

INDIVIDUAL SERVICE AGREEMENT FOR NONPUBLIC, NONSECTARIAN

SCHOOL / AGENCY SERVICES

Education Code Sections 56365, 56366, et seq.

PUPIL NAME

[REDACTED] Last
 [REDACTED] First
 _____ Middle

A. BASIC EDUCATION PROGRAM (Applies to NPS only) 1:2

Number of days 217 Per Diem \$299.95 = TOTAL BASIC EDUCATION COSTS (A) \$ **65,089.15**

(Include extended school year days as appropriate to the pupil's IEP.)

B. DESIGNATED INSTRUCTION AND SERVICES / RELATED SERVICES:

	Service Provider			Total Minutes Per week or Session	Cost per Session					MAX TOTAL COST FOR CONTRACT PERIOD
	Freq	Dur	start		HOURLY	DAILY	WEEKLY	INDIV	GROUP	
1. Aide Support										
2. Counseling										
Individual	2 x			30 min wk	\$165.64					\$7,288.16
Group	2 x			30 min wk	\$82.82					\$3,644.08
Family										
3. OT										
Individual										
Consult										
4. PT										
5. Speech /Language										
Individual										
Group	1 x			30 min wk	\$82.82					\$1,822.04
Consult										
6. Transportation	217 days					\$84.86				\$18,414.62
7. Behavioral Services	1 x			Weekly	\$165.65					\$7,288.60
8. Vocational Services										

MAXIMUM TOTAL RELATED SERVICES COST (B) \$ 38,457.50

MAXIMUM TOTAL BASIC EDUCATION AND RELATED SERVICES COSTS (A+B) \$ 103,546.65

All terms and conditions of the current Agreement for NPS/NPA Service(s) previously executed by the parties hereto, are incorporated herein by reference. The CONTRACTOR will implement the IEP in accordance with this ISA and the Agreement, and will request an IEP review prior to an change in the service(s).

The parties hereto have executed this contract by and through their duly authorized agents or representatives. This contract is effective on **July 1, 2016** and terminates at 5:00 p.m. on **June 30, 2017** unless sooner terminated as provided herein.

LEA Date: _____

CONTRACTOR Date: 6/22/2016

Signature
Eric Andrew
Type or Print Name
Campbell Union School District
Name of LEA
155 North Third Street
Mailing Address
Campbell, CA 95008
City, State, Zip Code

Signature
Skye Cary
Signature
Skye Cary, Director of Educational Services
Type or Print Name
AchieveKids
Name of NPS/NPA
3860 Middlefield Road
Mailing Address
Palo Alto, CA 94303
City, State, Zip Code

[Handwritten mark]

SANTA CLARA COUNTY SELPAs
INDIVIDUAL SERVICE AGREEMENT FOR NONPUBLIC, NONSECTARIAN SCHOOL AGENCY SERVICES

Education Code Sections 56365, 56366, et seq.

PUPIL NAME _____
Last First Middle

A. BASIC EDUCATION PROGRAM (Applies to NPS only) 1:1
 Number of days 217 Per Diem \$299.95 = TOTAL BASIC EDUCATION COSTS (A) \$ **65,089.15**
 (Include extended school year days as appropriate to the pupil's IEP.)

B. DESIGNATED INSTRUCTION AND SERVICES / RELATED SERVICES:

	Service Provider			Total Minutes Per week or Session	Cost per Session					MAX TOTAL COST FOR CONTRACT PERIOD
	Freq	Dur	start		HOURLY	DAILY	WEEKLY	INDIV	GROUP	
1. Aide Support	217			Daily		\$110.00				\$23,870.00
2. Counseling Individual Group Family										
3. OT Individual Consult										
4. PT										
5. Speech /Language Individual Group Consult	1 x			30 min wk	\$165.64					\$3,644.08
	1 x			30 min wk	\$82.82					\$1,822.04
6. Transportation	217 days					\$84.86				\$18,414.62
7. Behavioral Services	1 x			Weekly			\$165.65			\$7,288.60
8. Vocational Services										

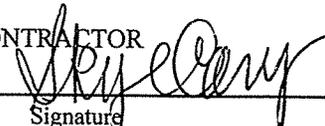
MAXIMUM TOTAL RELATED SERVICES COST (B) \$ 55,039.34

MAXIMUM TOTAL BASIC EDUCATION AND RELATED SERVICES COSTS (A+B) \$ 120,128.49

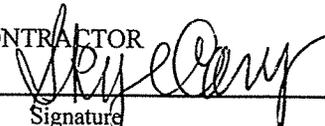
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CONTRACTOR  Date: 6/22/2016

Signature
Eric Andrew
 Type or Print Name
 Campbell Union School District
 Name of LEA
 155 North Third Street
 Mailing Address
 Campbell, CA 95008
 City, State, Zip Code

Signature

 Skye Cary, Director of Educational Services
 Type or Print Name
 AchieveKids
 Name of NPS/NPA
 3860 Middlefield Road
 Mailing Address
 Palo Alto, CA 94303
 City, State, Zip Code

