

**INSTRUCTIONS TO LEA FOR COMPLETING (sample attached)
The Individual Service Agreement (ISA) 2015-2016 LEA Master Contract**

LEA must complete and submit the ISA to the NPS or NPA before commencement of services. The NPS/A has the right to refuse the student services until such time the ISA is submitted by the LEA. While completing this form, keep in mind that the ISA is similar to a prescription in that it specifies the type or duration of services to be provided by the NPS/A, as specified by the student's IEP.

➔ **Do not submit ISA's to NPS or NPA in blank.**

Complete Name of Local Education Agency (your District) and all student information.

A. Daily Tuition Estimate

- ◆ Enter the school of student's enrollment, the date services will start and the date services will end.
- ◆ Enter the number of regular and extended school days student will attend in boxes. For Partial Day Students enter the number regular and extended school days student will attend, rate per minute is NPS Daily Tuition rate divided by NPS Instructional minutes, enter total number of minutes per day student will attend per IEP.

B. DIS and Related Services

- ◆ Enter the start date of DIS service
- ◆ If you are using the customized ISA, the Master Contract rates are already included
- ◆ Indicate the number of minutes for each service as stated on student IEP, such as 30 minutes or 60 minutes
- ◆ Enter the frequency of service by times per week or month, such as 1 or 2
- ◆ Enter service Week, Month or Year
- ◆ Enter the estimated number of session for this service or the number of hours per year. If you are using the customized ISA, the formulas will calculate the Estimated Total Cost once you complete the following sections: "Duration", "Frequency & "Estimated ISA Service Sessions or Hours Per Year"

C. Individual Pupil Specifications - Examples of items to put here include:


- ◆ Partial day student schedule and payment for such if necessary.
- ◆ Special location or arrangements for related services.
- ◆ Special medical treatment or behavior intervention not clearly indicated in IEP.
- ◆ Other pertinent service the NPS/A must perform for student.
- ◆ Any pertinent LEA board adopted policy for serving students, which might apply to this student.

Check the figures automatically converted, if using the customized ISA template version. If you need assistance or have questions regarding the ISA templates, call Ruth Petroff at (707)527-2708.

Complete Local Education Agency (your district) information fields.

Sign and submit to NPS/A for signature prior to services starting.

Note: You can download the ISA pdf version if you need a handwritten form.

See sample below 

**INDIVIDUAL SERVICE AGREEMENT UNDER THE LEA SPECIAL EDUCATION
2015/2016 MASTER CONTRACT FOR NONPUBLIC, NONSECTARIAN SCHOOL/AGENCY SERVICES - Exhibit B ISA**

Nonpublic School/Agency: Enter the name of NPS or NPA in this space or use the customized ISA

Local Education Agency: Enter the name of your school district in this space

Pupil's Name: _____ Sex: M F Birthdate: _____ Grade: _____ Primary Disability: _____

Residential Setting: HOME FOSTER LCI Parent/Guardian's Name: _____

Number: _____

Date student will start NPA service or enrolls in NPS

Date student ends NPS/A services per the IEP

Enter Student & parent information, include student disability

_____ (Nonpublic School/Agency) and _____ (Local Education Agency) hereby execute this ISA by and through their duly authorized agents or representatives. This ISA is a part of the _____ (Nonpublic School/Agency) Contract for Nonpublic, Nonsectarian School/Agency Services and the _____ (Local Education Agency) Contract for Nonpublic, Nonsectarian School/Agency Services. Invoices shall be submitted on actual service provided and attendance started.

A. Daily Tuition Estimate: Pupil will be enrolled at Enter the school of student enrollment commencing on _____, and ending on _____, unless earlier terminated by notice from LEA upon pupil's change of residence, change of placement or termination of the Master Contract.

Number of Regular School Year Days	175	Rate Per Day	\$178.00	Total Regular School Year Basic Education Costs	\$31,150.00
Number of ESY Days	19	Rate Per Day	\$178.00	Total ESY Basic Education Costs	\$3,382.00
Partial Day Student - Number of Regular School Year Days		Rate Per Minute		Number of minutes per day	\$0.00
Partial Day Student - Number of ESY Days		Rate Per Minute		Number of minutes per day	\$0.00
Total Instructional Days	194	Total Basic Education Costs -Adjusted Annually		\$34,532.00	

Enter the number of Regular & ESY days student will attend

B. Nonpublic Agency Services and/or Designated Instruction & Related Services Estimate:

SERVICE	SERVICE START DATE	MASTER CONTRACT RATE	DURATION - MINUTES PER SESSION	FREQUENCY Times per Week or Month	WEEK MONTH OR YEAR	ESTIMATED ISA SERVICE SESSIONS	or	HOURS PER YEAR	ESTIMATED TOTAL = Cost per hour x estimated service hours or sessions
1. <i>Speech</i>	8/20/12	\$80.39	30	1	Week	38.00			\$1,527.41
2. <i>Individual Counseling</i>	8/20/12	\$70.65	60	1	Month			12.00	\$847.80
3.		\$0.00			N/A				\$0.00
4.		\$0.00			N/A				\$0.00
5.		\$0.00			N/A				\$0.00
6.		\$0.00			N/A				\$0.00
7.		\$0.00			N/A				\$0.00
8.		\$0.00			N/A				\$0.00
9.		\$0.00			N/A				\$0.00
10.		\$0.00			N/A				\$0.00
11.		\$0.00			N/A				\$0.00
12.		\$0.00			N/A				\$0.00
13.		\$0.00			N/A				\$0.00
14.		\$0.00			N/A				\$0.00
Maximum NPA Services and/or Designated Instruction & Related Services Cost - Estimate									\$2,375.21
<i>Estimate Per DIEM</i>	\$190.24	Maximum Total Basic Education & DIS/Related Services Cost - Estimate							\$36,907.21

Include **all** Related Services the NPS/A will provide to the student in this section. If using customized ISA, formulas will calculate estimated cost when you complete, "Duration", "Frequency", & "Estimated Sessions or Hours per Year"

C. Individual Pupil Specifications: Include in this section any relevant information regarding student's services at this NPS/A.

The parties hereto agree to comply with the terms of this ISA and to execute this ISA by and through their duly authorized agents or representatives.

Nonpublic Agency: Name of NPS/A NPS/A must sign here

Local Educational Agency: Name of School District District signs here

(Authorized Signature) (Date)

(Authorized Signature) (Date)

Phone Fax

Phone Fax

Enter NPS/A name, address, phone & fax in this section

Enter District name, address, phone & fax in this section