

ATTACHMENT I - REFERENCE QUESTIONNAIRE
ST. LUCIE PUBLIC SCHOOLS
RFP 25-20
SPEECH-LANGUAGE THERAPY & AUDIOLOGY SERVICES

FOR: Total Communication Therapy, LLC
(Name of Vendor Requesting Reference)

This form is being submitted to your Company for completion as a business reference for the company listed above.

This form is to be returned to the School Board of St. Lucie County, Purchasing Department, email at kimberly.albritton@stlucieschools.org no later than 3:00 p.m., **May 8, 2025**, and **must not** be returned to the company requesting the reference.

For questions or concerns regarding this form, please contact the School Board of St. Lucie County, Purchasing Department, by telephone: (772) 429-3980, or by email at kimberly.albritton@stlucieschools.org. When contacting us, please be sure to include the request for proposal number and title listed at the top of this page.

Company Providing Reference: The Collaboratory Preparatory Academy
Contact Name and Title/Position: Cassandra Smith/ Principal
Contact Telephone Number: 844-702-3123
Contact Email Address: Csmith@collaboratoryprep.org

Questions:

1. In what capacity have you worked with this company in the past? If the Company was under a similar contract, please acknowledge and explain briefly whether or not the contract was successful.

Comments: She was a SLP (Speech Language Therapist)

2. How would you rate this Company's knowledge and expertise?
____3____ (3= Excellent; 2= Satisfactory; 1= Unsatisfactory; 0=

Unacceptable) Comments:

3. How would you rate the Company's flexibility relative to changes in the scope and timelines?
____3____ (3= Excellent; 2= Satisfactory; 1= Unsatisfactory; 0= Unacceptable)

Comments:

4. What is your level of satisfaction with hard-copy materials, e.g. quotation, written scopes of work, reports, logs, etc. produced by the Company?

Comments:

Comments:

Comments:

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