## SUBMITTER DETAILS

I certify that the information provided on this form is correct and consistent with the attached contract.

I understand it is my responsibility to return the contract to the vendor once the District has provided a signature.

X \_\_\_\_\_

Email:

Department/Site: