

**IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI**

**A RESOLUTION** authorizing the County Executive to execute an Agreement with the Mid-America Regional Council to provide staff training programs for use by the Department of Corrections, at a total cost to the County not to exceed \$6,720.00.

**RESOLUTION NO. 18919**, August 31, 2015

**INTRODUCED BY** Alfred Jordan, County Legislator

WHEREAS, the Department of Correction desires to provide staff training programs to its staff, to be facilitated by the Mid-America Regional Council (MARC); and,

WHEREAS, MARC will provide two leadership training programs at a cost to the County not to exceed \$6,720.00; and,

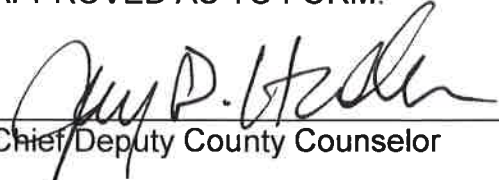
WHEREAS, an Agreement with MARC for the furnishing of this training is in the best interests of the health, welfare, and safety of the citizens of Jackson County; now therefore,

BE IT RESOLVED by the County Legislature of Jackson County, Missouri, that the County Executive be and hereby is authorized to execute an Agreement with the Mid-America Regional Council, in a form to be approved by the County Counselor; and,

BE IT FURTHER RESOLVED that the Director of Finance and Purchasing be and hereby is authorized to make all payments, including final payment on the Agreement.

Effective Date: This Resolution shall be effective immediately upon its passage by a majority of the Legislature.

APPROVED AS TO FORM:

  
\_\_\_\_\_  
Chief/Deputy County Counselor

  
\_\_\_\_\_  
County Counselor

Certificate of Passage

I hereby certify that the attached resolution, Resolution No. 18919 of August 31, 2015, was duly passed on September 14, 2015 by the Jackson County Legislature. The votes thereon were as follows:

Yeas 9 Nays 0  
Abstaining 0 Absent 0

9.14.15  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Mary Jo Spino, Clerk of Legislature

There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.

ACCOUNT NUMBER: 001 2701 56750  
ACCOUNT TITLE: General Fund  
Corrections  
Education Benefits  
NOT TO EXCEED: \$6,720.00

August 24 2015  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Director of Finance and Purchasing

**TRAINING AGREEMENT  
GOVERNMENT TRAINING INSTITUTE  
MID-AMERICA REGIONAL COUNCIL**

This training agreement is entered in to by the Jackson County, Mo. Department of Corrections, hereinafter "agency," and Mid-America Regional Council, hereinafter "MARC," of Kansas City, Missouri, on this 13<sup>th</sup> Day of August, 2015.

MARC agrees to provide the following training program as specified below:

**PROGRAM INFORMATION:**

**Title:** *Personal Strengths and Leadership Styles and Guiding Principles of Public Sector Leadership*  
**Date(s):** September 1, 2015 – December 31, 2015  
**Time:** 8:30 a.m. to 4:30 p.m.  
**No. Sessions:** 4 **Course hours:** 8.00  
**Max. Enrollment:** 15 **Location:** Jackson County, Mo. Dept. of Corrections

**COVENANTS:**

A total training cost of \$ 6,720.00 to be billed per session at \$1680.00, due to MARC upon invoice receipt at the completion of each training. This quote is valid for a period of thirty days from the agreement date.

Alterations to this training agreement require written consent from both the agency and MARC stated in this document.

The agency reserves the right to commence and terminate said training program at their discretion. However, if said training program is canceled less than 14 days before the aforementioned training commencement date, or scheduled training sessions, a sum of \$250 will be due to MARC as a reimbursement for preparation costs and commitments made.

We, the undersigned, have affixed our name to this training agreement, and as such, have caused this document to now be in full force and effect.

\_\_\_\_\_  
Georgia Nesselrode, Program Director, GTI Date

\_\_\_\_\_  
Agency Official Date

\_\_\_\_\_  
David A. Warm, Executive Director Date

\_\_\_\_\_  
Billing Address

\_\_\_\_\_  
City, State, Zip

