



# AGENDA REQUEST FORM

## THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

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| <b>MEETING DATE</b> | Aug 2 2016 10:15AM - Regular School Board Meeting |
| <b>AGENDA ITEM</b>  | OPEN ITEMS  |
| <b>CATEGORY</b>     | FF. OFFICE OF ACADEMICS                           |
| <b>DEPARTMENT</b>   | Support Services                                  |

|                              |                                     |
|------------------------------|-------------------------------------|
| <b>Special Order Request</b> |                                     |
| <input type="radio"/> Yes    | <input checked="" type="radio"/> No |

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|-------------|
| <b>Time</b> |
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|--------------------------------------|--------------------------|
| <b>Open Agenda</b>                   |                          |
| <input checked="" type="radio"/> Yes | <input type="radio"/> No |

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| <b>ITEM No.:</b> |
| FF-3.            |

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| <b>TITLE:</b>  |
| Continuation of Agreement with The School Board of Broward County, Florida and Atlantic Shores Hospital, LLC |

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| <b>REQUESTED ACTION:</b>  |
| Approve the Agreement with The School Board of Broward County, Florida and Atlantic Shores Hospital, LLC. |

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| <b>SUMMARY EXPLANATION AND BACKGROUND:</b>  |
| <p>The Agreement is renewed on an annual basis.</p> <p>The Agreement provides for the provision of required educational services to youths participating in residential treatment program operated by Atlantic Shores Hospital, LLC.</p> <p>See Support Docs for continuation of Summary Explanation and Background.</p> <p>The Agreement has been reviewed and approved as to form and legal content by the Office of the General Counsel.</p> |

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| <b>SCHOOL BOARD GOALS:</b>  |
| <input type="radio"/> Goal 1: High Quality Instruction <input checked="" type="radio"/> Goal 2: Continuous Improvement <input checked="" type="radio"/> Goal 3: Effective Communication |

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| <b>FINANCIAL IMPACT:</b>  |
| The financial impact is generated and funded through student Full-Time Equivalents (FTE). There is no additional financial impact to the District beyond the FTE. |

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| <b>EXHIBITS: (List)</b>  |
| (1) Continuation of Summary Explanation and Background (2) Executive Summary (3) Agreement between SBBC and Atlantic Shores Hospital LLC |

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| <b>BOARD ACTION:</b>                            |
| (For Official School Board Records Office Only) |

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| <b>SOURCE OF ADDITIONAL INFORMATION:</b>     |                     |
| Name: Antoine L. Hickman, Executive Director | Phone: 754-321-3436 |
| Name: Mary Claire Mucenic, Director          | Phone: 754-321-3415 |

**THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA**  
**Senior Leader & Title**

Daniel Gohl - Chief Academics Officer

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| Signature |
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Approved In Open Board Meeting On: \_\_\_\_\_

By: \_\_\_\_\_

School Board Chair