**BJR Special Education Advocacy/Parent Support**

**104 Mill Street, Groton, MA 01450**

**508 397 6505**

barbara.rich0@gmail.com

**2025 Fee and Policies**

**Contract for Advocacy Services**

**$88 per hour**

**This Includes:**

1. **An initial consultation on Zoom (or in-person when available)**
2. **Communication with school staff through Zoom, text, email, phone, at your request and with your permission**
3. **Meeting with your child**
4. **Reading all school evaluations, IEP, 504 Plan, progress reports, Transition Forms, & outside provider reports/evaluations**
5. **Contact with outside evaluators, (medical, therapeutic, academic) at your request and with your permission**
6. **Travel to and from meetings when available**

**AGREEMENT**

**Parents and Barbara J. Rich agree to the following:**

·      **Return advocacy forms (Contract, Student information 2-sided, Parental Permission)**

·      **Sign and date the 2025 contract**

·      **Hold initial consultation at mutually-convenient date and time**

·      **Establish collaborative, supportive communication between Barbara J. Rich, parents, school staff, and student**

·      **Agree and understand that all information pertaining to your student and family will be kept strictly confidential while this contract is active, and after the contract is terminated**

·      **Agree that no contact with school will be made without your explicit permission.**

·      **Pay invoices with 30 days of receiving**

***There is no guarantee as to the outcome of the advocacy process.***

***With collaboration and consistent, honest communication, the advocacy process will highlight all current issues, and provide useful information on behalf of the student regarding the services and support needed in school.***

**Signature: Parent/Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BJR Special Education Advocacy\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**