

W.A.V.E. Funding Application

1751 North Verdugo Road
Glendale, California 91208
(818) 241-2433 – telephone
(818) 548-4173 – facsimile
www.vwpta.com

Tracking # SY11-12-2-06

12/13 Care Counselor

NAME: Mrs. Buhl DATE SUBMITTED: 3/26/2012

TITLE: Principal ROOM NO.: 1204

ADDRESS: VW School Office

PHONE: 818-241-2433 OFFICE PHONE: ext. 1204

SUMMARY OF PURPOSE OF FUNDS REQUESTED:

-- Clearly summarize what you would like to do, how you want W.A.V.E. to help, and the benefit of this project to students/school. Use additional pages, if necessary. --

To provide 100% funding for a Personal Services Agreement/Contract (PSA) for a CARE Counselor (1 day per week) currently held by Cathy Miles. The CARE Counselor will provide intervention services to identified students.

Many of our VW students need help developing age appropriate social and emotional skills to be successful in school. In past years, Mrs. Miles has had a case load of 15 – 30 students.

Mrs. Miles has not received an increase in more than 8 years ... I would like to respectfully request a 10% increase to her annual contract for next year (an increase of \$800 annually).

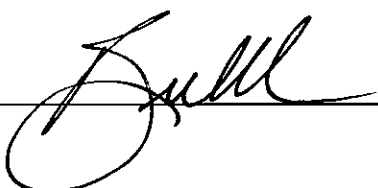
TIMELINE: Estimated Date Project Would Begin: October 2012

Date Project Would Be Completed: May 2013

TOTAL AMOUNT OF FUNDS REQUESTED: \$ \$8,800.00 (not to exceed)

BREAKDOWN OF SPECIFIC EXPENSES FOR THE PROJECT:

Quarterly payments will be made in increments of \$2,200 per the Board Approved Personal Services Agreement (PSA).

SIGNATURE:  DATE: 3/26/12