



Welcome!

Thank you for supporting Denali PEAK students. We appreciate your business. The Vendor Handbook will be a resource providing information regarding state regulations on correspondence schools and vendors, as well as Denali PEAK's policies and procedures for vendors.

We are required to have updated vendor information that includes:

- Vendor Contract Form
- W-9

To be an approved vendor with our program, the above items must be emailed to holliebye@dbsd.org. By signing the Vendor Contract Form in this packet, you are stating that you have read the Vendor Handbook and agree to the terms and conditions stated within.

Thank you,

Hollie Bye
Denali PEAK Secretary

Denali PEAK Anchorage Office
4240 Old Seward Hwy, Ste. 4
Anchorage, AK 99503
P: 907-563-0990
F: 907-563-0996

Denali PEAK Mat-Su Office
1401 S. Seward Meridian Pkwy, Ste. H
Wasilla, AK 99654
P: 907-357-2730
F: 907-357-2733



Denali PEAK Vendor Handbook

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State Regulations

4 AAC 33.421

(h) A correspondence study program may not pay for or provide money for services or materials that do not reasonably relate to the delivery of the students' instructional needs. (et. al.)

(i) A correspondence study program, or a parent through a fund account under 4 AAC 33.422, may contract with a private individual to provide tutoring to a student in a subject described in 4AAC 04.140, fine arts, music, or physical education, if

(1) the instruction is part of the student's individual learning plan under (d) of this section; and

(2) the tutor is not vested with the primary responsibility to plan, instruct, or evaluate the learning of the student in the subject.

Vendor Procedures

1. Submit Vendor Contract Form (See Appendix A).
2. Submit W-9 (Please fill out the most recent version located on the IRS website).
3. Vendor will provide PEAK with a completed invoice with guardian signature and date for services already rendered.

Invoices are considered complete with the following information:

1. Vendor's name, address, phone number, fax, and email address
2. Student's first and last name
3. Date(s) and time(s) or service(s)
4. Description of service
5. Breakdown of costs associated with service
6. Balance due
7. Guardian signature and date on the invoice

Handwritten or incomplete invoices are not accepted and will be returned to the vendor for correction. (See Appendices B and C for invoice format).

Please note the following:

1. Please submit your invoices to holliebye@dbbsd.org
2. Invoices for the school year may be submitted beginning on July 1st.
3. You may submit invoices for services rendered in the current month. Example: the invoice has dates of service of July 8th, July 15th, and July 21st. You may submit that invoice on July 1st.
4. Completed invoices must be received by the ***first business day in the month of April*** for the school year. Invoices received after this date will not be processed for payment and the guardian will be responsible for the remaining balance on the account. For the months of April, May, and June only, we will pay in advance due to this deadline.



Vendor Contract Form

With the approval of Denali PEAK, vendors may be paid directly for services. This Document is to be completed by the vendor prior to engaging in academic services with a Denali PEAK student.

Vendor name, and (if applicable) the Agency Employer:

Billing Address (Address the payment will be mailed to:

Phone Number: _____ Fax Number: _____

Email: _____ Website: _____

Which academic subjects are you providing services for? _____

Fees associated with this service: _____

Do you acknowledge that as a vendor, you assume liability of the student and the student's work environment? Yes ☐ No ☐

Academic tutors will be required to provide documentation showing proficiency in subject matter.

Vendors will not be paid for services provided to relatives, friends of family, babysitters, daycare providers, etc.

By signing this contract you, the vendor, understand the information provided is made public and offered to Denali PEAK families as an option for services.

Printed Name of Vendor: _____

Signature of Vendor: _____ Date: _____

Approval Signature: _____ Date: _____

Vendor Name or Company Name
1234 Mailing Address
Anchorage, AK 12345
P: 123-456-7890
F: 123-456-7890
email@emailprovider.com

Student: _____

Course: _____

Date	Description of Activity/Materials	Hours	Cost	Total
Total Due:				

Printed Name of Guardian _____

Signature of Guardian _____ Date: _____

Jane Doe's Music School
1234 Mailing Address
Anchorage, AK 12345
P: 123-456-7890
F: 123-456-7890
email@emailprovider.com

Student: Johnny Apple

Course: Music

Date	Description of Activity/Materials	Hours	Cost	Total
11/07/17	Piano Lessons	1	\$45.00	\$45.00
11/14/17	Piano Lessons	.5	\$45.00	\$22.50
Total Due:				\$67.50

Printed Name of Guardian: Sally Apple

Signature of Guardian: *Sally Apple*

Date: 11/15/17