

INDIVIDUAL SERVICES AGREEMENT FOR NONPUBLIC, NONSECTARIAN SCHOOL/AGENCY SERVICES

(Education Code Sections 56365 et seq.)

Date of Contract: (revised on) 2.11.2025

This agreement is effective on (revised on) 2.11.2025 or the date student begins attending a nonpublic school or receiving services from a nonpublic agency, if after the date identified, and terminates at 5:00 P.M. on June 30, 2025, unless sooner terminated as provided in the Master Contract and by applicable law.

Local Education Agency	Oakland Military Institute College Preparatory Academy	Nonpublic School/Agency	Journey Academy	Status	Approved
LEA Case Manager Name	Ki'mm Madison	NPS/NPA Address	1800 Gravenstein Highway North Sebastopol, California 95473		
		NPS/A Phone Number	707-634-9942	CDE Certification last updated:	October-24

Student Information			SSID	Sex	Grade
Pupil Name	(Last)	(First)	(MI)		
Address	Residential Setting:		City	State/Zip	
DOB			LCI #	OTHER	
Parent/ Guardian			Parent Phone (Residence)	(Business)	
Address			City	State/Zip	
(If different from student)					

AGREEMENT TERMS:

1. Nonpublic School/Agency:

The contracted service dates are: 12.3.2024 (Start Date) 6.30.2025 (End Date)

The number contracted for service are: 106 days during the regular school year
27 weeks during the regular school year
6 months during the regular school year
20 days during the extended school year

2. Nonpublic School/Agency

The average number of minutes in the instructional day will be: 360 during the regular school year, average daily minutes
360 during the extended school year, average daily minutes

3. Educationally related services as specified in the IEP shall be provided by the CONTRACTOR and paid at the rates specified below.

A. INCLUSIVE EDUCATION PROGRAM: (Applies to nonpublic schools only):

RSY Daily Rate: \$ 294.00

ESY Daily Rate: \$ 294.00

RSY Estimated Number of Days	106	x Daily Rate	\$ 294.00	= PROJECTED BASIC EDUCATON COSTS (A)	\$ 31,164.00
ESY Estimated Number of Days	20	x Daily Rate	\$ 294.00	= PROJECTED BASIC EDUCATON COSTS (A)	\$ 5,880.00

B. RELATED SERVICES:

SERVICE	CDE Certified Services by NPS/NPA	LEA	NPS	NPA	OTHER Specify	Duration per IEP (# of minutes)	# of Times per IEP	Per wk/mo/yr per IEP	Cost per session	Maximum Number of Sessions		Estimated Maximum Total Cost for Contracted Period
										Reg	ESY	
Intensive Individual Services (340)										-	-	\$ -
Language/Speech Therapy (415)	No									-	-	\$ -
a. Individual										-	-	\$ -
b. Group										-	-	\$ -
Adapted Physical Ed. (425)	No									-	-	\$ -
Health and Nursing: Specialized Physical Health Care (435)										-	-	\$ -
Health & Nursing Services: Other (436)	No									-	-	\$ -
Assistive Technology Services (445)	No									-	-	\$ -
Occupational Therapy (450)	No									-	-	\$ -
Physical Therapy (460)	No									-	-	\$ -
Individual Counseling (510)	Yes		X			90	2	Weekly	\$ 188.57	41	6	\$ 8,862.79
Counseling and guidance (515)	Yes		X			180	3	Weekly	\$ 188.57	81	12	\$ 17,537.01
Parent Counseling (520)	Yes		X			240	4	Monthly	\$ 188.57	24	4	\$ 5,279.96
Social Work Services (525)	Yes									-	-	\$ -
Psychological Services (530)	No									-	-	\$ -
Behavior Intervention Services (535) Design/Planning	Yes									-	-	\$ -
Behavior Intervention Services (535) Implementing	Yes		X			420	7	Weekly	\$ 41.99	189	28	\$ 9,111.83

SERVICE	CDE Certified Services by Provided NPS/NPA	LEA	NPS	NPA	OTHER Specify	Duration per IEP (# of minutes)	# of Times per IEP	Per wk/mo/yr. per IEP	Cost per session	Maximum Number of Sessions		Estimated Maximum Total Cost for Contracted Period
										Reg	ESY	
Low Incidence Certified:	No											
Specialized Services for Low Incidence Disabilities (610)										-	-	\$ -
Specialized Deaf and Hard of Hearing Services (710)										-	-	\$ -
Interpreter Services (715)	TRUE									-	-	\$ -
Specialized Vision Services (725)	No									-	-	\$ -
Orientation and Mobility (730)	No									-	-	\$ -
Braille Transcription (735)	No									-	-	\$ -
Specialized Orthopedic Service (740)										-	-	\$ -
Transcription Services (755)	No									-	-	\$ -
Audiological Services (720)	No									-	-	\$ -
Recreation Services (760)	No									-	-	\$ -
College Awareness Preparation (820)	No	X				30	1	Monthly	\$ -	6	1	\$ -
Vocational Assessment, Counseling, Guidance & Career Assessment (830)	No									-	-	\$ -
Career Awareness (840)	No	X				30	1	Monthly	\$ -	6	1	\$ -
Work Experience Education (850)	No									-	-	\$ -
Mentoring (860)	No									-	-	\$ -
Agency Linkages (865)										-	-	\$ -
Travel Training (870)										-	-	\$ -
Other Transition Services (890)										-	-	\$ -
Other (900)										-	-	\$ -
Transportation										-	-	\$ -
Transportation-NPS										-	-	\$ -
Transportation-Parent Reimbursement		X				10	1	Monthly	\$ 100.00	6	1	\$ 700.00
Bus Passes										-	-	\$ -
Residential Room and Board			X			1440	1	Monthly	\$ 19,585.28	6	1	\$ 137,096.96
Other - Specialized Academic Instruction			X			360	1	Daily	\$ -	106	20	\$ -
Total Related Services												\$ 178,588.55

C. ESTIMATED MAXIMUM RELATED SERVICES COST \$ 178,588.55

D. SPECIALIZED EQUIPMENT/SUPPLIES \$ -

TOTAL ESTIMATED MAXIMUM BASIC EDUCATION/RELATED SERVICES COSTS/SPECIALIZED EQUIPMENT/SUPPLIES (A, C, & D) or (A, B, & D) \$ 215,632.55

4. Other Provisions/Attachments:

5. MASTER CONTRACT APPROVED BY THE GOVERNING BOARD ON 2.27.2025

6. Progress Reporting Requirements: Quarterly _____ Monthly _____ X Other (Specify) _____

The parties hereto have executed this Individual Services Agreement by and through their duly authorized agents or representatives as set forth below.

-CONTRACTOR-

-LEA-

Journey Academy/TLC
(Name of Nonpublic School/Agency)

Oakland Military Institute College Preparatory Academy
(Name of LEA)

(Signature) _____ (Date) 2/10/25

(Signature) _____ (Date) 2.11.2025

Jennifer Clopton, Principal
(Name and Title)

Shawna Lipsey, Director of Student Services and Special Programs
(Name of Superintendent or Authorized Designee)