

Revised 1
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 Ea Sex _____ Grade: _____

Address _____ City: _____ State/Zip Code: _____

DOB: _____ Residential Setting: (X) Home () Foster () LCI # _____ () OTHER _____

Parent/Guardian: _____ Phone _____

Address _____ City _____ State/Zip _____
 (If different from student)

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								

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				
12. Other: Assistive Technology			X		ESY 6/29/15-7/24/15 0.5hrs (0.5hrs left over from 8hr bank)		0.5hrs	\$78.25
					6/29/15-7/24/15 3hrs/Month (2 hrs. Direct & 1hr Consult)	\$156.50/hr.	3hrs	\$469.50
					8/26/15-11/4/15 3hrs/Month		9hrs	\$ 1,408.50
					11/5/15-3/24/16 4hrs/Month (1hr. for consultation & devise upkeep)		20hrs	\$3,130.00
13. Other								

ESTIMATED MAXIMUM RELATED SERVICES COST

C. SPECIALIZED EQUIPMENT/SUPPLIES _____ \$

TOTAL ESTIMATED MAXIMUM RELATED SERVICES
COSTS/SPECIALIZED EQUIPMENT/SUPPLIES

4. Other Provisions/Attachments: _____ \$ 5,086.25

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 GatePath

(Name of Nonpublic School/Agency)

-DISTRICT-

San Carlos School District

(Name of School District)

Kathy Keon

(Signature)

11/10/15

(Date)

Mary Jude Doeringhaus

(Signature)

11/10/15

(Date)

Kathy Ketchum Director of
Children's Therapy
Services

(Name and Title)

Mary Jude Doeringhaus, Assistant Superintendent

(Name of Superintendent or Authorized Designee)