

Additional ES Services Contract

(For ES and Parent use to choose an **additional** level of ES service to students spelled out below)

2 originals of this form need to be completed. **One form is kept by the parent, one form is mailed** to IEM Student Services, 1166 Broadway Ste. Q, Placerville, CA 95667

Directions: Choose Contract A or B by **circling** one AESS Option below. **Complete 2 original contracts.** Parent **initials** each line as the items are discussed with the ES. The additional cost for the chosen AESS service is deducted from Instructional Funding. **An AESS contract can be started or stopped at any time** with signatures of either the ES or the parent. To change from one type of AESS to the other, the contract must be terminated and another contract instated. Use the section at the bottom of the left column to terminate this contract.

St. No. _____ Student Name: _____ ES: _____

AESS Option A

(\$2.86 per day from IF)

ES Will:

- ___ Choose curriculum if the parent wishes
- ___ Give written assignments for daily work
- ___ Give instruction at scheduled meeting or via email or phone as needed. (The ES may establish reasonable office hours for accepting calls.)
- ___ Evaluate student progress and assign grades as needed in consultation with parent.
- ___ Meet with student and parent face to face for at least one hour per week or two hours every other week. This meeting time may be spent evaluating student work, giving instruction, consulting with parents, observing student activities, explaining assignments, etc.
- ___ Review student progress with student and parent at every meeting
- ___ Consult at mid-semester with parent and student on student's progress.

Parent will:

- ___ Be involved and responsible for the day to day student work and day to day teaching.
- ___ Choose curriculum if they so desire.
- ___ Grade daily work.
- ___ Be present at all meetings between the ES and student in the home.

ES phone number

ES email address

For additional questions about your AESS situation, please contact your ES's Advisor at:

ES Advisor Name and phone number

For Termination of Contract:

I wish to terminate this contract on: _____
Date

Parent or ES Signature

AESS Option B

(\$5.72 per day from IF)

ES Will:

- ___ Choose curriculum
- ___ Give written assignments for daily work
- ___ Collect and evaluate daily work, grade quizzes and tests
- ___ Give instruction at scheduled meeting or via email or phone as needed. (The ES may establish reasonable office hours for accepting calls.)
- ___ Evaluate student progress and assign grades as needed
- ___ Meet with student face to face for at least one hour per week or two hours every other week. This meeting time may be spent evaluating student work, giving instruction, consulting with parents, observing student activities, explaining assignments, etc.
- ___ Review student progress with student at every meeting
- ___ Consult at mid-semester with student on student's progress.
- ___ Student may meet alone with ES only in a public location

Parent will:

- ___ Be present at all meetings held in the home.
- ___ Participate in choosing to start or terminate an AESS option for their student.

By signing below, I agree to the terms of the circled AESS option above:

Contract Start Date: _____

Student Signature

Parent Signature

ES Signature