

INDIVIDUAL SERVICES AGREEMENT FOR NONPUBLIC, NONSECTARIAN AGENCY SERVICES  
(Education Code Sections 56365 et seq.)

This agreement is effective on July 1, 2015 or the date student begins receiving services from a nonpublic agency, if after the date identified, and terminates at 5:00 P.M. on June 30, 2016 unless sooner terminated as provided in the Master Contract and by applicable law.

Local Education Agency: San Carlos School District

Nonpublic School/Agency: Community GatePath

LEA Case Manager Name: Mary Jude Doerpinghaus, Assistant Superintendent

Phone Number 650-590-5947

Pupil Name: Student 29 Sex: \_\_\_\_\_

Grade: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Zip: \_\_\_\_\_

DOB: \_\_\_\_\_

Residential Setting: (X) Home ( ) Foster ( ) LCI # \_\_\_\_\_ ( ) OTHER \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Phone: \_\_\_\_\_

Address \_\_\_\_\_  
(If different from student)

City \_\_\_\_\_ State/Zip \_\_\_\_\_

AGREEMENT TERMS:

1. Related services as specified in the IEP shall be provided by the CONTRACTOR and paid at the rates specified below:

DESIGNATED INSTRUCTION AND SERVICES / RELATED SERVICES:

SERVICE	Provider				# of Times per wk/mo/yr., Duration; or per IEP.	Cost per session	Maximum Number of Sessions/Hours	Estimated Maximum Total Cost for Contracted Period
	LE A	NPS	NPA	OTHER Specify				
1. Educational Counseling a. Individual b. Group								
2. Language/Speech Therapy a. Individual b. Group								
3. Occupational Therapy								
4. Adapted Physical Ed.								
5. Orientation and Mobility								
6. Physical Therapy								
7. One to one Aide								
8. Behavior intervention to include:								
9. Supervision to include:								
10. Consultation to include:								
11. FBA Assessment								

12. Other: AAC					3/31/16-6/14/16 20hrs/Year (To include initial set up, training at home and school, direct work with student and classroom support and consultation.)	\$156.50/hr	20hrs	\$3,130.00
13. Other								

ESTIMATED MAXIMUM RELATED SERVICES COST

C. SPECIALIZED EQUIPMENT/SUPPLIES \_\_\_\_\_ \$

**TOTAL ESTIMATED MAXIMUM RELATED SERVICES COSTS/SPECIALIZED EQUIPMENT/SUPPLIES** \$ 3,130.00

4. Other Provisions/Attachments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

MASTER CONTRACT APPROVED BY THE GOVERNING BOARD ON \_\_\_\_\_

INDIVIDUAL SERVICES AGREEMENT APPROVED BY CASE MANAGER:

\_\_\_\_\_  
(Signature) \_\_\_\_\_ (Date)

The parties hereto have executed this Individual Services Agreement by and through their duly authorized agents or representatives as set forth below.

-CONTRACTOR-

Community Carepath  
(Name of Nonpublic School/Agency)

-DISTRICT-

San Carlos School District  
(Name of School District)

Kathy Kwan 4/12/16  
(Signature) (Date)

[Signature] 4/14/16  
(Signature) (Date)

Kathryn Keblum Director  
(Name and Title)  
of children's Therapy  
services

Mary Jude Doeringhaus, Assistant Superintendent  
(Name of Superintendent or Authorized Designee)