

# Clark County School District #161

43 West 2<sup>nd</sup> South

P.O. Box 237

Dubois, ID 83423

Phone: 208-374-5215 Fax: 208-374-5234

Superintendent \*\* Paula Gordon

## CONTRACTUAL AGREEMENT

Pearl Health Clinic hereinafter referred to as the CONSULTANT and Clark County School District # 161 hereinafter referred to as the DISTRICT; agree to continue a contractual agreement for the purpose of providing School Counseling services herein described.

The CONSULTANT agrees to:

1. Provide annual screening, assessment, intervention and consultation as needed in the area of school psychologist during the regular school year and with extended school year services provided following special request and approval.
2. Follow the guidelines offered by the Department of Education for the above services which will include all necessary record keeping and correspondence.
3. Work with school staff and parents to aid in the delivery of the most effective intervention.
4. Provide supervision and assistance to auxiliary service providers as indicated by state and ISPA guidelines as well as the judgment of this professional.
5. Provide the above services for the agreed fee and abide and operate under the guidance of the personnel policies for the DISTRICT. The information and records obtained in the provision of service shall remain the property of the DISTRICT and are subject to all rules of confidentiality.
6. Provide evidence of Criminal Background checks for anyone servicing our District.

The DISTRICT agrees to:

1. Provide the appropriate therapeutic environment and space for the delivery of service.
2. Provide required diagnostic tools, therapy materials, DISTRICT forms and procedural guidelines necessary for the provision of service.
3. Send payment for the monthly service no later than 30 days following billing.
4. Pay a rate of \$55.00/hour and mileage at the rate of .25 cents per mile for all services.

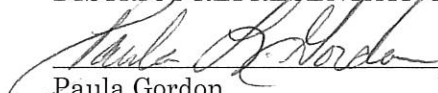
In case of hazardous weather or illness, cancellation will be made by phone to the District Office. A school calendar is enclosed. When possible, canceled appointments will be rescheduled. This agreement will be effective immediately and remains in force until terminated by either party in writing with 30 days notice.


CONSULTANT:

\_\_\_\_\_  
Daniel McGrath Date  
Psychologist, Doctor

\_\_\_\_\_  
Zakery Warren Date  
Clinical Director/Owner

DISTRICT REPRESENTATIVE

 10-15-18  
\_\_\_\_\_  
Paula Gordon Date  
Superintendent

 10-15-18  
\_\_\_\_\_  
Hilary Wheeler Date  
Special Ed Teacher