



THE SCHOOL DISTRICT OF PALM BEACH COUNTY  
**Request for Document Approval by Legal Services**

**DIRECTIONS:** Allow two weeks for review and approval. **DO NOT** use "ASAP" for a required date. A specific due date is required. Your document may be returned for failure to complete the information below.

Date Submitted 02 / 01 / 2005 Number of Copies Submitted 3

Name of Document Cooperative Agreement between SBPBC & Devereux WW

School/Department Submitting Exceptional Student Education - A-203

Contact Person John Sargeant Telephone ( 561 ) 434 - 8707 PX 48707

Date Required 02 / 02 / 2005 ( DO NOT use "ASAP" - a specific date is required)

Is this a continuation/duplication of prior document?  Yes  No

If any changes, are they marked? n/a

Is substance of document acceptable to your Assistant Superintendent or Director?  Yes  No

Are permits required?  Yes  No

Have required permits been obtained?  Yes  No  N/A

Do you wish to pick up document?  Yes  No ..... Pony?  Yes  No

Comments:

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J. Sargeant  
SIGNATURE OF DEPARTMENT HEAD OR AREA EXECUTIVE

2-10-05  
DATE

Attorney Assigned Stephen L. Strickland Date of completion by Attorney 2/11/05

**CONTRACT REVIEW CHECKLIST**

**Consistency with Law and School Board Policy:**

	Comments
Consistent with School Board Policy	√
Consistent with Florida, federal and local laws	√

**Contract Terms:**

	Comments
Term (Duration of Contract)	7/1/2005-6/30/2006
Termination Clause	√
Insurance /Liability Issues/ Indemnification	Risk Management should review and approve all insurance clauses.
Regulatory issues	None
Confidentiality Provision	Yes
Warranties	√
Labor Issues	The Labor Relations Department should review any issues.
Disclaimers	None
Governing Law & Venue	Florida; Palm Beach County

**Business Principles:**

	Comments
Sound Business Principles	√
Reasonableness of Fees	See Page 2
Payment Terms --Lump sum, installments --Payment Due dates --Late fees	See Page 2

**Other Issues:**

	Comments
Conflict of Interest Disclosures	None
Non-Negotiable Issues	None
Miscellaneous Issues	None
Appropriate Departmental Sign-off	Yes

**Special Considerations:** \_\_\_\_\_

The issues noted above were explained to the appropriate District staff and/or Division Chief. YES  NO

*[Handwritten Signature]*  
By: Attorney (Name and Date)



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John Sargeant  
SIGNATURE OF DEPARTMENT HEAD OR AREA EXECUTIVE

2-10-5  
DATE

Attorney Assigned St L Shuchat

Date of completion by Attorney 2/19/05

### CONTRACT REVIEW CHECKLIST

**Consistency with Law and School Board Policy:**

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*[Signature]* 2/11/05  
By: Attorney (Name and Date)