

**SYRINGA MOUNTAIN CHARTER SCHOOL
Service Provider Agreement
For Special Education Related Services**

SPEECH THERAPY SERVICES

School Contact Person: Julie K. Evans, Special Services

Service Provider: Primary Therapy Source, LLC
Tax ID# 20-8413998
254 River Vista Place
Twin Falls, ID 83301
Phone: 208-734-7333 Fax: 208-734-8350
Email: primarytherapysource2@yahoo.com

Speech Therapists: Tracy Cloud, MS, SLP-CCC

Proof of Liability Insurance: Healthcare Providers Service Organization
Purchasing Group Policy # 0265758932

The Service Provider desires to provide and SYRINGA MOUNTAIN CHARTER SCHOOL desires to purchase speech therapy services for special education students.

Therefore, for and in consideration of the mutual covenants and agreements herein the parties agree as follows:

1. **Term:** This Agreement shall commence on Sept 8, 2016 and shall continue until terminated. Either party may terminate this Agreement by giving sixty (60) days written notice to the other.
2. **Service Provider Responsibilities:** Provide Speech Therapy services for students in the SYRINGA MOUNTAIN CHARTER SCHOOL as a result of referrals from the school, which occur during school hours. The Service Provider shall conduct Speech Therapy evaluations, provide written reports and recommendations, provide speech therapy interventions, provide periodic progress reports, attend and participate in meetings as requested and consultation sessions according to individual school and student needs.
3. **School Responsibilities:** The Special Services Coordinator or the Special Education Teacher will notify therapists in advance of the scheduled meetings and maintain correspondence, such as invitations to the appropriate meetings (IEP, MDT, CST and annual reviews) and provide verification of parent consent to evaluate students. Special Education Personnel will help arrange for space, any necessary forms, and keep SLP information in Special Education Student files.

4. **Payment for Services:** The Service Provider will be compensated for the services provided at the rate of \$70.00 per hour and \$0.585 per mile round-trip travel between Bellevue and the SYRINGA MOUNTAIN CHARTER SCHOOL. A monthly billing will be submitted to SYRINGA MOUNTAIN CHARTER SCHOOL stating the dates of service and students served.

5. **Relationship of the Parties:** This Agreement shall not be construed to create a partnership relationship or the relationship of employer/employee. It is understood the Service Provider is an independent contractor performing and providing services under contract. Accordingly, the Service Provider shall be responsible for all employment taxes, worker's compensation, professional liability insurance and other costs related to self-employment.

6. **Non Solicitation:** Syringa Mountain Charter School agrees not to solicit employment from therapists who are employed by Primary Therapy Source, LLC.

For the School:


Signature

Service Provider:

Jan Yingst, MPT, PCS
Primary Therapy Source, LLC
Signature: Jan Yingst, MPT, PCS

Director of School 9/26/16
Title or Position Date

Managing Member 9/8/2016
Title or Position Date

Ctd.
1. Contractor shall be responsible for m