

EXHIBIT D

WORK ORDER

Work Order No. _____ by the _____ (name of school or office requesting services) is effective as of _____, between the Los Angeles Unified School District (LAUSD) and **CONTRACTOR, Contract No.**_____.

1. Scope of Services:

2. Period of Performance:

3. Deliverables:

4. Staffing and Rates:

Signature below confirms the services to be provided.

**LOS ANGELES UNIFIED
SCHOOL DISTRICT**

**COMMUNITY TRAINING AND
ASSISTANCE CENTER (CTAC)**

By: _____

By: _____

Name: _____

Name: _____

Title: _____

Title: _____

Date: _____

Date: _____