

Agreement agree as follows:

## RECEIVED

APR 1 5 2014

## AGREEMENT FOR SERVICE

THIS AGREEMENT FOR SERVICE dat	ted this <u>28th</u> day o	of March 20 14 for the 2013-2014 School Yea
	BETWEE	N
Mid-Ohio Educational Service Cente	er (Mid-Ohio ESC) of 890	) West Fourth Street, Mansfield, Ohio, 44906
	- AND -	
NAME: Galion City Schoo	ls of	470 Portland Way North Street Address
Galion City	<u> </u>	OH, 44833 State and Zip
BACKGROUND:		
The Mid-Ohio ESC is agreeable to proset out in this Agreement.	oviding such services for	Galion City Schools on the terms and conditions

1) Services to be performed: Mid-Ohio ESC engages to perform the following tasks and services:

Provide School Psychological Services to Galion City Schools up to 30 hours per week, 4/3/14-6/14/14

**IN CONSIDERATION OF** the matters described above and of the mutual benefits and obligations set forth in this Agreement, the receipt and sufficiency of which consideration is hereby acknowledged, the parties to this

Services provided include conducting initial and re-evaluation assessments in accordance with state and federal requirements, chairing evaluation team meetings, interpreting results, making recommendations to IEP team, and participating in eligibility decisions.

2) All invoice for services will be provided	monthly. Payment i	s due within 30 days o	if invoice date.
Hourly Rate: \$ 7	1 Materials:	District provide	S
Fringes: N/A	Equipment:	\$200.00	
Mileage @N/A	Other:	N/A	
Fiscal Fee: N/A			
Signature	— Mid-Ohio ESC Supe — Mid-Ohio ESC Trea	D surer —	4-10-14 Tate
Signature	— Galion City Schools	Superintendent ${D}$	ate
Signature	— Galion City Schools	Treasurer D	ate