${\bf AMENDMENT\ No.} \ {\bf 1D} \\ {\bf INDIVIDUAL\ SERVICES\ AGREEMENT\ (ISA)\ FOR\ NONPUBLIC,\ NONSECTARIAN\ SCHOOL\ SERVICES} \\$

DATED August 16, 2023

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This agreement is effective on	or the date student begins	de Sections 56365 et s attending a nonpublic so	chool or receiving services fr	rom a nonpublic agency,	
if after the date identified, and terminates	at 5:00 P.M. on	, unless sooner termina	ated as provided in the Maste	er Contract and by applicable law.	
Local Education Agency <u>ALAMEDA UNI</u>	Nonpublic Scho	oolSpeech P	eech Pathology Group		
LEA Case Manager: Name <u>DR. RANDH</u>	IIR BAINS,		Phone Number <u>510-337-70</u>	098	
Pupil Name Contractor: LAKENYA A JOHNSON, S	LP - REMOTE SPEECH THERAPY - WOOD	MIDDLE SCHOOLS	Sex:] F Grade:	
Address			(M.I.)		
DOB Residential Set	ing: Home Foster LC	ol #	ОТН	HER	
Parent/Guardian		one ()	(Residence))(Busine	
Address(If different from s	tudent)	City	(Residence)	State/Zip	
AGREEMENT TERMS: 1. Nonpublic School: The average nur	nber of minutes in the instructional	day will be:		during the regular school year	
				during the extended school year	
2. Nonpublic School: The number of s		during the regular school year			
				during the extended school year	
3. Educational services as specified in	the IEP shall be provided by the 0	CONTRACTOR and pai	d at the rates specified below	W.	
A. INCLUSIVE AND/OR BASIC	EDUCATION PROGRAM RATE:	(Applies to nonpublic se	chools only): Daily Rat	te: \$959.00	
Estimated Number of Days 91	x Daily Rate \$959.00	= PROJECTED BAS	SIC EDUCATION COSTS	\$87,269	

B. RELATED SERVICES:

	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			NPA	8 hours/day	\$959/day	Reduced from 183 days to 91	(\$88,228.00)
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)							
Physical Therapy (460)							
Individual Counseling (510)							
Counseling and guidance (515).							
Parent Counseling (520)							
Social Work Services (525)							

	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
Psychological Services (530)							
Behavior Intervention Services (535)							
Specialized Services for Low Incidence Disabilities (610)							
Specialized Deaf and Hard of Hearing Services (710)							
Interpreter Services (715)							
Audiological Services (720)							
Specialized Vision Services (725)							
Orientation and Mobility (730)							
Braille Transcription (735)							
Specialized Orthopedic Service (740)							
Reader Services (745)							
Note Taking Services (750)							
Transcription Services (755)							
Recreation Services (760)							
College Awareness Preparation (820)							
Vocational Assessment, Counseling, Guidance and Career Assessment (830)							
Career Awareness (840)							
Work Experience Education (850)							
Mentoring (860)							
Agency Linkages (865)							
Travel Training (870)							
Other Transition Services (890)							
Other (900)J							
Other (900)							
Transportation-Emergency b. Transportation-Parent							
Bus Passes							
Other							

AMENDED SERVICES COST\$ (88,228.00)
ORIGINAL ISA AMOUNT\$ 175,497.00
TOTAL MAXIMUM BASIC EDUCATION AND RELATED SERVICES COSTS \$ 87,269.00 - PAID IN FULL

THE GOVERNING BOARD ON Quarterly Monthly	Other (Specify)			
idual Services Agreement by ar	nd through their duly authorized ag	gents or representatives as set forth		
OR-	-LEA/SELPA-			
	ALAMEDA UNIFIED SCHOOL DISTRICT/NORTH REGION			
	<u>SELPA</u>	<u> </u>		
	(Name of LEA/SELPA)			
02/02/2024	Kirsten Zažo (Feb 5, 2024 17:58 PST)	02/05/2024		
(Date)	(Signature)	(Date)		
	Kirsten Zazo, Assistant Superint	tendent of Ed Services		
	(Signature) President, Board of Education Alameda Unified School Distr (CONTRACTS EXCEEI AUTHORIZED WITHOUT PRESIDENT)	rict		
	idual Services Agreement by ar	Quarterly Monthly Other (Specify) idual Services Agreement by and through their duly authorized ago OR- -LI ALAMEDA UNIFIED SCHOOL SELPA (Name of LEA/SELPA) (Name of LEA/SELPA) (Signature) Kirsten Zazo, Assistant Superin (Signature) President, Board of Education Alameda Unified School Dist (CONTRACTS EXCEED AUTHORIZED WITHOUT)		