EXHIBIT B: 2020-2021 ISA

INDIVIDUAL SERVICES AGREEMENT (ISA) FOR NONPUBLIC, NONSECTARIAN SCHOOL SERVICES

(Education Code Sections 56365 et seq.)

| if af | | r the date student begins attending ates at 5:00 P.M. on June 30, 201_ | | | | | | | |
|-------|--|--|-------------------|------------------|---------------|--------------------|--|--|--|
| Loca | l Education Agency | | Nonpublic School | | | | | | |
| LEA | Case Manager: Name | | Phone | Number | _ | | | | |
| Pupi | il Name (Last) | (First) | | Sex | ::□ M □ F | Grade: | | | |
| Add | ress | | ity | (171.1.) | State/Zip | | | | |
| DOB | Residential Setti | ng: ☐ Home ☐ Foster ☐ LCI # | | □ 0° | THER | | | | |
| Pare | nt/Guardian | Phone (|) (Residence) | (| () <u> </u> | - nocc) | | | |
| Add | ress (If different from s | | ity | | State/Zip | , | | | |
| AGR | EEMENT TERMS: | | | | | | | | |
| 1. | Nonpublic School: The average nurschool year | mber of minutes in the instructional | day will be: | | _ | during the regular | | | |
| year | | | | | during the | extended school | | | |
| 2. | Nonpublic School: The number of school year | school days in the calendar of the so | chool year are: | | _ c | luring the regular | | | |
| year | | | | | during the e | extended school | | | |
| 3. | Educational services as specified in | n the IEP shall be provided by the CC | NTRACTOR and paid | at the rates spe | cified below. | | | | |
| | A. INCLUSIVE AND/OR BASIC EDUCATION PROGRAM RATE: (Applies to nonpublic schools only): Daily Rate: | | | | | | | | |
| | Estimated Number of Days | _ x Daily Rate = PR | OJECTED BASIC EDU | CATION COSTS | | | | | |
| | B. RELATED SERVICES: | | | | | | | | |
| | · | Provider | | | | | | | |

| | Provider | | | | | | |
|---|----------|-----|------------------|--|---------------------|----------------------------------|--|
| SERVICE | LEA | NPS | OTHER Specify | # of Times per wk/mo/yr., Duration; or per IEP; or as needed | Cost per session | Maximum Number of Sessions | Estimated Maximum Total Cost for Contracted Period |
| Intensive Individual Services (340) | | | | | | | |
| Language/Speech Therapy (415) a. Individual b. Group | | | | | | | |
| Adapted Physical Ed. (425) | | | | | | | |
| Health and Nursing: Specialized Physical Health Care (435) | | | | | | | |
| Health and Nursing Services: Other (436) | | | | | | | |
| Assistive Technology Services (445) | | | | | | | |
| Occupational Therapy (450) | | | | | | | |