



MEMORANDUM OF UNDERSTANDING

TO: Steven Hinojosa, Lead Epidemiologist
Hidalgo County Health & Human Services Dept.
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Phone: (956) 318-2426 ext. 7344

FROM: Juan Carlos Aguirre, Dean
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DATE: June 7, 2018

South Texas College will provide 12 hours of Microsoft Excel training and 12 hours of Leadership training for Hidalgo County Health and Human Services Dept. employees.

Program Title: Leadership for Public Health and Zika
Public Health Data Management for Zika (Advanced Microsoft Excel)

Program Length: Leadership for Public Health and Zika – 12 hours
Public Health Data Management for Zika (Advanced Microsoft Excel) – 12 hours

Dates: July 3, 5, and 6, 2018

Times: Leadership for Public Health and Zika – 8 am to 12 pm
Public Health Data Management for Zika (Advanced Microsoft Excel) – 1 pm to 5 pm

Participants: minimum of 20 per course

Tuition: \$34.80 per participant per course

Processing fee: \$5.22 per participant per course

Total: \$40.02 per participant per course

Grand Total: \$1,600.80 (\$40.02 x 20 participants + \$40.02 x 20 participants)

Juan Carlos Aguirre, Dean

Shirley A. Reed, M.B.A., Ed.D, President

The minimum cost per group for 20 or fewer students shall remain at \$800.40 per course as the “Recovery of Cost” in order for STC to complete training for all the remaining students.

Additional students will be charged at the rate of \$40.02 per course.

Failure to make payment in full within 90 days may result in the account being sent to collections. Hidalgo County Health and Human Services understands that the College may place for collection any delinquent or defaulted monies owed South Texas College. To the extent permitted under the Constitution and the laws of the State of Texas, Hidalgo County Health and Human Services understands that Hidalgo County Health and Human Services is responsible for any costs of collection associated with the collection of any monies due the College. These costs may include collection costs, attorney fees, late fees, interest and/or court costs that may be assessed in the pursuit of monies owed South Texas College.

List of Students/Participants (see attachment):

Authorized Representative’s Signature _____ Date _____

Name/Title of Person Responsible for Representative’s Account _____ Tax ID No. _____

Billing Address _____ Telephone _____

City, State, ZIP _____ Fax _____

Type of Funding: Federal _____ CFDA _____; State: _____; Local _____; Private: _____