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Frank Edelblut
Commissioner

Christine M. Brennan
Deputy Commissioner

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF EDUCATION
Bureau of Adult Education
21 South Fruit Street, Suite 20
Concord, NH 03301
TEL. (603) 271-6699
FAX (603) 271-3454

September 6, 2023

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

For submission on the consent calendar. Authorize the Department of Education, Division of Learner Support to amend an existing contract with YouScience, LLC. (VC# 255064) American Fork, UT, by extending the end date from September 30, 2023 to September 30, 2024 with no increase to the price limitation to provide the Alternative Pathways to Completion project, effective upon Governor & Council approval. The original contract was approved by Governor and Council on March 9, 2022 (Item #184). 100% Federal Funds.

EXPLANATION

A Request for Proposal was released on November 1, 2021 and a contract awarded to YouScience, LLC for the development of a tool kit for targeted audiences, facilitation and evaluation of a pilot program and technical assistance with dissemination. YouScience's subsidiary, the National Center for College and Career Transitions has more than twelve years experience working to connect school, postsecondary institutions and employers to equip students to make well-informed choices about their future.

This contract extension is requested through the end of the school year. Initially the work was scheduled to take place by the end of FY24, however, it took longer to recruit participating schools for the CTE After Dark pilot.

The Alternative Pathways to Completion project is designed to provide tools for parents, students and school staff to make informed decisions about various alternative pathways to completion of a high school credential. This project includes facilitation of a two pilot programs combining secondary

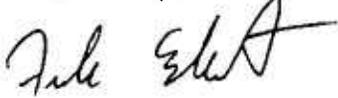
His Excellency, Governor Christopher T. Sununu
and the Honorable Council
Page 2 of 2

Career and Technical Education (CTE) programs with adult education programs using existing CTE centers after school hours to expand occupational skills training opportunities for high school students and adult learners. YouScience will use the pilot project to create a replicable model for other school districts.

It is the goal of this project to ensure that students have the tools to create their own pathway to high school completion rather than dropping out. Despite a dramatic increase in the number of high school students enrolling in adult education to earn their high school diploma or high school equivalency certificate in the last three years, the overall dropout rate for the same period shows a 54% increase. Continuation of this project will allow for a more thorough dissemination of the Alternative Pathways to Completion toolkit to schools, parents and students as well as an opportunity to thoroughly evaluate the two CTE after dark pilot programs that are enrolling students now to provide recommendations for successful replication.

YouScience, LLC is a national company that connects education and careers to help students find success in school and life through the development of tools designed to create clear and relevant career pathways. They specialize in aligning educational opportunities that are highly personalized and work with school counselors across the country to assist with career development.

Respectfully submitted,



Frank Edelblut
Commissioner of Education

**AMENDMENT TO
PROFESSIONAL SERVICES CONTRACT**

Now come the New Hampshire Department of Education (NHED), hereinafter "the Agency" and YouScience, LLC, (Vendor# 255064), American Fork, UT, hereinafter "the Contractor", and pursuant to an agreement between the parties that was approved by Governor and Council on March 9, 2022 (Item #84). Hereby agree to modify same as follows:

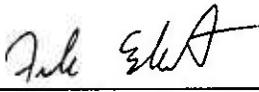
1. Amend Section 1.7 of form P-37 by removing September 30, 2023 and replacing with September 30, 2024.
2. All other provision of this agreement shall remain in full force and effect as originally set forth; and
3. This amendment shall commence upon Governor and Council approval through September 30, 2024.

This modification of an existing agreement is hereby incorporated by reference to the existing agreement by the parties and must be attached to the said agreement.

IN WITNESS WHEREOF, the parties, hereto have set their hands as of the day and year first above written.

THE STATE OF NEW HAMPSHIRE
Department of Education
(Agency)

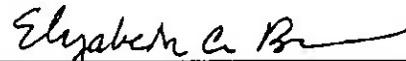
Division of Learner Support

By:  9/7/2023
Frank Edelblut, Commissioner of Education Date

YouScience, LLC:
Contractor

DocuSigned by:
By: EDSON BARTON 9/5/2023
78D5C275D94C435
Edson Barton, CEO Date

Approved as to form, substance and execution by the Attorney General this _____ day of _____, 2023.


Elizabeth Brown, Division of Attorney General Office

Approved by the Governor and Council this 7 day of September, 2023.

By: _____

State of New Hampshire

Department of State

CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that YOU SCIENCE, LLC is a Delaware Limited Liability Company registered to transact business in New Hampshire on May 19, 2015. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 726361

Certificate Number: 0006237095



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 25th day of May A.D. 2023.

A handwritten signature in black ink, appearing to read "David M. Scanlan".

David M. Scanlan
Secretary of State



Certificate of Attestation

September 5, 2023

I hereby certify that said Certificate of Authority, dated as of June 2, 2023, (attached hereto) has not been amended or repealed and remains in full force and effect as of the date of the contract to which this certificate is attached. This authority remains valid for thirty (30) days. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation.

DocuSigned by:
J. Philip Hardin CFO

9/5/2023

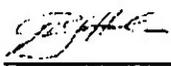
**ATTESTATION
OF
CHAIRMAN OF BOARD OF MANAGERS
OF
YOUSCIENCE, LLC**

I, J. Philip Hardin, hereby certify that I am the duly elected Chairman of the Board of Managers of YouScience, LLC (the "Company").

I hereby certify that Edson Barton is the duly appointed chief executive officer of the Company, and that pursuant to Section 3.9(f) of the current Amended and Restated Operating Agreement of YouScience, LLC Edson Barton is authorized, in his capacity as chief executive officer of the Company, to enter into contracts on behalf of the Company.

I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person listed above currently occupies the position indicated and that they have full authority to bind the Company. This authority **shall remain valid for thirty (30) days** from the date of this certificate.

DATED: 6/2/2023

ATTEST: 

(Name & Title) J. Philip Hardin, Chairman of the Board of Managers of YouScience, LLC



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/25/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Neilson & Phillips Insurance Services, Inc. 938 S. Main Street ste 204 Pleasant Grove UT 84062	CONTACT NAME: Scott Neilson	
	PHONE (A/C, No, Ext): (000) 000-000- FAX (A/C, No): (000) 000-000- E-MAIL ADDRESS: scott@neilson-phillips.com	
INSURED YouScience LLC 751 Quality Drive STE 200 American Fork UT 84003-	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: ACE Property and Casualty Insurance Company	20699
	INSURER B: Lloyds of London Insurance Group	
	INSURER C: Scottsdale Indemnity Insurance Co.	15580
	INSURER D:	
	INSURER E:	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	x	x	[REDACTED]	12/28/2022	12/28/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea. occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea. accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per. accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	x	x	[REDACTED]	12/28/2022	12/28/2023	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	Cyber Liability /Tech E&O	x		[REDACTED]	12/28/2022	12/28/2023	Total Limit \$2,000,000
C	Cyber and E&O Excess			[REDACTED]	12/28/2022	12/28/2023	Total Limit \$3,000,000 Deductible \$10,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
CANCELLATION EXCEPTION: 10 DAYS NOTICE FOR NON-PAYMENT OF PREMIUM. NH Department of Education is named as additional insured per attached endorsement.

CERTIFICATE HOLDER	CANCELLATION	AI 128291
NH Department of Education 25 Hall Street Concord, NH 03301-	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	
	AUTHORIZED REPRESENTATIVE	

Fax: () -

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/25/2023

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IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Jeff Utz c/o Arthur J. Gallagher Risk Management Services 6967 South River Gate Drive; Suite 200 Salt Lake City, UT 84047	CONTACT NAME:	
	PHONE (A/C, No., Ext):	FAX (A/C, No):
E-MAIL ADDRESS: brittney_sheldon@ajg.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: American Zurich Insurance Company		40142
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

INSURED
 YouScience LLC c/o Helpside LLC
 395 West 600 North Suite 100
 Lindon, UT 84042

COVERAGES **CERTIFICATE NUMBER:** 23UT0121016953 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/>					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTIONS \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	03/01/2023	03/01/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
			Location Coverage Period:	03/01/2023	03/01/2024	Client# 133789-UT

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Coverage is provided for only those co-employees of, but not subcontractors to:
 YouScience LLC
 751 Quality Dr Ste 200
 American Fork, UT 84003

CERTIFICATE HOLDER NH Department of Education 25 Hall Street Concord, NH 03301	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
--	--



Frank Edelblut
Commissioner

Christine M. Brennan
Deputy Commissioner

STATE OF NEW HAMPSHIRE
DEPARTMENT OF EDUCATION
Bureau of Adult Education
21 South Fruit Street, Suite 20
Concord, NH 03301
TEL. (603) 271-6699
FAX (603) 271-3454

CONDITIONAL CONSENT TO CONTRACT ASSIGNMENT

The New Hampshire Department of Education (NHED), hereby conditionally consents to National Center for College and Career Transitions (NC3T)(Vendor #278655) on May 22, 2023 assignment of the following Contract, listed below between the NHED and NC3T to YouScience, Inc. (Vendor# 255064), with a principal place of business at 751 Quality Drive, Suite 200, American Fork, UT 84003.

Vendor Name	Contract Name	G & C Approval Date & Item #	Purchase Order #
National Center for College & Career Transition	Alternative Pathways to Completion	#084 on 3/9/2022 Modification #1 9/26/2022	1084827

This consent to assignment is conditional upon YouScience's acknowledgment and agreement to assume full responsibility for performance of the entire Contract and its amendments listed above, including but not limited to, any and all obligations and liabilities of the Contract for the full term of the Contract beginning from the original effective date through its final termination.

Subject to the conditions contained herein, the Consent to Assignment shall be effective on September 30, 2022.

By: Frank Edelblut Date: 6/13/2023
Frank Edelblut, NH Education Commissioner

Conditional Consent to Contract Assignment
National Center for College and Career Transitions to YouScience, Inc.
Page 2 of 2

I, EDSON BARTON, do hereby represent that I am the
CEO of YouScience, Inc. and acknowledge and agree that NC3T
has assigned the aforementioned Contract between the NHED and NC3T to YouScience,
Inc. Effective September 30, 2022, YouScience agrees that as the assignee, YouScience,
Inc, fully assumes responsibility for performance of the entire Contract including, but not
limited to, any and all obligations and liabilities, for the full term of the Contract beginning on
the original effective date of the Contract of March 9, 2022, through its final termination. I
further represent and attest that I am duly authorized and empowered to fully bind
YouScience, Inc. to representations herein and to execute this Conditional Consent on
behalf of YouScience, Inc.

Documentation Requirement for Assignee:

1. Certificate of Insurance meeting the requirements of the P-37
2. Certificate of Authority/Vote
3. Certificate of Good Standing

6/6/2023

Date

DocuSigned by:

EDSON BARTON

CEO

Name and title of person named above
YouScience, Inc.

**ATTESTATION
OF
CHAIRMAN OF BOARD OF MANAGERS
OF
YOUSCIENCE, LLC**

I, J. Philip Hardin, hereby certify that I am the duly elected Chairman of the Board of Managers of YouScience, LLC (the "Company").

I hereby certify that Edson Barton is the duly appointed chief executive officer of the Company, and that pursuant to Section 3.9(f) of the current Amended and Restated Operating Agreement of YouScience, LLC Edson Barton is authorized, in his capacity as chief executive officer of the Company, to enter into contracts on behalf of the Company.

I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person listed above currently occupies the position indicated and that they have full authority to bind the Company. This authority **shall remain valid for thirty (30) days** from the date of this certificate.

DATED: 6/2/2023

ATTEST: 

(Name & Title) J. Philip Hardin, Chairman of the Board of Managers of YouScience, LLC



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/25/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

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PRODUCER Neilson & Phillips Insurance Services, Inc. 938 S. Main Street ste 204 Pleasant Grove UT 84062	CONTACT NAME Scott Neilson
	PHONE (A/C, No, Ext) (800) 000-000- FAX (A/C, No) (800) 000-000- E-MAIL ADDRESS scott@neilson-phillips.com
INSURED YouScience LLC 751 Quality Drive STE 200 American Fork UT 84003	INSURER(S) AFFORDING COVERAGE NAIC #
	INSURER A ACE Property and Casualty Insurance Company 20699
	INSURER B Lloyds of London Insurance Group
	INSURER C Scottsdale Indemnity Insurance Co. 15580
	INSURER D
	INSURER E

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR INSD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE L MIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	x	x	[REDACTED]	12/28/2022	12/28/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$ COMB NED S NGLE L MIT (Ea accident) \$ BOD LY INJURY (Per person) \$ BOD LY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	x	x	[REDACTED]	12/28/2022	12/28/2023	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 \$ PER STATUTE OTH-ER E.L. EACH ACC DENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE/OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			[REDACTED]			
C	Cyber Liability /Tech E&O	x		[REDACTED]	12/28/2022	12/28/2023	Total Limit \$2,000,000
	Cyber and E&O Excess			[REDACTED]	12/28/2022	12/28/2023	Total Limit \$3,000,000 Deductible \$10,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
CANCELLATION EXCEPTION: 10 DAYS NOTICE FOR NON-PAYMENT OF PREMIUM. NH Department of Education is named as additional insured per attached endorsement.

CERTIFICATE HOLDER	CANCELLATION	AI 128291
NH Department of Education 25 Hall Street Concord, NH 03301-	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	
	AUTHORIZED REPRESENTATIVE	



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/25/2023

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PRODUCER Jeff Utz c/o Arthur J. Gallagher Risk Management Services 6967 South River Gate Drive; Suite 200 Salt Lake City, UT 84047	CONTACT NAME _____	
	PHONE (A/C, No, Ext) _____	FAX (A/C, No) _____
E-MAIL ADDRESS brittney_sheldon@ajg.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A American Zurich Insurance Company	40142	
INSURER B _____		
INSURER C _____		
INSURER D _____		
INSURER E _____		
INSURER F _____		

INSURED
 YouScience LLC c/o Helpside LLC
 395 West 600 North Suite 100
 Lindon, UT 84042

COVERAGES **CERTIFICATE NUMBER:** 23UT0121016953 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADOL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE L MIT APPL ES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: _____					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ _____ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ _____ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ _____ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCR PTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A		03/01/2023	03/01/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACC DENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
			Location Coverage Period:	03/01/2023	03/01/2024	Client# 133789-UT

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Coverage is provided for only those co-employees of, but not subcontractors to:
 YouScience LLC
 751 Quality Dr Ste 200
 American Fork, UT 84003

CERTIFICATE HOLDER NH Department of Education 25 Hall Street Concord, NH 03301	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
--	--

State of New Hampshire

Department of State

CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that YOUSCIENCE, LLC is a Delaware Limited Liability Company registered to transact business in New Hampshire on May 19, 2015. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 726361

Certificate Number: 0006237095



IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 25th day of May A.D. 2023.

A handwritten signature in black ink, appearing to read "David M. Scanlan".

David M. Scanlan
Secretary of State

20

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MLC
84



Frank Edelblut
Commissioner

Christine M. Brennan
Deputy Commissioner

STATE OF NEW HAMPSHIRE
DEPARTMENT OF EDUCATION
Bureau of Adult Education
21 South Fruit Street, Suite 20
Concord, NH 03301
TEL. (603) 271-6699
FAX (603) 271-3454

February 14, 2022

His Excellency, Governor Christopher T. Sununu
and The Honorable Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Education, Division of Learner Support, Bureau of Adult Education to enter in a contract with National Center for College & Career Transitions (VC 278655) of Columbia, Maryland with a price limitation of \$197,383 to provide the Alternative Pathways to Completion project; effective upon Governor and Council approval through September 30, 2023. 100% Federal Funds.

Funds to support this request are available in FY22 and FY23, and anticipated to be available in FY24, in the account entitled ESSER III – ARP 2021 upon the approval and continued appropriation of funds in the future operating budget with the authority to adjust encumbrances amongst fiscal years within the price limitation through the budget office without further Governor and Council approval, if needed and justified.

	<u>FY22</u>	<u>FY23</u>	<u>FY24</u>	<u>Total</u>
56-56-562010-24370000-102-500731 Contracts for Program Services	\$75,550	\$110,865	\$10,968	\$197,383

EXPLANATION

Over the past several years, the Department of Education has launched a number of initiatives to expand opportunities for high school students to complete a secondary school credential through alternatives to a traditional path. These new initiatives, along with existing alternatives, have created a number of options for students. However, the recent pandemic and the use of remote instruction has caused a number of students to disconnect from schools leading to an increased number of high school students and parents seeking information about these alternatives.

Alternative Pathways to Completion is a project designed to provide tools for parents, students and school staff to make informed decisions about various alternative pathways to completion of a high school credential.

His Excellency, Governor Christopher T. Sununu
And The Honorable Council
Page 2 of 2

Alternative pathways include programs that result in credit leading to secondary school completion such as internships, Learn Everywhere, Extended Learning Opportunities, Pre-apprenticeship /Apprenticeship, online courses, private study and independent study. Additionally, Pathways include programs that result in a diploma or its equivalency including alternative learning plans, alternative high schools, the adult diploma program, the high school equivalency certificate, and charter schools.

A Request for Proposals (RFP) was released on November 1, 2021 on the NH Department of Education's website, and announced in the Union Leader on November 2, 2021 seeking proposals for the compilation of resources, development of a tool kit for targeted audiences and technical assistance with dissemination. Four proposals were received and reviewed using the proposal criteria in the RFP, and the National Center for College and Career Transitions was recommended for the contract.

The National Center for College and Career Transitions (NC3T), incorporated in 2012, works to connect schools, postsecondary institutes and employers to equip students to make well-informed choices about their future. Their goal is to support state and local education leaders to succeed in their work through tools, resources, technologies, coaching and technical assistance. NC3T has previous experience working with NH educators through several professional development and technical assistance projects with local school districts, the Department of Education and the NH Learning Initiative. They also have an extensive portfolio featuring technical assistance to other states; publishing nationally recognized guides; and developing a web-based application for work-based learning activities.

Should Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Frank Edelblut
Commissioner of Education

Attachment A
Bid Summary Scoring Sheet
National Center for College and Career Transitions

Proposal Criteria in RFP

Company Background & Experience	10
Project Plan for Alternative Pathways to Completion Toolkit	30
Project Plan for CTE After Dark Model & Pilot	30
Work Plan	10
Cost Proposal	20
Total	100

A standard formula was used to calculate the scores for all Cost Proposals:

Proposer's Price Score = (Lowest Proposed Price/Proposer's Proposed Price) x 20 Points (Max Score)

Proposals Received:

1. NC3T
2. Public Consulting Group
3. RMC Research
4. CAST

Reviewer Scores:

All proposals were evaluated and scored as follows:

Reviewer	NC3T	Public Consulting Group	RMC Research	CAST
Eric F	96	94	87	84
Rachelle C	100	96	85	88
Amy W	97	88	85	78
Average	97.6	92.6	85.6	83.3

Review Process

Scoring for review occurred on December 27, 2021. The proposal review panel consisted of the following independent reviewers:

Reviewer Qualifications

Eric F has more than twenty (20) years of experience in the career and technical education field at the secondary school, community college and state administration level.

Rachelle C has more than fifteen(15) years of experience as an adult education program director and is currently partnering closely with a local Career & Tech Ed Center to develop combined courses for both adult education and CTE students.

Amy W has served as an Alternative Programming director at a local high school for six (6) years. She also has more than twenty (20) years of experience in adult education as an instructor and program director.

Notice: This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

AGREEMENT

The State of New Hampshire and the Contractor hereby mutually agree as follows:

GENERAL PROVISIONS

I. IDENTIFICATION.

1.1 State Agency Name Bureau of Adult Education NH Department of Education		1.2 State Agency Address 21 South Fruit Street, Suite 20 Concord, NH 03301	
1.3 Contractor Name National Center for College & Career Transitions		1.4 Contractor Address 10320 Little Patuxent Parkway, Suite 300 Columbia, MD 21044	
1.5 Contractor Phone Number (410) 740-2006	1.6 Account Number See Exhibit C	1.7 Completion Date September 30, 2023	1.8 Price Limitation \$197,383.00
1.9 Contracting Officer for State Agency Sarah Ladd Wheeler		1.10 State Agency Telephone Number (603) 271-6701	
1.11 Contractor Signature <i>Hans K. Meeder</i> Date: 2/8/2022		1.12 Name and Title of Contractor Signatory Hans Meeder, President	
1.13 State Agency Signature <i>Frank Edelblut</i> Date: 2/22/2022		1.14 Name and Title of State Agency Signatory Frank Edelblut, Commissioner	
1.15 Approval by the N.H. Department of Administration, Division of Personnel (if applicable) By: _____ Director, On: _____			
1.16 Approval by the Attorney General (Form, Substance and Execution) (if applicable) By: <i>Christopher Bond</i> On: 2/22/2022			
1.17 Approval by the Governor and Executive Council (if applicable) G&C Item number: _____ G&C Meeting Date: _____			

Contractor Initials *Hm*

Date *2/8/22*

2. SERVICES TO BE PERFORMED. The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT B which is incorporated herein by reference ("Services").

3. EFFECTIVE DATE/COMPLETION OF SERVICES.

3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement as indicated in block 1.17, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.13 ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

4. CONDITIONAL NATURE OF AGREEMENT.

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds affected by any state or federal legislative or executive action that reduces, eliminates or otherwise modifies the appropriation or availability of funding for this Agreement and the Scope for Services provided in EXHIBIT B, in whole or in part. In no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to reduce or terminate the Services under this Agreement immediately upon giving the Contractor notice of such reduction or termination. The State shall not be required to transfer funds from any other account or source to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.

5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT C which is incorporated herein by reference.

5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete

compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract price.

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.

5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/ EQUAL EMPLOYMENT OPPORTUNITY.

6.1 In connection with the performance of the Services, the Contractor shall comply with all applicable statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal employment opportunity laws. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.

6.3 The Contractor agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with all rules, regulations and orders, and the covenants, terms and conditions of this Agreement.

7. PERSONNEL.

7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.

7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

Contractor Initials Hm
Date 2/2/22

8. EVENT OF DEFAULT/REMEDIES.

8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):

8.1.1 failure to perform the Services satisfactorily or on schedule;

8.1.2 failure to submit any report required hereunder, and/or

8.1.3 failure to perform any other covenant, term or condition of this Agreement.

8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely cured, terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;

8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;

8.2.3 give the Contractor a written notice specifying the Event of Default and set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or

8.2.4 give the Contractor a written notice specifying the Event of Default, treat the Agreement as breached, terminate the Agreement and pursue any of its remedies at law or in equity, or both.

8.3. No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

9. TERMINATION.

9.1 Notwithstanding paragraph 8, the State may, at its sole discretion, terminate the Agreement for any reason, in whole or in part, by thirty (30) days written notice to the Contractor that the State is exercising its option to terminate the Agreement.

9.2 In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall, at the State's discretion, deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT B. In addition, at the State's discretion, the Contractor shall, within 15 days of notice of early termination, develop and

submit to the State a Transition Plan for services under the Agreement.

10. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.

10.1 As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.

10.2 All data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.

10.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.

11. CONTRACTOR'S RELATION TO THE STATE. In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.

12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

12.1 The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice, which shall be provided to the State at least fifteen (15) days prior to the assignment, and a written consent of the State. For purposes of this paragraph, a Change of Control shall constitute assignment. "Change of Control" means (a) merger, consolidation, or a transaction or series of related transactions in which a third party, together with its affiliates, becomes the direct or indirect owner of fifty percent (50%) or more of the voting shares or similar equity interests, or combined voting power of the Contractor, or (b) the sale of all or substantially all of the assets of the Contractor.

12.2 None of the Services shall be subcontracted by the Contractor without prior written notice and consent of the State. The State is entitled to copies of all subcontracts and assignment agreements and shall not be bound by any provisions contained in a subcontract or an assignment agreement to which it is not a party.

13. INDEMNIFICATION. Unless otherwise exempted by law, the Contractor shall indemnify and hold harmless the State, its officers and employees, from and against any and all claims, liabilities and costs for any personal injury or property damages, patent or copyright infringement, or other claims asserted against the State, its officers or employees, which arise out of (or which may be claimed to arise out of) the acts or omission of the

Contractor Initials

Hm

Date

2/8/22

Contractor, or subcontractors, including but not limited to the negligence, reckless or intentional conduct. The State shall not be liable for any costs incurred by the Contractor arising under this paragraph 13. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

14. INSURANCE.

14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate or excess; and

14.1.2 special cause of loss coverage form covering all property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the property.

14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.

14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than ten (10) days prior to the expiration date of each insurance policy. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

15. WORKERS' COMPENSATION.

15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from, the requirements of N.H. RSA chapter 281-A ("Workers' Compensation").

15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. The Contractor shall furnish the Contracting Officer identified in block 1.9, or his or her successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.

16. NOTICE. Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, to a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

17. AMENDMENT. This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire unless no such approval is required under the circumstances pursuant to State law, rule or policy.

18. CHOICE OF LAW AND FORUM. This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party. Any actions arising out of this Agreement shall be brought and maintained in New Hampshire Superior Court which shall have exclusive jurisdiction thereof.

19. CONFLICTING TERMS. In the event of a conflict between the terms of this P-37 form (as modified in EXHIBIT A) and/or attachments and amendment thereof, the terms of the P-37 (as modified in EXHIBIT A) shall control.

20. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

21. HEADINGS. The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or add to the interpretation, construction or meaning of the provisions of this Agreement.

22. SPECIAL PROVISIONS. Additional or modifying provisions set forth in the attached EXHIBIT A are incorporated herein by reference.

23. SEVERABILITY. In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.

24. ENTIRE AGREEMENT. This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire agreement and understanding between the parties, and supercedes all prior agreements and understandings with respect to the subject matter hereof.

Contractor Initials

Hm

Date

9/8/22

EXHIBIT A

Special Provisions

Additional Exhibits D-G

Federal Certification 2 CFR 200.415

Required certifications include: (a) To assure that expenditures are proper and in accordance with the terms and conditions of the Federal award and approved project budgets, the annual and final fiscal reports or vouchers requesting payment under the agreements must include a certification, signed by an official who is authorized to legally bind the non-Federal entity, which reads as follows:

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

Contractor Initials HM
Date 2/28/22

EXHIBIT B

Scope of Services

The purpose of the Alternative Pathways to Completion contract is to create tools for parents, students and school staff to make informed decisions about choosing the best pathways for a student to successfully complete high school; provide technical assistance to schools on using the tools; and create and facilitate a model for combining high school completion with an occupational skills credential through existing Career & Tech Ed Centers.

This contract contains two projects to be completed by the National Center for College & Career Transitions (NCCT).

Project 1: Alternative Pathways to Completion Tool Kit

The Contractor will:

- Conduct small group or one-on-one meetings to gather information on programs identified for inclusion in the project.
- Create and distribute a survey to high schools and adult education programs to collect data, examples and best practice to develop an Alternative Learning Plan template.
- Facilitate a series of interview with stakeholder focus groups to gather recommendations for features of the Tool Kit.
- Develop materials for the Alternative Pathways to Completion Tool Kit that includes:
 - o A Summary Sheet
 - o Program Fact Sheets
 - o Customizable flyers, public service announcements and social media campaign templates
 - o Alternative Learning Plan template
 - o Draft webpage to be incorporated into the NH Department of Education website
- Provide technical assistance for dissemination and use of the Tool Kit including training webinars; a series of training videos; materials for use with other agencies; master Power Point presentation; and outreach materials.

Project 2: Career & Tech Ed (CTE) After Dark Model and Pilot

The Contractor will:

- Convene an advisory committee for facilitated discussion on key topics to inform the development of the program model
- Research CTE After Dark models in NH and other states to develop written program profiles
- Identify suggested design principals for the model
- Develop the model including the following elements:
 - o The vision, mission and key outcomes
 - o Industry section and career pathway alignment
 - o Inclusion of technical, academic and workplace success skills
 - o Business and industry partner roles
 - o Structures work-based learning
 - o Incorporation of industry-recognized credentials
 - o Credit recovery and credit acceleration toward a diploma or equivalent
 - o Integration and coordination of academic skills development

Contract between National Center for College & Career Transitions and the New Hampshire Department of Education

EXHIBIT B (Continued)

- o Flexible instructional delivery options
- o Postsecondary articulation and transitions
- Create a handbook for implementation of the model including funding resources, sample forms, sample structure for curricula, and a checklist for implementation
- Facilitate the CTE After Dark Pilot including a request for proposals, onsite orientation, planning and coaching calls
- Provide recommendations for further action to the Department of Education

**EXHIBIT C
Method of Payment**

Budget:

Table 1

Activity, Deliverable or Milestone	Deliverable type	Cost
Conduct Project Kick-off Meeting and ongoing project check-in meetings with NH-DOE Team.	Meeting	\$19,800
Gather and Analyze Relevant Data	Research document	\$2,340
Create Project Timeline and Summary Document	Document	\$1,570
Present Project Overview Webinar	Webinar	\$2,500
Conduct Site Visit and meetings to state capital	Meetings	\$10,755
Gather information about Existing Programs	Document	\$4,120
Interviews with Program Managers	Meetings	\$3,780
Payment 1	Payment 1	\$44,865.00
Create and disseminate survey to identify best practices in Alternative Learning Plans	Survey	\$3,500
Write profiles about Alternative Learning Plan best practices	Documents	\$6,545
Conduct stakeholder focus group interviews	Meetings	\$9,780
Synthesize the findings into recommendations for APC Toolkit structure and dissemination strategy	Document	\$2,520
Identify key stakeholders to receive the APC Tool Kit	Spreadsheet	\$8,340
Payment 2	Payment 2	\$30,685
Develop Materials for the APC Tool Kit	Documents	Included
Build Summary Sheet Graphic	Document	\$3,590
Design Fact Sheet Template, Draft and Final Program FactSheets	Documents	\$11,460
Create up to three additional fact sheets of national and state evidence-based practices	Documents	\$3,435
Create Materials for Students/Parents	Documents	\$4,840
Additional materials for the Tool Kit	Documents	\$3,760
Create Alternative Learning Plan Template	Documents	\$3,435
Offer local school customizations	Documents	\$2,555
Plan webpage for Tool Kit accessibility	Document	\$1,005

Contract between National Center for College & Career Transitions and the New Hampshire Department of Education

Contractor initials *HM*
Date *2/8/22*

EXHIBIT C (Continued)		
Conduct three informational webinars about the APC Tool Kit	Webinars	\$3,205
Identify New Hampshire-based organizations that reach education professionals	Document	\$1,805
Create and convene a "CTE After Dark Advisory Committee" to advise on model development	Document, list of committee members	\$1,065
	(Payment 3)	\$40,155
Convene the first meeting of the Advisory Committee (Meeting #1)	Meeting	\$2,390
Post APC Tool Kit Training Videos	Videos	\$2,190
Attend and share at New Hampshire-based education organization events	Meetings, events	\$7,465
Disseminate information to non-education entities	Emails	\$1,535
Gather information about existing CTE After-Dark Program Models	Research plan and findings document	\$5,170
Draft and submit profiles about existing CTE After-Dark program	Documents	\$10,515
	(Payment 4)	\$29,265
Review CTE After Dark Model Options with the Advisory Committee (Meeting #2)	Document with findings	\$6,745
Create first draft of After Dark Model Materials	Document	\$4,840
Update, revise and finalize Model materials	Document	\$3,040
Create the Model Handbook	Document	\$6,800
Finalize the Handbook after the third (final) Advisory Committee Meeting	Meeting	\$7,060
	(Payment 5)	\$28,485
Help with Pilot Site Selections	RFP document draft	\$3,380
Conduct one-day meeting with Pilot Site teams	Meeting	\$9,580
	(Payment 6)	\$12,960
Conduct twice monthly check-in calls with each pilot site team	Meetings	\$7,060
Conduct regular virtual meetings among the pilot site teams	Virtual meetings	\$2,095
Provide feedback to the NH-DOE on future implementation	Document of recommendations	\$1,815
Potential additional coaching for pilot sites and facilitation among the pilot sites		Included
	Final Payment	\$10,968
	Total	\$197,383

Contract between National Center for College & Career Transitions and the New Hampshire Department of Education

Contractor Initials: *Hm*
Date: *2/8/22*

Exhibit C (continued)

Limitation on Price: Upon mutual agreement between the state contracting officer and the contractor, line items in this budget may be adjusted one to another, but in no case shall the total budget exceed the price limitation of \$197,383.00

Source of funding: Funds to support this request are anticipated to be available in the account titled 2437 ESSER III - ARP 2021 for FY22 and FY23, upon the approval and continued appropriation of funds in the future operating budget, with the authority to adjust encumbrances between Fiscal Years through the Budget Office without further Governor and Council approval, if needed and justified.

Acct	FY22	FY23	FY24	Total
06-56-56-562010-24370000-102-500731 Contract for Program Services	\$75,550	\$110,865	\$10,968	\$197,383.00

Method of Payment:

Payment is to be made on the basis of quarterly invoices, which are supported by a summary of completed deliverables, as outlined by the budget (Table 1), that have taken place in accordance with the terms of the contract, along with a detailed listed of expenses incurred. If otherwise correct and acceptable, payment will be made for 100% of the expenditures listed. A final invoice is due within 30 days of the end of this contract. The Contractor shall be paid based on the activities listed in Table 1.

Invoices will be paid based on the satisfactory completion of the activity, delivery or milestones identified in Table 1 and on the invoice.

Invoices shall be sent to:

Sarah Ladd Wheeler
Bureau of Adult Education
21 South Fruit Street, Suite 20
Concord, NH 03301
Email: AdultEd@doe.nh.gov

Contractor Initials *HM*
Date *2/8/22*

EXHIBIT D

Contractor Obligations

Contracts in excess of the simplified acquisition threshold (currently set at \$250,000) must address administrative, contractual, or legal remedies in instances where the contractors violate or breach contract terms, and provide for such sanctions and penalties as appropriate. Reference: 2 C.F.R. § 200.326 and 2 C.F.R. 200, Appendix II, required contract clauses.

The contractor acknowledges that 31 U.S.C. Chap. 38 (Administrative Remedies for False Claims and Statements) applies to the contractor's actions pertaining to this contract.

The Contractor, certifies and affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. § 3801 et seq., apply to this certification and disclosure, if any.

Breach

A breach of the contract clauses above may be grounds for termination of the contract, and for debarment as a contractor and subcontractor as provided in 29 C.F.R. § 5.12.

Fraud and False Statements

The Contractor understands that, if the project which is the subject of this Contract is financed in whole or in part by federal funds, that if the undersigned, the company that the Contractor represents, or any employee or agent thereof, knowingly makes any false statement, representation, report or claim as to the character, quality, quantity, or cost of material used or to be used, or quantity or quality work performed or to be performed, or makes any false statement or representation of a material fact in any statement, certificate, or report, the Contractor and any company that the Contractor represents may be subject to prosecution under the provision of 18 USC §1001 and §1020.

Environmental Protection

(This clause is applicable if this Contract exceeds \$150,000. It applies to Federal-aid contracts only.)

The Contractor is required to comply with all applicable standards, orders or requirements issued under Section 306 of the Clean Air Act (42 U.S.C. 1857 (h)), Section 508 of the Clean Water Act (33 U.S.C. 1368), Executive Order 11738, and Environmental Protection Agency (EPA) regulations (40 CFR Part 15) which prohibit the use under non-exempt Federal contracts, grants or loans of facilities included on the EPA List of Violating Facilities. Violations shall be reported to the FHWA and to the U.S. EPA Assistant Administrator for Enforcement.

Procurement of Recovered Materials

In accordance with Section 6002 of the Solid Waste Disposal Act (42 U.S.C. § 6962), State agencies and agencies of a political subdivision of a state that are using appropriated Federal funds for procurement must procure items designated in guidelines of the Environmental Protection Agency (EPA) at 40 CFR 247 that contain the highest percentage of recovered materials practicable, consistent with maintaining a satisfactory level of competition, where the purchase price of the item exceeds \$10,000 or the value of the quantity acquired in the preceding fiscal year exceeded \$10,000; must procure solid waste management services in a manner that maximizes energy and resource recovery; and must have established an affirmative procurement program for procurement of recovered materials identified in the EPA guidelines.

Contract between National Center for College & Career Transitions and the New Hampshire Department of Education

Contractor Initials

Date

HMV
2/18/22

Exhibit E

Federal Debarment and Suspension

- a. By signature on this Contract, the Contractor certifies its compliance, and the compliance of its Sub-Contractors, present or future, by stating that any person associated therewith in the capacity of owner, partner, director, officer, principal investor, project director, manager, auditor, or any position of authority involving federal funds:
1. Is not currently under suspension, debarment, voluntary exclusion, or determination of ineligibility by any Federal Agency;
 2. Does not have a proposed debarment pending;
 3. Has not been suspended, debarred, voluntarily excluded or determined ineligible by any Federal Agency within the past three (3) years; and
 4. Has not been indicted, convicted, or had a civil judgment rendered against the firm by a court of competent jurisdiction in any matter involving fraud or official misconduct within the past three (3) years.
- b. Where the Contractor or its Sub-Contractor is unable to certify to the statement in Section a.1. above, the Contractor or its Sub-Contractor shall be declared ineligible to enter into Contract or participate in the project.
- c. Where the Contractor or Sub-Contractor is unable to certify to any of the statements as listed in Sections a.2., a.3., or a.4., above, the Contractor or its Sub-Contractor shall submit a written explanation to the DOE. The certification or explanation shall be considered in connection with the DOE's determination whether to enter into Contract.
- d. The Contractor shall provide immediate written notice to the DOE if, at any time, the Contractor or its Sub-Contractor, learn that its Debarment and Suspension certification has become erroneous by reason of changed circumstances.

Exhibit F

Anti-Lobbying

The Contractor agrees to comply with the provisions of Section 319 of Public Law 101-121, Government wide Guidance for New Restrictions on Lobbying, and 31 U.S.C. 1352, and further agrees to have the Contractor's representative, execute the following Certification:

The Contractor certifies, by signing and submitting this contract, to the best of his/her knowledge and belief, that:

- a. No federal appropriated funds have been paid or shall be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence any officer or employee of any State or Federal Agency, a Member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any Federal contract, the making of any federal grant, the making of any federal loan, the entering into any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract grant, loan, or cooperative agreement.
- b. If any funds other than federally appropriated funds have been paid or shall be paid to any person for influencing or attempting to influence an officer or employee of any Federal Agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit the "Disclosure of Lobbying Activities" form in accordance with its instructions (<http://www.whitehouse.gov/omb/grants/sffm.pdf>).
- c. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making and entering into this transaction imposed by Section 1352, title 31 and U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.
- d. The Contractor also agrees, by signing this contract that it shall require that the language of this certification be included in subcontracts with all Sub-Contractor(s) and lower-tier Sub-Contractors which exceed \$100,000 and that all such Sub-Contractors and lower-tier Sub-Contractors shall certify and disclose accordingly.
- e. The DOE shall keep the firm's certification on file as part of its original contract. The Contractor shall keep individual certifications from all Sub-Contractors and lower-tier Sub-Contractors on file. Certification shall be retained for three (3) years following completion and acceptance of any given project.

Exhibit G

**Rights to Inventions Made Under a Contract, Copy Rights and
Confidentiality Rights to Inventions Made Under a Contract or Agreement**

Contracts or agreements for the performance of experimental, developmental, or research work shall provide for the rights of the Federal Government and the recipient in any resulting invention in accordance with 37 CFR part 401, "Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements," and any implementing regulations issued by the DOE.

Any discovery or invention that arises during the course of the contract shall be reported to the DOE. The Contractor is required to disclose inventions promptly to the contracting officer (within 2 months) after the inventor discloses it in writing to contractor personnel responsible for patent matters. The awarding agency shall determine how rights in the invention/discovery shall be allocated consistent with "Government Patent Policy" and Title 37 C.F.R. § 401.

Confidentiality

All written and oral information and materials disclosed or provided by the DOE under this agreement constitutes Confidential Information, regardless of whether such information was provided before or after the date on this agreement or how it was provided.

The Contractor and representatives thereof, acknowledge that by making use of, acquiring or adding to information about matters and data related to this agreement, which are confidential to the DOE and its partners, must remain the exclusive property of the DOE.

Confidential information means all data and information related to the business and operation of the DOE, including but not limited to all school and student data contained in NH Title XV, Education, Chapters 186-200.

Confidential information includes but is not limited to, student and school district data, revenue and cost information, the source code for computer software and hardware products owned in part or in whole by the DOE, financial information, partner information (including the identity of DOE partners), Contractor and supplier information, (including the identity of DOE Contractors and suppliers), and any information that has been marked "confidential" or "proprietary", or with the like designation. During the term of this contract the Contractor agrees to abide by such rules as may be adopted from time to time by the DOE to maintain the security of all confidential information. The Contractor further agrees that it will always regard and preserve as confidential information/data received during the performance of this contract. The Contractor will not use, copy, make notes, or use excerpts of any confidential information, nor will it give, disclose, provide access to, or otherwise make available any confidential information to any person not employed or contracted by the DOE or subcontracted with the Contractor.

Ownership of Intellectual Property

The DOE shall retain ownership of all source data and other intellectual property of the DOE provided to the Contractor in order to complete the services of this agreement. As well the DOE will retain copyright ownership for any and all materials, patents and intellectual property produced, including, but not limited to, brochures, resource directories, protocols, guidelines, posters, or reports. The Contractor shall not reproduce any materials for purposes other than use for the terms under the contract without prior written approval from the DOE.

Contractor Initials *Hm*
Date *2/8/22*

State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that NATIONAL CENTER FOR COLLEGE AND CAREER TRANSITIONS is a Maryland Profit Corporation registered to do business in New Hampshire as NATIONAL CENTER FOR COLLEGE AND CAREER TRANSITIONS INC. on February 07, 2022. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 892606

Certificate Number: 0005662534



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 8th day of February A.D. 2022.

A handwritten signature in black ink, appearing to read "William M. Gardner".

William M. Gardner
Secretary of State



Corporate Resolution

I, Brett Pawlowski, hereby certify that I am duly elected Clerk/Secretary of the National Center for College and Career Transitions. I hereby certify the following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on February 8, 2022 at which a quorum of the Directors/shareholders were present and voting.

VOTED: That Hans Meeder is duly authorized to enter into contracts or agreements on behalf of the National Center for College and Career Transitions with the State of New Hampshire and any of its agencies or departments and further is authorized to execute any documents which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract to which this certificate is attached. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

DATED:

2-8-2022

ATTEST:

A handwritten signature in black ink, appearing to read "Brett Pawlowski", is written over a horizontal line.

Brett Pawlowski, Secretary



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/31/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
JMS INS & FINANCIAL SERVICES LLC
14732837
8001 LAKESIDE AVENUE SUITE 17
RICHMOND VA 23228

CONTACT NAME:
PHONE (886) 567-8082 **FAX** (568) 511-1099
(A/C. No. Ext.): **(A/C. No.):**
E-MAIL ADDRESS:
INSURER(S) AFFORDING COVERAGE **NAIC#**
INSURER A: Sentinel Insurance Company Ltd. **11000**

INSURED
NATIONAL CENTER FOR COLLEGE AND CAREER
TRANSITIONS
10320 LITTLE PATUXENT PKWY STE 300
COLUMBIA MD 21044-3344

INSURER B:
INSURER C:
INSURER D:
INSURER E:
INSURER F:

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADOL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY			[REDACTED]	05/22/2021	05/22/2022	EACH OCCURRENCE \$2,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Per occurrence) \$1,000,000
	<input checked="" type="checkbox"/> General Liability						MED EXP (Any one person) \$10,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC						GENERAL AGGREGATE \$4,000,000
	OTHER:						PRODUCTS - COM/PROP AGG \$4,000,000
A	AUTOMOBILE LIABILITY			[REDACTED]	05/22/2021	05/22/2022	COMBINED SINGLE LIMIT (Per accident)
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)
	<input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident)
	<input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB			[REDACTED]	05/22/2021	05/22/2022	EACH OCCURRENCE \$1,000,000
	<input checked="" type="checkbox"/> RETENTION \$ 10,000						AGGREGATE \$1,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N				N/A
A	EMPLOYMENT PRACTICES LIABILITY			[REDACTED]	05/22/2021	05/22/2022	OTHER
							E.L. EACH ACCIDENT
							E.L. DISEASE - EA EMPLOYEE
							E.L. DISEASE - POLICY LIMIT
							Each Claim Limit \$10,000
							Aggregate Limit \$10,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Those usual to the Insured's Operations. Reference: #2021-001; All Pathways to.

CERTIFICATE HOLDER
State of NH, Department of Education
Bureau of Adult Education
21 S FRUIT ST
CONCORD NH 03301

CANCELLATION
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
AUTHORIZED REPRESENTATIVE
Suzan O. Costarida

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