## **AGENDA REQUEST FORM**

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

| 2 <b>VIII</b> 8                             | ?                                  |                                | E BOARD OF BROT           |                  | ·                                     |                     |                 |
|---|------------------------------------|--------------------------------|---------------------------|------------------|---------------------------------------|---------------------|-----------------|
| Olle Schoo                                  | MEETING DATE                       | 2018-07                        | -24 10:05 - Regular :     | School Board     | d Meeting                             | Special Orde        | r Request<br>No |
|   |                                    |                                | TEMS                      |                  |                                       | Time                |                 |
| E-2.  | CATEGORY                           | CATEGORY E. OFFICE OF STRATEGY |                           |                  | ONS                                   |                     |                 |
|   | DEPARTMENT                         | Procure                        | ment & Warehousing        | Services         | · · · · · · · · · · · · · · · · · · · | Open Aç             | _               |
| TITLE:                                      |                                    |                                |                           |                  |                                       | J ( Yes             | ● No            |
|   | Outreach Program Report a          | s of June 20                   | 0, 2018                   |                  |                                       |                     |                 |
|   |                                    |                                |                           |                  |                                       |                     |                 |
| REQUESTED A                                 | ACTION: Diversity Outreach Program | (SDOP) Pa                      | anort .                   |                  |                                       |                     |                 |
| eceive Supplier L                           | oversity Outleach Program          | (SDOP) Re                      | port.                     |                  |                                       |                     |                 |
|   |                                    |                                |                           |                  |                                       |                     |                 |
|   |                                    |                                |                           |                  |                                       |                     |                 |
|   |                                    |                                |                           |                  |                                       |                     |                 |
| UMMARY EX                                   | PLANATION AND BA                   | ACKGRO                         | UND:                      | 9-11             |                                       |                     |                 |
| he SDOP report p                            | provides The School Board          | of Broward                     | County, Florida, an updat | e on the continu | ual progress of the program           |                     |                 |
|   |                                    |                                |                           |                  |                                       |                     |                 |
| ,   |                                    |                                | +                         |                  |                                       |                     |                 |
|   |                                    |                                |                           |                  |                                       |                     |                 |
|   |                                    |                                |                           |                  |                                       |                     |                 |
|   |                                    |                                |                           |                  |                                       |                     |                 |
|   |                                    |                                |                           |                  |                                       |                     |                 |
|   |                                    |                                |                           |                  |                                       |                     |                 |
| SCHOOL BOA                                  |                                    |                                |                           |                  |                                       |                     |                 |
| Goal 1:                                     | High Quality Instruc               | ction (•)                      | ) Goal 2: Continuo        | us Improver      | ment ( ) Goal 3: E                    | ffective Commu      | nication<br>——— |
| INANCIAL IN                                 | IPACT:                             |                                |                           |                  |                                       |                     |                 |
| here is no financi                          | al impact to the District.         |                                |                           |                  |                                       |                     |                 |
|   |                                    |                                |                           |                  |                                       |                     |                 |
|   |                                    |                                |                           |                  |                                       |                     |                 |
|   |                                    |                                | ·                         |                  |                                       |                     |                 |
| EXHIBITS: (Li                               |                                    |                                | (00000040 (0) 0 (         |                  | ,                                     |                     |                 |
| 1) Executive Su                             | ımmary (2) ESMWBE R                | eport as o                     | f 06202018 (3) Outrea     | ich Board Rep    | ort as of 06202018                    |                     |                 |
|   |                                    |                                |                           |                  |                                       |                     |                 |
|   |                                    |                                |                           |                  |                                       |                     |                 |
| BOARD ACTION                                | SOURCE OF ADDIT                    |                                |                           |                  | RMATION:                              |                     |                 |
|   |                                    | l. Name                        |                           |                  | ame: Anne Marie Richards              |                     |                 |
| REC   | CEIVED                             |                                | Traine: 7 mile man        |                  | Phone: 754-321-0530                   |                     |                 |
| (For Official Sc                            | hool Board Records Office Onl      | y)                             | Name: Mary C. C           | oker             |                                       | Phone: 754-321-0501 |                 |
| THE SCHOO                                   | OL BOARD OF BE                     | ROWAR                          | D COUNTY, FLC             | RIDA             | Approved In Open                      |                     |                 |
| <u>Senior Leader</u><br>Maurice L. Wo       |                                    | 2. Operation                   | one Officer               | 7                | Board Meeting On:                     | M                   | 0.              |
| Maurice L. Woods - Chief Strategy & Operati |                                    |                                | ons Officer               |                  | By:                                   | flower 1            | luper           |
| Signature                                   |                                    |                                |                           | <b>_</b>         |                                       | School Board (      | Chair           |
|   | Maurice W                          |                                |                           |                  |                                       |                     |                 |
|   | 7/9/2018, 3:2.                     | 2:48 PM                        |                           |                  | •                                     |                     |                 |

Electronic Signature
Form #4189 Revised 08/04//2017
RWR/ MLW/MCC/AMR:If