

For: Office Use Only

Vendor No.	Date Entered
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Mail
 Fax
 Email

Vendor:

Calm.com, Inc
 77 Geary Street, 3rd floor
 San Francisco, CA 94108

Deliver To:

Moncia Abbott/Typhanie Jackson
 New Haven BOE
 54 Meadow Street, 3rd floor
 New Haven, CT 06519

CITY OF NEW HAVEN
 Department of Education
 54 Meadow St., New Haven, CT 06519
VENDOR PURCHASE ORDER

SPECIAL FUNDS

Fiscal Year: 2023-2024

P.O.
▲
This number must appear on all invoices and package of shipment

**PURCHASE ORDERS NOT
 COMPLETED AND DELIVERED
 WITHIN 60 DAYS ARE
 AUTOMATICALLY CANCELLED**

Date Prepared	Fund	Agency	Program	Object	Project Code
07/20/23	2552	900	6363	56697	0490

Quantity	Description	Unit Cost	Total Cost
2,050	Online Service from Calm.com, Inc - Subscription 07/01/2023 - 06/30/2024 Calm Application is an application that will provide teachers mental health fitness for their own social emotional well-being. In addition to supporting their own well-being, they can use the application within their classrooms to support students social emotional learning.	10.29	21,094.50

PLEASE NOTIFY BUSINESS OFFICE IF YOUR TOTAL COST EXCEEDS OUR TOTAL AMOUNT BEFORE SHIPPING

Name: Derricka Suggs Email: derricka.suggs@new-haven.k12.ct.us Phone: 1-475-220-1383

Authorized Supervisor's Signature	Business Office Approval	Principal's Signature	TOTAL AMOUNT	\$21,094.50
Date:	Date:	Date:	SUBMIT PURCHASE ORDERS TO: SpecialfundsPO@new-haven.k12.ct.us	

FOR PAYMENT: Send Your Invoice Electronically or By Mail:
 Email: NHinvoice@newhavenct.gov
 Mail: New Haven Public Schools, Attn: Dept. of Special Funds
 54 Meadow Street, New Haven, CT 06519
 Fax: 1-203-946-5740



NEW HAVEN PUBLIC SCHOOLS
AGREEMENT COVER SHEET

Cover Sheet is an Internal Document for Business Office Use

Please Type

Contractor full name: Calm.com, Inc

Doing Business As, if applicable:

Business Address: 77 Geary Street, third floor

Business Phone:

Business email: olga.doroshenko@calm.com

Funding Source & Acct # including location code: ESSER III, account #
2552-6363-56697, Location Code: 0490

Principal or Supervisor: Typhanie Jackson, Executive Director

Agreement Effective Dates: From 07/01/2023. To 06/30/2024.

Hourly rate or per session rate or per day rate.

Total amount: \$21,094.50

Description of Service: Please provide a one or two sentence description of the service. *Please do not write "see attached."*

Calm Application is an application that will provide teachers mental health fitness for their own social emotional well-being. In addition to supporting their own well-being, they can use the application within their classrooms to support students social emotional learning.

Submitted by: Typhanie Jackson

Phone: 475-220 - 1760



NEW HAVEN PUBLIC SCHOOLS

Memorandum

To: New Haven Board of Education Finance and Operations Committee
From: Typhanie Jackson, Director of Special Education/Student Services
Date: July 20, 2023
Re: Calm.com renewal

Please answer all questions and attach any required documentation as indicated below. Please have someone ready to discuss the details of each question during the Finance & Operations meeting or this proposal might not be advanced for consideration by the full Board of Education.

1. **Contractor Name:** Calm.com, Inc

2. **Description of Service:** Calm Application is an application that will provide teachers mental health fitness for their own social emotional well-being. In addition to supporting their own well-being, they can use the application within their classrooms to support students social emotional learning.

3. **Amount** of Agreement and hourly or session cost: \$21,094.50

4. **Funding Source** and account number: ESSER III, account # 2552-6363-56697, Location Code: 0490

5. **Continuation/renewal or new Agreement?**
Answer all questions:
 - a. If continuation/renewal, has the cost increased? If yes, by how much? renewal
 - b. What would an alternative contractor cost: Comparable cost
 - c. If this is a continuation, when was the last time alternative quotes were requested?
Annually
 - d. For new or continuation: is this a service existing staff could provide. If no, why not?
No. Company provides a specific service.

6. **Type of Service:**
Answer all questions:
 - a. Professional Development?
 - i. If this is a professional development program, can the service be provided by existing staff? If no, why not? No
 - b. After School or Extended Hours Program? No
 - c. School Readiness or Head Start Programs? No
 - d. Other: (Please describe)

7. **Contractor Classification:**
Answer all questions:

- a. Is the Contractor a Minority or Women Owned Business? No
- b. Is the Contractor Local? No
- c. Is the Contractor a Not-for-Profit Organization? If yes, is it local or national? No
- d. Is the Contractor a public corporation? No
- e. Is this a renewal/continuation Agreement or a new service? renewal
- f. If it is a renewal/continuation has cost increased? If yes, by how much? No
- g. Will the output of this Agreement contribute to building internal capabilities? If yes, please explain: it will help to keep the wellness of the staff, as well as administrators and students. This agreement allows for individualized self-management resources to ensure our staff is taking care of their own well-being. Additionally, this product can be presented to students as a tool to engage and support their self-awareness and self-management.

8. Contractor Selection:

Answer all questions

- a. What specific skill set does this contractor bring to the project? If a new contractor, please attach a copy of the contractor's resume. This agreement allows for individualized self-management resources to ensure our staff is taking care of their own well-being. Additionally, this product can be presented to students as a tool to engage and support their self-awareness and self-management.
- b. How was the Contractor selected? Quotes, RFP/RFQ, Sealed Bid or Sole Source? Quotes and Comparable cost.
- c. Please describe the selection process including other sources considered and the rationale for selecting this Contractor: Feedback survey from staff and administrators.

9. Evidence of Effectiveness & Evaluation

Answer all questions

- a. What specific need will this contractor address and how will the contractor's performance be measured and monitored to ensure that the need is met? Social emotional well-being, self-awareness and self-management, (SEL).
- b. If this is a renewal/continuation service attach a copy of the evaluation or archival data that demonstrates effectiveness. Data is available via the calm portal that allows us to manage and monitor staff usage and we also have feedback from surveys that provides interest from students and staff.
- c. How is this service aligned to the District Continuous Improvement Plan? This agreement is aligned to the District's continuous improvement plan as it ensures the well-being of staff, administrators and students as it supports social emotional learning, self-awareness and self-management. It aligns to the strategic priority area of culture and climate.

10. Why do you believe this Agreement is fiscally sound? This agreement is fiscally sound as it ensures the well-being of our staff members.

11. What are the implications of not approving this Agreement? The implication of not approving this agreement is that staff, administrators and students will not have the ability to take advantage to have individualized self-management resources, social emotional learning to ensure that they are taking care of their own well-being.



Calm.com, Inc. ("Calm")
 555 Bryant Street, Suite 262
 Palo Alto, California 94301 USA
 Billing contact: ar@calm.com

PROPOSED BY

Name: Gio Khvitia
 Email: gio.khvitia@calm.com

Pricing Valid Until: April 26, 2023

ORDER FORM # Q-08727	TYPE: Renewal Subscription
Company Name ("Customer"): New Haven Public Schools Billing Address: 54 Meadow Street, New Haven, Connecticut 06519, United States Billing Contact: Typhanie Jackson typhanie.jackson@new-haven.k12.ct.us	Address for notices: 433 temple street, New Haven, Connecticut 06520, United States Email address for notices: typhanie.jackson@new-haven.k12.ct.us

Initial Term	Services	Subscription Cost (per Individual per year)	Initial Number of Individuals	Fees
12-Months	Calm Digital	\$10.29	2,050	\$21,094.50

Total Fees	\$21,094.50
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Services	Subscriptions to the Calm mobile application and related website that provides a variety of audio and/or visual mental resiliency content (the "Services").
Services Start Date	Access to the Calm Platform via the Admin Console is estimated to be available on July 1, 2023 and will remain available thereafter during the term of this Order.
Term	The initial term of this Order will commence on the Services Start Date and continue until June 30, 2024 ("Initial Term"). This Order will automatically renew for consecutive one-year terms unless either Party provides written notice of non-renewal at least thirty (30) days prior to any renewal of this Order.
Invoicing Frequency*	Annually - 1 year
Payment Terms	Net 30
Payment	In the event multiple payments are specified in the Invoicing Frequency field, Customer will pay Calm the Total divided by the Invoicing Frequency and pay each such amount at the beginning of each annual Term (such periods calculated by dividing the duration of the term by the Invoicing Frequency). Remittance details and instructions will be provided at time of invoicing.
Onboarding Method	

Special Terms	
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TERMS AND CONDITIONS

This Order is effective as of the date of the last signature below. The Services purchased under this Order are subject to the Master Services Agreement in effect between Calm and Customer or, if no such agreement exists, the terms and conditions located at <https://info.calm.com/rs/541-LYF-023/images/CalmMSA01.2023.pdf>. Any capitalized terms that are used in this Order, but are not defined herein, have the meaning ascribed to them in the Master Services Agreement. For clarity, this Order does not constitute a renewal of any prior Order.

BY SIGNING THIS ORDER FORM, THE CUSTOMER SIGNATORY BELOW DECLARES THEY ARE AUTHORIZED TO SIGN AND PLACE THIS ORDER ON BEHALF OF THE CUSTOMER AND AGREE TO ALL PAYMENTS THAT ARE DUE TO CALM. THE PRICES QUOTED IN THIS ORDER FORM DO NOT INCLUDE TAXES. AS A RESULT, AMOUNTS INVOICED TO CUSTOMER MAY BE HIGHER THAN THOSE STATED ON THIS ORDER FORM.

PO#	Tax Exempt Status/ ID #
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***Invoicing for this Order to commence upon execution, no later than the Service Start Date and will be sent via email to the billing contact listed above. For all billing questions please reach out to ar@calm.com.**

Customer
 Signature:
 Name:
 Title:
 Date:

Calm.com, Inc.
 Signature:
 Name:
 Title:
 Date: