

























pennsylvania DEPARTMENT OF EDUCATION

- Quoting rules and regulations.
- Noting how much stress this causes the district.
- Providing "canned" information.
- Please do not irritate Dr. Wells during his presentation!



























Contingency Funds 2017-18

pennsylvania DEPARTMENT OF EDUCATION

- · Clearly indicated on the IEP
- Extraordinary, such as wheelchair accessible or serious health related.
- Transportation outside the LEA.
- Explained in detail itemized and prorated for the individual student.





























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	Low Construction of Education
F	Recent Prorate Results
* * * * * * * * *	* * * * * * * * * * * * * * * * * * * *
2004-05	.37 per dollar eligible
2005-06	.19 per dollar eligible
2006-07	.16 per dollar eligible
2007-08	.1585 per dollar eligible
2008-09	.1585 per dollar eligible
2009-10	.1587 per dollar eligible
2010-11	.1588 per dollar eligible
2011-12	.1588 per dollar eligible
2012-13	.1588 per dollar eligible
2013-14	.1589 per dollar eligible (average .46)
2014-15	No Aid Ratio Applied
2015-2016	No Aid Ratio Applied
2016-2017	No Aid Ratio Applied









	tingency Funds	SAMPLE #1 (Total Costs)
Submit N	ew Funds Req	uest for the [] School Year
Please complet	e the following applicat	tion for each eligible student. Fields with an orange background are required.
Date of Reques	t	December 10, 2015
Contact Person	for this request	Dr. Joyce Boeman
Student	First Name	Steven
	Last Name	Creighton
Primary Disabil	ty	Multiple Disabilities
Placement (Not	Location)	Multiple Dis Support/Part Time
LRE		Public Separate Facility (IU)
Brief backgrour	d INCLUDING	
DISABILITY of	the eligible student	Steven is diagnosed with multiple disabilities and
		also experiences limited vision. Steven receives
		special transportation as well as vision, speech, occupational and physical therapy.

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SAMI	PLE #1 (Total Costs) cont.
Specific Request (explain extraordinary circumstances)	Steven needs assistance for most physical tasks and movements, requires modifications and adaptations to all curriculum areas utilizing assistive technology.
Explain what you have done to Insure this is the Least Restrictive Environment for this student	The team has reviewed all options for Steven and believes that his current placement is the least restrictive environment and allows for provisions to
Half-year student	No
School District Contingency F (Enter whole numbers rounded to the	und Worksheet nearest dollar; do not enter commas or centers. E.g. 25000)
Prorated teacher salary	\$
Prorated itemized teacher benefits	\$
Classroom aide prorated salary	\$
Classroom aide prorated itemized benefits	\$



Contingency Funds 2017-1			pennsylvania DEPARTMENT OF EDUCATION
SAMF Itemized therapies e.g.	PLE #1 (To	tal Costs) cont.	
One-to-one paraprofessional assignment			-
(PCA)	S		
Occupational therapy	s		
Physical therapy	s		
Speech & Language therapy	s		7
Orientation & mobility training	\$		_
Hearing itinerant services	s		
Vision itinerant services	s		
Other Costs (list/specify)		IU #41/\$87,493	Ĩ
Total - Other costs	s	87,493	
Transportation		(Pop-up) \$36,000]
Transportation amount	s	36,000]
Minus-school district state subsidy (previous year)		-10,000	
status sensor usare, sale subsidy (pressa yer)			
Calculated eligible costs	s	113,493	1



Contingency Funds	2017-18 pennsylvania Department of Education
	SAMPLE #2 (Itemized)
Submit New Funds Req	uest for the [] School Year
Please complete the following applicat	ion for each eligible student. Fields with a yellow background are required.
Date of Request	December 10, 2015
Contact Person for this request	Dr. Joyce Boeman
Student First Name	Steven
Last Name	Creighton
Primary Disability	Multiple Disabilities
Placement (Not Location)	Multiple Dis Support/Part Time
LRE	Regular School Building
Brief background INCLUDING DISABILITY of the eligible student	Steven is diagnosed with multiple disabilities and also experiences limited vision. Sleven receives
DISABILITY of the eligible student	and Operations interest ratio Control Control Control Special Iransportation as well as vision, speech Occupational and physical therapy.



	SAMPLE #2 (Itemized) cont.
	SAMPLE #2 (Itemized) cont.
Specific Request (explain extraordinary circumstances)) Steven needs assistance for most physical tasks and movements, requires modifications and adaptations to all Curriculum areas utilizing assistive technology.
Explain what you have done to Insure this is the Least Restrictive	The team has reviewed all options for Steven and believes
Environment for this student	that his current placement is the least restrictive Environment and allows for provisions to.
Half-year student	No
School District Contingency F	und Worksheet
(Enter whole numbers rounded to the	nearest dollar; do not enter commas or centers. E.g. 25000)
Prorated teacher salary	\$ 7,875
Prorated itemized teacher benefits	\$ 3,563
Classroom aide prorated salary	\$ 3,500
Classroom aide prorated itemized	
benefits	\$ 3,125



			DEPARTMENT OF EDUCATION
SA	MPLE #	2 (Itemized) c	ont.
Itemized therapies e.g.			
One-to-one paraprofessional assignment			
(PCA)	s	48,000	
Occupational therapy	\$	7,200	
Physical therapy	s	6.480	
Speech & Language therapy	s	6,480	
Orientation & mobility training	s		
Hearing itinerant services	s		
Vision itinerant services	s		
Other Costs (list/specify)		23,400	
Total – Other costs	s		_
Transportation			
Transportation amount	\$		_
Minus-school district state subsidy (previous year)	s	36.000	
		30,000	
Calculated eligible costs	\$	10.000	
		129.143	_



Continger	ncy Funds 2017-18		DEPARTMENT OF EDUCATIO
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