



# Westchester Community College

State University of New York

52979

October 18, 2016

To: Board of Acquisition and Contract

From: Belinda S. Miles  
President

Re: Amendment to a Resolution that authorized affiliation agreements with providers for the provision of supervised laboratory/clinical education and instruction for Westchester Community College students.

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Westchester Community College (the "College"), through its School of Health Careers, Technology and Applied Learning, offers a number of programs in the healthcare field. As part of these offerings, the College partners with various organizations for supervised laboratory/clinical education and instruction for matriculated Westchester Community College students who are pursuing a degree or certificate.

On January 14, 2016, your Honorable Board approved a resolution (the "January 14 Resolution") that approved a number of affiliation agreements for students in the EMS/Paramedic Program. One of the organizations included, Cortlandt Regional Paramedics, has informed the College that the agreement should actually be with the Town of Cortlandt. The agreement has not yet been executed.

Attached is a resolution that will amend the January 14 Resolution to reflect the correct name of the contracting party.

I believe that it is in the best interest of the College to provide clinical education and instruction programs; and I therefore, recommend that you act favorably on the annexed proposed resolution.

BSM:me  
Attachment

**RESOLUTION**

Upon a communication from the President of Westchester Community College,  
be it hereby

**RESOLVED**, the resolution approved by your Honorable Board on January 14, 2016 (the “January 14 Resolution”) that approved a number of affiliation agreements for students in the EMS/Paramedic Program be amended to change Cortlandt Regional Paramedics to the Town of Cortlandt; and be it further

**RESOLVED**, that all other terms and conditions of the January 14 Resolution shall remain the same; and be it further

**RESOLVED**, that the County Executive or his authorized designee is hereby authorized to execute all instruments and take all actions reasonably necessary to implement this Resolution.

Account to be Charged/Credited	Fund	Dept.	Major Program, Program & Phase Or Unit	Object/ Sub Object	Trust Account	Dollars
N/A						

Budget Funding Year(s) Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
(must match resolution)

Funding Source: Tax Dollars \_\_\_\_\_ Contractor Federal I.D. No./  
State Aid \_\_\_\_\_ Social Security No.:

\_\_\_\_\_ Federal Aid \_\_\_\_\_ Vendor No.:

(must match resolution) Other \_\_\_\_\_ Encumbrance No.: \_\_\_\_\_