

## Safe Routes to School Contract

This Contract is made and entered into by and between La Crosse County, doing business as the La Crosse County Health Department (“PURCHASER”), whose address is 300 N. 4<sup>th</sup> Street, La Crosse, WI 54601, and XXXX School (“PROVIDER”), whose address is XXX Street, XXX, WI 54601.

### A. Purpose

The La Crosse County Health Department (LCHD) has received Safe Routes to School (SRTS) funding from the Wisconsin Department of Transportation to increase physical activity in K-8<sup>th</sup> grade students by walking and biking to school through a variety of Encouragement, Education, Enforcement, and Evaluation strategies.

### B. Scope of Activities

The PROVIDER shall work with LCHD staff to complete the following activities in the specified timeline. Failure to complete these activities may impact the overall grant award.

1. **Objective:** By 6/30/18, fully participate in the La Crosse County SRTS program by completing the following activities:

2. <b>Table of Activities</b>	<b>Timeline</b>
1. Designate main contact person(s) to serve as SRTS Liaison and coordinate school activities:  Please list person’s name:	9/1/17
2. Principal and school Liaison will participate in a planning meeting with LCHD staff. Meeting Date:	9/15/17
3. Hold a minimum of <b>8 weeks</b> (weather permitting) of a Walking School Bus (at least once per week) in fall 2017:  Dates: _____ to _____.  Participation Goal: _____ students per week.	12/31/17
4. Hold a minimum of <b>8 weeks</b> (weather permitting) of a Walking School Bus (at least once per week) in spring 2018:  Dates: _____ to _____.  Participation Goal: _____ students per week. <i>Please consider increasing your participation goal from the fall if possible.</i>	6/30/18
5. Incorporate at a minimum, 1 bicycle and 1 pedestrian safety article in school newsletter and provide a copy of the newsletter to LCHD staff.	6/15/18
6. Provide bicycle safety education on at least one occasion, per school year ( <i>see attached for ideas</i> ). Describe selected strategy for bicycle safety:	6/30/18
7. Provide pedestrian safety education on at least one occasion, per school year ( <i>see attached for ideas</i> ). Describe selected strategy for pedestrian safety:	6/30/18
8. Distribute and collect Parent Surveys (copies provided by LCHD).	12/1/17

Please specify tentative dates for distribution: _____ Please specify the number of copies you will need (one per family). _____	
9. Distribute and collect Classroom Tallies (copies provided by LCHD). Please specify tentative dates for distribution: _____ Please specify the number of copies you will need (one per classroom). _____	11/1/17
10. Include Walking School Bus and other walk/bike information in school handbook or update current information as needed.	6/30/17
11. Select a minimum of <b>two</b> additional activities from the following list. <i>*Selecting more than 2 activities does not commit your school to all activities.</i> <ol style="list-style-type: none"> <li>a. _____ International Walk to School Day (October 4<sup>th</sup>)</li> <li>b. _____ Coulee Region Walk to School Challenge (October 9<sup>th</sup>-13<sup>th</sup>)</li> <li>c. _____ Winter Walk to School Day (February)</li> <li>d. _____ At least 2 monthly themed Walk to School Days (November-March) Specify which months: _____</li> <li>e. _____ Bike to School Day with a Bike Train (anytime in May)</li> <li>f. _____ Bike/Scooter Train (once a week for 4 weeks)</li> <li>g. _____ Bike Rodeo (anytime)</li> <li>h. _____ Bike Rendezvous (anytime)</li> <li>i. _____ Wheel to School Week Challenge (April 30<sup>th</sup>-May 4<sup>th</sup>)</li> <li>j. _____ 2<sup>nd</sup> day of Walking School Bus (at least 4 weeks)</li> <li>k. _____ Other activities as approved by SRTS staff _____</li> </ol>	6/30/18
12. Please circle at least two ways you will distribute SRTS activity information to families. <ol style="list-style-type: none"> <li>a. Monthly newsletter articles in school publication</li> <li>b. Printed flyers sent home</li> <li>c. Posters/flyers displayed around school</li> <li>d. Social media messages _____</li> <li>e. School website</li> <li>f. Tri-fold, posters, fact sheets, etc. displayed during school events</li> <li>g. School announcements</li> <li>h. Parent/guardian emails</li> <li>i. Other: _____</li> </ol>	Ongoing
13. Submit participation numbers and activity descriptions to online file <b>monthly</b> .	Ongoing

**C. Budget**

- a. The PROVIDER agrees to participate in the above activities for the 2017-2018 school year and will receive up to \$500 to be used for Liaison stipend and supplies.
- b. Funds may only be used to achieve the activity objectives and not for other purposes.
- c. The following deductions to the grant award will be made for not completing the activities.

- i. \$25 for each week a school falls below the 8 week minimum of Walking School Bus activities (non-weather cancellations).
- ii. \$25 for each additional activity not completed
- iii. \$25 for not completing bicycle education
- iv. \$25 for not completing pedestrian education
- d. Approved expenses include:
  - i. **Liaison stipend**
    - 1. If Liaison is a school district employee the work being paid for by this grant must be done outside of the employee’s regularly scheduled contract hours.
    - 2. PURCHASER will reimburse Schools/Districts for the stipend costs but cannot pay the individuals directly.
  - ii. **Incentives and supplies** can be used to encourage participation in activities, with a priority placed on weekly activities.
    - 1. Modest incentives may be purchased to encourage participation and must support an active, healthy lifestyle. Individual prizes should cost less than \$10. Scooters may be given as a grand prizes, costing less than \$35.
    - 2. A maximum of \$50 (10%) of an award may be used towards gift cards. Gift cards are limited to \$5 increments.
    - 3. Food purchased must adhere to the school district wellness policy and guidelines provided by the LCHD. Please see the included food/snack guidelines.
- e. Schools will be allocated up to \$100 in printed materials (flyers, posters, logs, etc.) which will be printed by the LCHD. This amount is not included in the overall grant award. **Requests must be made to LCHD staff two weeks prior to when they are needed to ensure timely delivery.**

f. **Budget Breakdown:**

<b>Category</b>	<b>Estimated Amount</b>
Liaison stipend	
Incentives and supplies	
<b>Total:</b>	
*If over 50% of funds will be utilized to support the Liaison stipend, please indicate how you will incentivize and encourage participation.	

**D. Spending/Invoicing:**

- a. PROVIDER will spend \_\_\_\_\_ grant funds on Liaison stipend and \_\_\_\_\_ grant funds on incentives and supplies and will invoice the LCHD either monthly or quarterly.
- b. PURCHASER will spend \_\_\_\_\_ grant funds on incentives/supplies
- c. Expense documentation and receipts must be attached to the invoice. Sales tax will not be reimbursed.
- d. Monthly reports must be submitted in order to process reimbursement request and to continue receiving incentive/supply funds.
- e. PURCHASER will track expenses made on behalf of the PROVIDER using a shared Google document.

**E. Debarment and Suspension**

The PROVIDER certifies by signing this Agreement that neither the PROVIDER nor any of its principals are debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participating in federal assistance programs by any federal department or agency. The PROVIDER shall notify the PURCHASER

within 5 business days in writing by registered or certified mail if the PROVIDER or any of its principals receive a designation from the federal government that they are debarred, suspended, proposed for debarment or declared ineligible by a federal department or agency. Any such suspension or debarment may be grounds for revision or termination of this Agreement. Information on debarment or suspension is available at [www.epls.gov](http://www.epls.gov).

**F. Indemnification**

The PROVIDER agrees to the fullest extent permitted by law, to indemnify, defend and hold harmless, the PURCHASER, and its agents, officers and employees, from and against all loss or expense including costs and attorney's fees by reason of liability for damages including suits at law or in equity, caused by any wrongful, intentional, or negligent act or omission of the PROVIDER, or its (their) agents, employees and/or subcontractors which may arise out of or are connected with the activities covered by this Contract.

**G. Contract Revision and/or Termination**

This Agreement, or any part thereof, may be renegotiated in the case of 1) increased or decreased volume of services; 2) changes required by Federal or State law or regulations or court action; 3) monies available affecting the substance of this Agreement.

This Contract can be terminated by 30 day written notice by either party.

**H. Authorization to Act**

Each signature to this agreement represents that he or she has the authority from his or her respective governing body to enter into this agreement.

**I. Severability**

Any provision of this Contract determined to be invalid as a matter of law is severable from other provisions of this agreement.

IN WITNESS WHEREOF, this contract is agreed upon and approved by the authorized representatives of the PROVIDER.

**LA CROSSE COUNTY**

By: \_\_\_\_\_  
Tara Johnson, County Board Chair

\_\_\_\_\_  
Date

By: \_\_\_\_\_  
SRTS Liaison

\_\_\_\_\_  
Date

By: \_\_\_\_\_  
School Principal

\_\_\_\_\_  
Date