



# Pacific Autism

CENTER FOR EDUCATION

Connect • Support • Educate  
1880 Pruneridge Avenue, Santa Clara, California  
95050  
Tel: 408.245.3400 Fax: 408.260.7267  
[www.pacificautism.org](http://www.pacificautism.org)

22-May-2017  
Milpitas Unified School District  
Attn: Special Education Director

**Re: MUSD Student's ISA**

Dear Accounting Manager,

The attached ISA revision was created to support a recent change in services resulting from a recent finalized IEP. The changes are aligned with the first day of the next available billing cycle following the IEP. The changes are as follows:

**Board of Directors**

Paul Lacy  
*President*  
Tom McGovern  
*Vice President*  
Dave Setti  
*Treasurer*  
Jeff Fallick  
Lisa Grisslin  
Harry Lopez  
Tom Marchok  
Debbie McCarroll  
Sarah Mudgett  
Mark Peper

**Executive Director**  
Kurt Ohlfs

**Asst. Executive Director**  
Karen Kennan

Student:

SSID:

IEP Date:

Date IEP signed:

Changes Made: FY 2017-18

Kindly sign and send to  
[toddwood@pacificautism.org](mailto:toddwood@pacificautism.org).

The revised ISA documents are based on an annual projection for the full school calendar year covering the modified service levels. PACE is a year-round program supporting the 12 months of service.

As always, I greatly appreciate your support in helping to better serve the students. Please feel free to contact me directly if you should need any further clarification.

Best regards,

Kurt Ohlfs  
Executive Director  
Voice: 408-625-6171  
Email: [kurtohlfs@pacificautism.org](mailto:kurtohlfs@pacificautism.org)

**SANTA CLARA COUNTY SELPAs**  
**INDIVIDUAL SERVICE AGREEMENT FOR NONPUBLIC, NONSECTARIAN**  
**SCHOOL/AGENCY SERVICES**  
(Education Code Sections 56365 et seq.)

This agreement is effective on July 1, 2017, or the date the student begins attending a Non-public school and/or receiving services from a Non-public agency. The agreement terminates at 5:00 p.m. on June 30, 20\_\_, unless terminated earlier in accordance with the terms of the Master Contract and applicable law.

NAME OF LOCAL EDUCATION AGENCY ("LEA"): Milpitas Unified School District

NAME OF NONPUBLIC SCHOOL/AGENCY ("NPS/NPA"): Pacific Autism Center for Education (PACE)

PUPIL NAME: \_\_\_\_\_ GENDER: ☒ M ☐ F  
(Last) (First) (Middle)

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PUPIL TELEPHONE NUMBER: ( \_\_\_\_\_ ) \_\_\_\_\_ DOB: \_\_\_\_\_

PUPIL ID/SS NUMBER: \_\_\_\_\_ GRADE: \_\_\_\_\_

RESIDENTIAL SETTING: ☒ HOME ☐ JCS ☐ FOSTER/LCI NAME: \_\_\_\_\_ # \_\_\_\_\_  
☐ OTHER \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_ PHONE: \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_  
(Residence) (Business)

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
(If different from pupil)

**CONTRACT TERMS:**

1. ~~The Contractor will implement all elements of the Master Contract.~~

Master Contract approved by the governing board on \_\_\_\_\_.

2. CONTRACTOR will provide written progress reports to the Office of Special Education before *(insert quarterly dates here)*:  
Determined by date of the IEP

3. Other Provisions (provide attachments as necessary): \_\_\_\_\_

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

PUPIL NAME: \_\_\_\_\_  
(Last) (First) (Middle)

**A. BASIC EDUCATION PROGRAM (Applies to NPS only)**

Number of Days 230 X Per Diem \$ 279 = TOTAL BASIC EDUCATION COSTS (A) \$ 64,170.00  
(Include extended school year days as appropriate to the pupil's IEP).

**B. RELATED SERVICES:**

	SERVICE PROVIDER			TOTAL MINUTES PER WEEK/ OR SESSION	COST PER SESSION					MAX TOTAL COST FOR CONTRACT PERIOD
	Freq	Duration	Start Date		HOURLY	DAILY	WEEKLY	INDIV	GROUP	
1. Adapted PE										
2. Aide Support	Daily	300 min	7/1/2017	5 hr / day	\$ 26.00					\$ 29,900.00
3. Counseling										
4. OT	Monthly	60 min	7/1/2017	1 hr / mo.	\$ 148.00			Cons		\$ 1,776.00
5. PT										
6. Speech/Language	Monthly	240 min	7/1/2017	4 hr / mo.	\$ 159.00			Indiv & Cons		\$ 7,632.00
7. Transportation										
8. Residential Board & Care										
8. Other										
9. Other										
10. Other										

MAXIMUM TOTAL RELATED SERVICES COST (B) \$ 39,308.00  
MAXIMUM TOTAL BASIC EDUCATION AND RELATED SERVICES COSTS (A+B) \$ 103,478.00

All terms and conditions of the current Master Contract 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 Master Contract, 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, 2017 and terminates at 5:00 p.m. on June 30, 2018 unless sooner terminated as provided herein.

**LEA**

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


\_\_\_\_\_  
(Type or Print Name)

\_\_\_\_\_  
(Name of LEA)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(City, State, Zip Code)

**CONTRACTOR**

\_\_\_\_\_  
(Signature)  Kurt Ohlfs  
2017.05.22  
18:35:24  
-07'00'

\_\_\_\_\_  
(Type or Print Name)

\_\_\_\_\_  
(Name of NPS/NPA)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(City, State, Zip Code)