

ABC of NC

Service(s) Request

Child's Name:Child's Current School:			
SCHO	OOL SERVICES	School Ser	vices Requested Start Date:
	SERVICE TYPE	RATE	COMMENTS
	Students with Autism		
	Preschool/ Readiness	Check hours below	
	Aspire K-5 (for students at or near grade level)	Check hours below	
	Elementary	Check hours below	
	Middle/High	Check hours below	
Tuit	tion: \Box 6 hours-\$2,860/month \Box 5 hours-\$2,384/ month \Box 4 hours-\$1,		
	□ 3 hours-\$1,430/month □ 2 hours-\$954/ month □ 1 hour-\$476/ Classroom Aide (1:1 in Classroom) (6 hours/day, can be prorated)		
<u> </u>	Classicolli Alue (1.1 ili Classicolli) (0 ilouis/day, cali de piorated)	\$6,000/month	
	SERVICE TYPE	RATE	COMMENTS
	SERVICE TYPE School Consultation (off-site) (Travel charges apply)	RATE \$170/ hour	COMMENTS
			COMMENTS
	School Consultation (off-site) (Travel charges apply)	\$170/ hour	COMMENTS
	School Consultation (off-site) (Travel charges apply) Recommendation Visit	\$170/ hour \$170/ hour	COMMENTS
□ Stat	School Consultation (off-site) (Travel charges apply) Recommendation Visit Speech Therapy (Billed through SpeechCenter) Adaptive Martial Arts ag Sources: Self-Pay NCSEAA Opportunity Scholarship e Funded Early Intervention Scholarship (under 42 mos) ABC	\$170/ hour \$170/ hour TBD FREE NCSEAA Disabit of NC Financial Aid	lity Scholarship NCSEAA Education Savings Accou
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CLIN May be	School Consultation (off-site) (Travel charges apply) Recommendation Visit Speech Therapy (Billed through SpeechCenter) Adaptive Martial Arts Ing Sources: Self-Pay NCSEAA Opportunity Scholarship Re Funded Early Intervention Scholarship (under 42 mos) ABC IICAL/PSYCHOLOGICAL SERVICES Covered through private health insurance and/or and subject to co-pays or co-insurence of the self-self-self-self-self-self-self-self-	\$170/ hour \$170/ hour TBD FREE INCSEAA Disabile of NC Financial Aid ance RATE \$80/ hour \$170/hour	lity Scholarship NCSEAA Education Savings Accou Other COMMENTS
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SIGNATURE OF PARENT/GUARDIAN

DATE SUBMITTED

This is a request form only and not a guarantee of services. This form is not a replacement for any required financial aid/scholarship applications, insurance company or other funders' requirements.