



HIGH PLAINS EDUCATIONAL COOPERATIVE

“High Plains Educational Cooperative will assist and support the member districts in providing educational services which will maximize opportunities for all children to live, learn, and work in society.” *HPEC Mission Statement*

621 E. Oklahoma
Ulysses, KS 67880
620-356-5577

EXTENDED SCHOOL YEAR CONTRACT INFORMATION FORM

Please mail this form to the Central Office
And give a copy to the ESY Teacher

TEACHER NAME _____ DATE _____

These students for whom I am Teacher of Record, have been determined by the IEP Team to need ESY services (Extended School Yr)

Student Name	Minutes	Days	Weeks
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____

Teacher for IEP ESY is: _____

Complete only if you are the ESY teacher

Para(s) for ESY are:

Name	Location
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Base location and phone # for ESY: _____

ESY contracts will be made up from this information

ESY hours will be paid from **ESY Time Sheets**

ESY HOURS

Add up time for each service provider involved in ESY services. Over estimate slightly so the amount we pay from timesheets will equal or be less than contract.

Contract Time Needed	ESY Teacher	Para 1	Para 2	Para 3	Para 4
1. Services (time w/ students)					
2. Planning					
3. Consulting					
4. Travel Time					
TOTAL CONTRACT HOURS					