

**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) 2:1

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	
2. Counseling Individual Group Family										
3. OT Individual Consult	1x			30 min mo	\$165.64					\$ 993.84
4. PT										
5. Speech /Language Individual Group Consult	1 x 1 x 1 x			30 min wk 30 min wk 30 min mo	\$165.64 \$82.82 \$165.64					\$ 3,644.08 \$ 1,822.04 \$ 993.84
6. Transportation										
7. Behavioral Services										
8. Vocational Services										

MAXIMUM TOTAL RELATED SERVICES COST (B) **\$ 7,453.80**

MAXIMUM TOTAL BASIC EDUCATION AND RELATED SERVICES COSTS (A+B) **\$ 72,542.95**

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 any 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 30th, 2017** unless sooner terminated as provided herein.

LEA _____ Date: _____

Signature

Type or Print Name
Milpitas Unified School District

Name of LEA
1331 E. Calaveras Blvd.

Mailing Address
Milpitas, CA 95035

City, State, Zip Code

CONTRACTOR _____ Date: 07/07/16

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