WHEREAS, the Vermont I-Team ("I-Team") provides technical assistance to public schools to help to build the capacity of school personnel to identify and use evidence-based practices for students with disabilities who have significant cognitive deficits, and to promote all students’ access, involvement and progress in the grade-level general education curriculum; and

WHEREAS the Name of School District ("District") and the I-Team have determined that I-Team services for Student Name ("Student"), a student at School Name, can build capacity and promote student access;

Now, therefore, the I-Team and the District agree as follows.

I. I-Team Responsibilities.

A. Level of Services.

1. The I-Team has no duty, and does not undertake, to provide any services or level of services beyond those described in this Agreement.

2. The I-Team will provide the District with up to 25 hours of services, as further described below.

See Section II.A. below.

B. Core Services. Core services will be provided to the Student, as follows.

1. An I-Team Educational Consultant ("Educational Consultant") will be assigned to work with the Student’s team. The assigned Educational Consultant will be the primary I-Team contact and resource for the school team.

2. Services of an I-Team Family Resources Consultant will be offered to the Student’s family, to identify family needs and resources and for the parents to provide information about the child’s needs.

3. The Educational Consultant will make an on-site visit to:
a. Observe the Student engaging in learning activities and to observe the age appropriate classroom and/or other educational setting(s) in which the Student is currently receiving instruction/services;

b. Review pertinent student records (including the Student’s current weekly schedule) and obtain additional information as needed from parents/guardians/school staff/others;

c. Meet informally/communicate with the Student’s parent/guardian, the Student’s case manager, and/or other designated school staff/service providers/consultants, to review initial observations and discuss next steps, including identification of up to three prioritized outcomes. Identified outcomes will inform the subsequent I-Team recommendations for the student’s team, and will be used to measure the Team’s progress toward the Technical Assistance Plan recommendations. Outcomes may be changed or supplemented during the year, based on the team’s progress and needs.

4. The Educational Consultant will complete an informal needs assessment to identify the specific needs that will be the focus of a plan for providing technical assistance to the District (“technical assistance plan”).

5. Using all of the information gathered, the Educational Consultant shall develop the technical assistance plan, including training as needed (training as a part of the standard level of service not to exceed 4 hours), and identifying roles and responsibilities of I-Team and IEP team members. The Educational Consultant shall then review the plan with the IEP team, on site or via electronic communication (for example, teleconferencing or Skype).

6. Travel time of I-Team staff providing technical assistance shall not be included in calculating the 25 service hours. Only one hour of the time spent by the Educational Consultant in drafting the technical assistance plan will be included in the calculation of the 25 service hours.

C. Additional Resources.

1. Based on the technical assistance plan and available hours, the following types of services may also be provided as a part of the 25 hours of service:

   a. Training of team members in specific areas related to identified needs;

   b. On site or electronic attendance at formal IEP meeting(s);

   c. Support in developing an IEP/OnePlan, educational program components, or other necessary documentation;
d. Progress review and recommendations for next steps;

e. Demonstration of recommended teaching or testing approaches;

f. Access to the I-Team Family Resource Consultant for additional
contacts with the parents/guardians to identify needs and resources;

g. Research for specific resources;

h. Creation of materials; and/or

i. Access to I-Team Statewide Related Services Consultant(s).

D. Contact Information. General inquiries or notices concerning
the carrying out of this Agreement should be addressed to the assigned
Educational Consultant: Ed Consultant Name (E-mail: Ed Consultant
Email

E. Additional Amounts, Types of Services. In the event that the
District wishes to purchase additional or different Technical
Assistance services, including additional training, from the I-Team, beyond the 25 hours of service, the District may apply to the Director
of the I-Team to determine the amount and type(s) of services, who
will deliver the services, and the hourly cost to the District.

II. District Responsibilities.

The District shall:

A. Pay $895.00 for up to 25 hours of I-Team services as described
above, during the 2014-15 school year, within 30 days of receipt of
the invoice.

B. Identify a primary contact person to whom the I-Team should
direct inquiries and other pertinent communications relating to the
work described in this Agreement.

C. Provide to the I-Team prior to the initial visit, the
Student’s current IEP and most recent Written Evaluation Report, and
promptly provide additional Student information/records upon request
of I-team staff who are providing the technical assistance.

D. Collaborate with the I-Team in determining and prioritizing
the team’s technical assistance needs.

E. Secure necessary consents from, and promote involvement of,
the Student’s parents/guardians as necessary and appropriate in the
referral and technical assistance process.

F. Provide immediate notice to the I-Team if the Student’s
parent/guardian revokes consent to the provision of special education
services and/or to disclosure of records/personally identifiable information.

G. Coordinate and support the Student’s IEP team members to be available and to participate in I-Team on-site and distance-based technical assistance (e.g., observations, meetings, and trainings).

H. Provide prompt written feedback to the I-Team about I-Team technical assistance services, through completion of the annual survey which will be circulated to the District by the I-Team at the end of the school year.

I. Review of I-Team memo with recommendations from AOE of how to reflect I-Team consultative service in student’s IEP.

The above terms are the sole and full undertakings of the parties to this Agreement. No other contractual obligations are implied.

____________________   ____________
Darren McIntyre, Director   Date
VT I-Team
Center on Disability and Community Inclusion

LEA NAME, LEA TITLE  (usually the District LEA)   Date
Name of District or SU
Authorized representative

To the LEA (Name of LEA, Name of District or SU):
Please provide the following billing contact and mailing address information:

Billing Contact Name and Title: ________________________________
Address: __________________________________________________
City: _______________ State: ______
Zip Code: _________________________
Telephone number: (802) _______________