

## **AGENDA REQUEST FORM**

## THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

| 8  |  | 0000 40       | 00.40.05.01.15  | 10 6 114 6   |                               | Special Order Request      |
|--|--|---------------|---|--|-------------------------------|----------------------------|
| Eblic school   | MEETING DATE   | 2020-10-      | -06 10:05 - School B  | oard Operational Meeting   | )                             | Yes No                     |
| ITEM No.:  | AGENDA ITEM  | ITEMS         |   |  |                               | Time                       |
| I-1.   | CATEGORY   | I. OFFIC      | E OF THE SUPERIN  | NTENDENT   |                               |                            |
| TITLE:   | DEPARTMENT   | Atlantic 1    | Fech College & Tech   | High Sch   |                               | Open Agenda O Yes No       |
| Student Training Agr   | eement between The Sch   | nool Board o  | f Broward County, Florida   | for Atlantic Technical College   | and DaVita D                  | ialysis Contracting, LLC   |
| REQUESTED A  | CTION:   |               |   |  |                               |                            |
| Approve the New Stu  | ident Training Agreement   |               |   | ard County, Florida for Atlantic 1<br>of all parties and conclude on D   |                               | -                          |
| SUMMARY EXP  | LANATION AND BA  | ACKGRO        | UND:  |  |                               |                            |
| program provided by agreement also add Summary Explanatio This agreement has SCHOOL BOAR Goal 1: Hig | Atlantic Technical Collegoresses the requirements on and Background. The been reviewed and appropriate the property of the pro | e that is nec | essary to meet Florida De<br>agencies for students to<br>rm and legal content by th | clinical learning experiences. epartment of Education mandat qualify for certification/licensure ne Office of the General Counse portive Environment | ed student po<br>e. See Suppo | erformance standards. This |
| EVALUE (1)   |  |               |   |  |                               |                            |
| (1) Summary Expl   | <u> </u>   | nd (2) Dav    | ita Executive Summary   | y (3) Davita Agreement   |                               |                            |
| BOARD ACTIO  | N:   |               | SOURCE OF ADDI  | TIONAL INFORMATION:  |                               |                            |
|  |  |               | Name: Dr. Valerie   | S. Wanza   |                               | Phone: 754-321-3838        |
| (For Official Scho   | ol Board Records Office Only   | <i>(</i> )    | Name: Robert B. (   | Crawford   |                               | Phone: 754-321-5103        |
| THE SCHOOI<br>Senior Leader &  | BOARD OF BE  | ROWARI        | D COUNTY, FLO   | RIDA   |                               |                            |
| Valerie S. Wanza - Chief School Performance & Accountability   |  |               |   | Approved In Open Board Meeting On: —   |                               |                            |
| lOfficer<br>Signature  |  |               |   |  |                               |                            |
|  |  |               |   | By: _  |                               |                            |
| Flectronic Signature   |  |               |   |  | S                             | chool Board Chair          |

Form #4189 Revised 07/25/2019 RWR/ VSW/RBC:db