Contracts Expiring set for Commission Review For the Month of January 2021 (January 13, 2021)

Vendor	Contract Description	Contract Value / Budgeted Estimate	Revenue	Net Revenue / (Cost)	Contract Expiration Date	Deadline to Cancel/Renew Contract	Contract Deadline to Due Date for Commission Expiration Cancel/Renew Review (90 Days Prior to Date Contract Deadline)	Anticipated Notice Date
Department								
A Love for Language, Inc.	Speech/Language Pathology Services	\$54,000.00	\$0.00	(\$54,000.00)	7/31/2021	(\$54,000.00) 7/31/2021 7/24/2021	4/25/2021	3/26/2021

Original Terms: Initial term of three (3) years with two (2) additional three (3) year terms thereafter.

Current Period: Original Agreement (07/01/2020 - 06/30/2021)

New Period: First Renewal (07/01/2021 - 06/30/2022)

Type of Contract: Expense

Performance: A

Recommend for Renewal: Yes

Lucy is absolutely recommended for renewal. She is the ultimate professional, an asset to the ESE department comments: In all aspects. In the best interest of our school, my recommendation is for her to be hired and compensated full time by the City of Pembroke Pines as she has been a contract employee for over 10 years. Τυίγ.

Contract Performance Report Card

Vendor Name:	A Love for Language,	Inc.		
Contract Purpose:	Speech and Language	Therapy		
Rating Categories	Maximui <u>Points</u>	m H	artment lead ating	
1. Services Completed on time	25		25	
2. Quality of Services	30		30	
3. Are all requirements of the contract	being met 25		25	
4. Department overall satisfaction	20		20	
	100		100	
	A = B = C = D = F =	100 - 90 89 - 80 79 - 70 69 - 60 59 - 0		
Recommend Renewal?	"Yes	/ " No / " Not Applicab	le	(Check the option that applies)
Department Comments:	professional, an asset She is dedicated to se school in all aspects. I recommendation is for	ommended for renewal. She to the ESE department and trivicing our students and sup in the best interest of our schildren to be hired and compense Pines as she has been a corears. Truly.	o our school. porting our lool, my sated full time	
Dana Oct.	/ Dar	na Ostendorrf 12/15/20		
Department Representative	Name & Title	Date		
the Dyen	1	12/16/2		
Department Head Approval	Name & Title	Date	-	
School / EDC:				