

Date Completed Pages Received from Parent/ Outside Agency: _____

Private Instructional Personnel (PIP) and/or Registered Behavior Technician (RBT) Packet

DIRECTIONS:

1. This packet may be printed from the ESE website. Schools should direct any parents or PIP/RBTs to the ESE website or PIP/RBTs who request a packet.
2. Parent(s)/Guardian(s), PIP, and/or RBT read and complete the packet pages 1-10. School staff will complete page 11 at the parent & PIP meeting.
3. Remember to provide all the documents listed on page 10 at the same time you submit the rest of the packet.
4. Remember to initial at the bottom of all pages.
5. Submit the packet to your student's school-based administrator.
6. Once the PIP/RBT packets are completed and all documents have been provided, and the Private Behavior Plan or Plan of Care has been reviewed, school-based personnel will contact the PIP and RBT to schedule a meeting to discuss the Communication Agreement of the PIP/RBT packets.
 - Approval of the PIP/RBT packets takes approximately 30 calendar days when school is in session and the fully completed packet has been submitted.

**APPLICATION TO ALLOW PRIVATE INSTRUCTIONAL PERSONNEL
INTO A SCHOOL DISTRICT OF PALM BEACH COUNTY CAMPUS**

The 2024 Florida Statutes

Title XLVIII
EARLY LEARNING-20 EDUCATION CODE

Chapter 1003
PUBLIC K-12 EDUCATION

[View Entire Chapter](#)

1003.572 Collaboration of public and private instructional personnel.-

(1) As used in this section, the term “private instructional personnel” means:

(a) Individuals certified under s. 393.17 or licensed under chapter 490 or chapter 491 for applied behavior analysis services as defined in ss. 627.6686 and 641.31098.

(b) Registered behavior technicians who have a nationally recognized paraprofessional certification in behavior analysis and who practice under the supervision of individuals described in paragraph (a) by assisting and supporting such individuals in the provision of applied behavior analysis services. To provide services under this section, a registered behavior technician must be employed by a provider described in paragraph (a).

(c) Speech-language pathologists licensed under s. 468.1185.

(d) Occupational therapists licensed under part III of chapter 468.

(e) Physical therapists licensed under chapter 486.

(f) Psychologists licensed under chapter 490.

(g) Clinical social workers licensed under chapter 491.

(2) The collaboration of public and private instructional personnel shall be designed to enhance but not supplant the school district’s responsibilities under the Individuals with Disabilities Education Act (IDEA). The school as the local education agency shall provide therapy services to meet the expectations provided in federal law and regulations and state statutes and rules. Collaboration of public and private instructional personnel will work to promote educational progress and assist students in acquiring essential skills, including, but not limited to, readiness for pursuit of higher education goals or employment. Where applicable, public and private instructional personnel shall undertake collaborative programming. Coordination of services and plans between a public school and private instructional personnel is encouraged to avoid duplication or conflicting services or plans.

(3) Private instructional personnel who are hired or contracted by parents to collaborate with public instructional personnel must be permitted to observe the student in the educational setting, collaborate with instructional personnel in the educational setting, and provide services in the educational setting according to the following requirements:

(a) The student’s public instructional personnel and principal consent to the time and place.

(b) The private instructional personnel satisfy the requirements of s. 1012.32 or s. 1012.321.

For the purpose of implementing this subsection, a school district may not impose any requirements beyond those requirements specified in this subsection or charge any fees.

(4) The provision of private instructional personnel by a parent does not constitute a waiver of the student’s or parent’s right to a free and appropriate public education under IDEA.

History.—s. 5, ch. 2013-236; s. 21, ch. 2014-184; s. 1, ch. 2022-46; s. 1, ch. 2023-281.

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**APPLICATION TO ALLOW PRIVATE INSTRUCTIONAL PERSONNEL
INTO A SCHOOL DISTRICT OF PALM BEACH COUNTY CAMPUS**

To be completed by student's parent(s)/guardian(s):

<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <div style="text-align: center;">Print Student's Name</div>	<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <div style="text-align: center;">Current School</div>	
<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <div style="text-align: center;">Current Grade</div>	<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <div style="text-align: center;">Date of Birth</div>	<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <div style="text-align: center;">Primary Eligibility</div>

I request that the following PIP/RBT be allowed to provide the service(s) indicated below for my child:

☐ Consultation	☐ Observation	☐ Direct Instruction
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<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <div style="text-align: center;">Print Private PIP/RBT's Name</div>	<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <div style="text-align: center;">Street Address</div>
<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <div style="text-align: center;">Telephone Number</div>	<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <div style="text-align: center;">City, State, Zip</div>
<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <div style="text-align: center;">Email Address</div>	
<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <div style="text-align: center;">Print Supervising BCBA/BCaBA/BCBA-D Name for an RBT request</div>	<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <div style="text-align: center;">Street Address</div>
<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <div style="text-align: center;">Telephone Number</div>	<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <div style="text-align: center;">City, State, Zip</div>
<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <div style="text-align: center;">Email Address</div>	

The PIP holds the required certification as listed in Statute 1003.572. The RBT named above and the certified Supervising Behavior Analyst, holds the current credentials to provide implementation of behavior-analytic services.

The Registered Behavior Technician™ (RBT®) is a paraprofessional in behavior analysis who practices under the close, ongoing supervision of a BCaBA, BCBA, or BCBA-D. The PIP/RBT is primarily responsible for the direct implementation of behavior-analytic services. The PIP/RBT does not design intervention or assessment plans. It is the responsibility of the PIP/RBT Supervising Behavior Analyst to determine which tasks an PIP/RBT may perform as a function of his or her training, experience, and competence. The Supervising Behavior Analyst of the PIP/RBT is responsible for the work performed by the PIP/RBT on the cases they are overseeing.

**APPLICATION TO ALLOW PRIVATE INSTRUCTIONAL PERSONNEL
INTO A SCHOOL DISTRICT OF PALM BEACH COUNTY CAMPUS**

Print Student's Name

We (the parent(s)/guardian(s) of the above-named student, the Supervising Behavior Analyst, the PIP and/or the RBT) understand that the individual providing the services is required to:

- Submit a completed packet for approval. The packet will not be processed until it is complete with all required documents on the checklist. This process can take up to 30 school days, when school is in session, and may require additional documents as determined by the school-based administration. Requests for additional documents may extend the timeline.
- Comply with Florida Statute 1003.572 requiring certification, licensure, and supervision;
- Submit to a fingerprint background screening by School District officials at the expense of the person requesting access. The screening must have occurred within the last five (5) years. Clearance for the PIP or both the Supervising Behavior Analyst and the RBT must be obtained prior to services beginning;
- Apply/Update vendor badge for both the Supervising Behavior Analyst and the PIP/RBT. **Each Private Provider must show the school a Palm Beach School District vendor badge that is current when submitting the PIP/RBT Packet.** PIP/RBT is responsible for providing updated vendor badges to the school.
 - Vendor badge(s) expires on _____. I understand that it is my responsibility to provide an updated badge to the school's administrator. If I do not, I understand that I will not be allowed to provide services until an updated badge is provided.
- Submit proof of licensure/certificate for the Supervising Behavior Analyst and the PIP/RBT;
 - Professional license/Certification(s) expires on _____. I understand that it is my responsibility to provide updated certification to the school's administrator. If I do not, I understand that I will not be allowed to provide services until my updated certification is provided.
- Sign Confidentiality Statement for the current school year.
- Sign Communication Agreement for the current school year.
- Conduct an observation by Supervising Behavior Analyst of the student in the educational setting prior to the Registered Behavior Technician providing any services in the school setting;
- Adhere to all student's assigned school's procedures including, but not limited to, adhering to the school's procedures regarding safety and security to include entering the campus through the single point of entry, signing in and out every time the PIP/RBT is on campus, and adhering to scheduled time and location of services to be provided.
- **Agree that at no time can any PIP/RBT use any physical intervention with a student on any school campus;**
- Participate in the process outlined on the PIP/RBT Initiation Checklist prior to services beginning; (a copy of this checklist will be completed with school staff);
- Provide a written tentative schedule for the provision of services during the school day to school-based administration at least one week prior to the start of each month;
- Provide a copy of the private plan of care/private behavior plan with the applicable sections highlighted to be implemented within the educational setting and a plan for fading services; and,
- Provide a copy of all data collected in the school setting agreed upon between the school and the PIP.

APPLICATION TO ALLOW PRIVATE INSTRUCTIONAL PERSONNEL INTO A SCHOOL DISTRICT OF PALM BEACH COUNTY CAMPUS

Print Student's Name _____

As the parent(s)/guardian(s) of the above-named student I understand that:

- The collaboration between school staff and the PIP/RBT does not change the District's responsibility to provide the student with a free appropriate public education under the Individuals with Disabilities Education Act and that the school and the school alone will continue to be responsible to implement the student's Individual Education Plan, as well as other plans including, but not limited to, behavior and health plans;
- My child's public instructional provider and the school's principal must consent to the time and location of where the services will be provided. In determining the time and date for services to be provided, the principal must adhere to the collective bargaining agreement for instructional employees. Services may be delivered in my child's classroom with the express permission of the principal, subject to the principal's determination that such activity will not be detrimental to the educational process and/or to other students. If the principal initially permits the PIP/RBT to provide services in the classroom, the principal may rescind permission if, at a later date, it is determined that the services are disrupting the educational process for the named student and/or other students in the classroom. The parent(s)/guardian(s) and PIP/RBT will be informed in writing if they are no longer allowed to provide services in the school setting;
- The parent(s)/guardian(s) is required to sign a release of information form annually so that the school staff, Supervising Behavior Analyst and PIP/RBT can communicate regarding services;
- Private PIP/RBTs may not be present during State/District testing;
- At no time shall a private PIP/RBT act in place of the teacher or School District staff in the classroom and will not be left alone with the student to provide supervision;
- At no time shall a private PIP/RBT intervene with other students in the school setting;
- At no time shall a private PIP/RBT take any photographs, audio recordings, or videos while in the classroom setting;
- If the Supervising Behavior Analyst/PIP/RBT violates any policies and/or procedures, they may be asked by school administration not to return to the school's campus to provide services. In the event that the Supervising Behavior Analyst violates a policy or procedure, the PIP/RBT will also have privileges removed;
- The parent(s)/guardian(s) will notify the school immediately if the Supervising Behavior Analyst or PIP/RBT are no longer providing services to the student and this PIP/RBT Packet is no longer in effect. If another PIP/RBT will be providing services, the parent(s)/guardian(s)/PIP/RBT must complete and submit a new packet to the school.
- Some goals/protocols that are appropriate in another setting may not be able to be implemented in a school setting;
- If your child's IEP team determines that Extended School Year (ESY) is needed for your child to receive FAPE, a new schedule and authorization form for the PIP/RBT must be established with staff at the ESY site. Parent(s)/guardian(s) may elect to provide a copy of the packet to the ESY site to expedite the process and establish a schedule for collaboration. Please note as per Statute 1003.572, the student's public instructional personnel and principal consent to the time and place;
- In the event that your child transfers to another School District of Palm Beach County school, it is the parent(s)/guardian(s)' responsibility to submit a copy of the packet to the new school with updated releases of information. The schedule that was previously in place will need to be reviewed and agreed upon by the teacher and administration in the new setting; and,
- Medicaid billing by the School District will not impact Medicaid billing by the private provider.
- PIP/RBTs are required to follow their professional ethics and practices. [RBT Ethics Code \(2.0\)](#)

**APPLICATION TO ALLOW PRIVATE INSTRUCTIONAL PERSONNEL
INTO A SCHOOL DISTRICT OF PALM BEACH COUNTY CAMPUS**

Print Student's Name _____

The undersigned parent(s)/guardian(s) of the relevant minor(s) and undersigned PIP/RBT hereby acknowledge that the PIP/RBT is not an employee, agent, or assignee of the School District of Palm Beach County (School Board). The parent(s)/guardian(s) of the relevant minor(s) and PIP/RBT further agree that the undersigned PIP/RBT does not have an expectation of employment with the School Board. The parent(s)/guardian(s) and PIP/RBT agree that the undersigned PIP/RBT has no right or expectation to the benefits, rights, or protections of an employee of the School Board, including, but not limited to wages, worker's compensation insurance, health insurance, disability insurance, fringe benefits, or any other benefits, rights, or protections afforded to School Board employees by contract or law.

The parent(s)/guardian(s) of the relevant minor(s) and the PIP/RBT, hereby agree and acknowledge that the School Board shall in no way be liable for any damages of any nature whatsoever which are caused or materially contributed to by the negligence, misfeasance, malfeasance, recklessness, intentional acts, unintentional acts, or any other acts of the undersigned PIP/RBT. Furthermore, the parent(s)/guardian(s) of the relevant minor(s), hereby fully release the School Board from any and all damages of any nature whatsoever which relate to, are caused by, or are materially contributed to by the direct or indirect negligence, misfeasance, malfeasance, recklessness, intentional acts, unintentional acts, or any other acts of the undersigned PIP/RBT. This release of liability specifically includes, but is not limited to, any and all claims concerning the School Board's supervision, direction, or control of the undersigned PIP/RBT, as well as the allowance of the PIP/RBT to be present on School Board property or act on School Board property.

The parent(s)/guardian(s) of the relevant minor(s), the Supervising Behavior Analyst and the PIP/RBT agree and acknowledge that the undersigned PIP/RBT shall indemnify, protect, and hold harmless the School Board for any and all damages of any nature whatsoever which are caused or materially contributed to by the negligence, misfeasance, malfeasance, recklessness, intentional acts, unintentional acts, or any other acts of the undersigned PIP/RBT. In the event that the School Board incurs any costs, legal fees, or losses resulting from claims or judgments arising out of the negligence, misfeasance, malfeasance, recklessness, intentional acts, unintentional acts, or any other acts of the undersigned PIP/RBT, then such PIP/RBT agrees to fully reimburse School Board for the same within thirty (30) days of the School Board's presentation of such costs, fees, or losses to the PIP/RBT. The undersigned PIP/RBT agrees that any amounts not reimbursed within the contractual thirty (30) day period, will incur monthly interest at the statutory rate applying to judgments in effect at the time that such cost, legal fee, or loss is presented to the PIP/RBT.

The School Board specifically reserves any and all rights, benefits, and protections afforded to it by Florida Law, whether it be by statute, administrative law, regulation, general law, or common-law. These protections specifically include, but are not limited to those afforded by Section 768.28, Florida Statutes, sovereign immunity, and any other controlling legal precedent. The parent(s)/guardian(s) of the relevant minor(s) and the PIP/RBT agree that the provisions of this agreement, and the application of any relevant laws, are to be construed in a manner that is most favorable to the School Board, so as to provide protection, indemnification, and a release of liability to the School Board.

The undersigned PIP/RBT agrees to secure a working knowledge of, and abide by, all School Board policies, rules, and procedures while present on School Board property. The undersigned PIP/RBT further understands that any observation, collaboration, or provision of private services under this agreement are subject to the consent of the applicable school principal and public instructional personnel as to time and place.

Parent/Guardian's Signature

Print Parent/Guardian's Name

Date

Parent/Guardian's Signature

Print Parent/Guardian's Name

Date

**APPLICATION TO ALLOW PRIVATE INSTRUCTIONAL PERSONNEL
INTO A SCHOOL DISTRICT OF PALM BEACH COUNTY CAMPUS**

Print Student's Name

As a Private Instructional Personnel providing services to the above-named student in a School District of Palm Beach County Public School, I acknowledge that certain information about the District's students are contained in records created and maintained by the District for which I may access and this information is confidential and protected by the Family Educational Rights and Privacy Act of 1974 (FERPA) (20 U.S. C. 1232g), and/or the Health Insurance Portability and Accountability Act (HIPAA) (45 CFR parts 160-164) and related District policies, as amended from time to time, currently available at:

<https://go.boarddocs.com/fl/palmbeach/Board.nsf/Public#tab-policies> .

I further acknowledge that I might observe and/or overhear verbal conversations about District's students that are confidential and protected by the above-named Acts and policies. This confidential information cannot be disclosed unless valid consent is obtained from eligible students or their parent(s)/guardian(s). I agree to protect these records in compliance with FERPA, HIPAA, and District's policies.

I acknowledge that I may create and maintain records pertaining to the above-named student and these records, shared with the District, will be maintained and protected by the District in the same manner as District created records.

I agree that I may create, receive from or on behalf of the District, or have access to, records or record systems that are subject to FERPA and/or HIPAA (collectively, the "Confidential Records"). I represent, warrant, and agree that I will: (1) hold the Confidential Records in strict confidence and will not use or disclose the Confidential Records except as (a) permitted or required for this individual student, (b) required by law, or (c) otherwise authorized by the District in writing; (2) safeguard the Confidential Records according to commercially reasonable administrative, physical and technical standards as required by law; and (3) continually monitor its operations and take any and all action necessary to assure that the Confidential Records are safeguarded.

To the extent permitted by law, nothing contained herein shall be construed as precluding either I or the District from releasing such information to the other so that each can perform its respective responsibilities.

I understand that a breach of this Confidentiality Statement shall constitute grounds for the District to terminate my access, to the above-named student and/or any other student, at the student's school.

Private Instructional Personnel/Registered Behavior
Technician's Signature

Date

Print Private Instructional Personnel/Registered Behavior
Technician's Name

Supervising Behavior Analyst's Signature

Date

Print Supervising Behavior Analyst's Name

**APPLICATION TO ALLOW PRIVATE INSTRUCTIONAL PERSONNEL
INTO A SCHOOL DISTRICT OF PALM BEACH COUNTY CAMPUS**

Print Student's Name

As a non-School Board employee who is being granted access to a School Board employee's classroom, the following guidelines for positive communication and working environment will be adhered to:

- The PIP/RBT will not interrupt the teaching and learning occurring in the classroom setting that is being delivered by the teacher and/or the educational support personnel;
- The PIP/RBT will provide any feedback/suggestions on implementation of interventions and strategies to the classroom staff in writing or addressed during a pre-arranged conference/collaboration time;
- If the PIP/RBT has a concern regarding behavioral strategies in the classroom, the PIP/RBT agrees to present the concerns to the Supervising Behavior Analyst who will collaborate with school administration;
- The PIP/RBT will communicate any changes to the pre-approved/agreed upon schedule to the classroom teacher. If administration requests to be included in this communication regarding schedule changes, the PIP/RBT will comply;
- The PIP/RBT will not be present for any state or district testing;
- The PIP/RBT will wear current Vendor Badge at all times when on campus;
- The PIP/RBT will not intervene with and/or discuss information about any other students in the classroom other than the individual student identified above;
- The PIP/RBT will not be responsible for supervision of the student identified above;
- The PIP/RBT will share a copy of their Plan of Care/Behavior Intervention Plan and any revisions;
- The PIP/RBT will not audiotape, audiofile, video or photograph while on the school campus; and,
- The PIP/RBT will share all data collected in the school setting as agreed upon between the PIP/RBT and the school.

Private Instructional Personnel/Registered Behavior Technician's
Signature

Date

Print Private Instructional Personnel/Registered Behavior
Technician's Name

Supervising Behavior Analyst's Signature

Date

Print Supervising Behavior Analyst's Name

**APPLICATION TO ALLOW PRIVATE INSTRUCTIONAL PERSONNEL
INTO A SCHOOL DISTRICT OF PALM BEACH COUNTY CAMPUS**

Name of Private Provider (PIP/RBT): _____

Name of Student: _____

FOR THE PARENT(S)/GUARDIAN(S):

My signature below indicates an agreement and understanding of the documents.

Parent(s)/ Guardian(s) initials	Parent(s)/ Guardian(s) initials	Acknowledgements and Agreements
		I/We, the parent(s)/guardian(s) of the above-named student, understand that the decision regarding the schedule for services in the school setting is determined by the Public Instructional Provider and the school-based administrator.
		I/We understand that approvals may take up to 30 calendar days from the date that all the required documents are received by school staff.
		I/We have provided an Authorization for Release of Information for the current school year to the school staff.
		I/We I/We understand that services in the school setting may be limited and/or stopped in order to ensure student instruction is not disrupted.

Parent/Guardian's Signature Print Parent/Guardian's Name Date

Parent/Guardian's Signature Print Parent/Guardian's Name Date

FOR THE PIP/RBT:

I will implement and comply with all the requirements contained within the completed application.

PIP Initials	RBT Initials	Acknowledgements and Agreements
		I/We, the PIP/RBT of the above-named student, understand that the decision regarding the schedule for services in the school setting is determined by the Public Instructional Provider and the school-based administrator.
		I/We understand that approvals may take up to 30 calendar days from the date that all the required documents are received by school staff.
		I/We understand that services in the school setting may be limited and/or stopped in order to ensure student instruction is not disrupted.
		I/We will provide a copy of the data collected in the school setting.

Private Instructional Personnel/Registered Behavior Technician's Signature Print Private Instructional Personnel/Registered Behavior Technician's Name Date

Supervising Behavior Analyst's Signature Print Supervising Behavior Analyst's Name Date

**APPLICATION TO ALLOW PRIVATE INSTRUCTIONAL PERSONNEL
INTO A SCHOOL DISTRICT OF PALM BEACH COUNTY CAMPUS**

Print Student's Name

I/We, the parent(s)/guardian(s) of the student, the PIP, and PIP/RBT, have read the information contained within and agree with our responsibilities and acknowledge the Indemnification section of this agreement.

We understand that the agreement will not be processed until all forms and attachments are completed and provided to the principal.

- ___ My PIP supervisor has submitted a completed PIP/RBT Packet RBTs only)
- ___ Application (pgs. 1-10 including all signatures and initials)
- ___ Signed Authorization for Release of Information/ **PBSD form 0313** - Release or transfer of student information
- ___ Hold Harmless Agreement/**PBSD 2496** (PIP/RBT)
- ___ Documentation of Applicable Certification for all PIPs (if BCBA/RBT include both Supervising Behavior Analyst and Registered Behavior Technician)
- ___ Show and provide a copy of a School District of Palm Beach County issued vendor badge attached to the top of the packet. This verifies the individual has obtained Level 2 security clearance.
- ___ Private Behavior Plan or Plan of Care must contain the procedures and strategies to be used to implement the goals with the applicable sections highlighted to be implemented within the educational setting.
- ___ Attach Insurance Review approval clearance document provided by Risk Management.

Parent(s)/Guardian(s)'s Signature

Date

Print Parent(s)/Guardian(s)'s Name

Private Instructional Personnel/Registered Behavior Technician's
Signature

Date

Print Private Instructional Personnel/Registered Behavior Technician's
Name

Supervising Behavior Analyst's Signature

Date

Print Supervising Behavior Analyst's Name

**APPLICATION TO ALLOW PRIVATE INSTRUCTIONAL PERSONNEL
INTO A SCHOOL DISTRICT OF PALM BEACH COUNTY CAMPUS**

TO BE COMPLETED BY SCHOOL STAFF ONLY

Print Student's Name

Current School

The Supervising Behavior Analyst conducted an observation of the student in the school setting.

Date of Observation _____

____ Private Instructional Personnel/Supervising Behavior Analyst and school staff reviewed the School Board's IEP and BIP (when applicable) and the private behavior plan (when applicable).

____ School staff collaborated with Behavioral Support Person to ensure that private and school-based BIPs (when applicable) are aligned and there are no anticipated conflicts between the plans.

____ In the event that there are any interventions on the private behavior plan that cannot be implemented in the school setting, the Supervising Behavior Analyst agrees not to allow the PIP/RBT to implement these interventions in the school setting.

____ A system is created for the exchange of information between the PIP/RBT and the school. School-based staff and the PIP/RBT discussed the system to be used which will be: _____

____ Reviewed school procedures to include school safety protocols.

____ An SDPBC staff member MUST be present when a PIP/RBT is providing services.

____ As per the Florida Statute 1003.572, the principal and public instructional personnel have consented to the following time and place for the PIP and/or PIP/RBT to provide services (to be completed by school-based staff).

	Monday	Tuesday	Wednesday	Thursday	Friday
Time					
Place					

Private Instructional Personnel/Registered
Behavior Technician's Signature

Print Private Instructional Personnel/Registered
Behavior Technician's Name

Date

Supervising Behavior Analyst's Signature

Print Supervising Behavior Analyst's Name

Date

Principal's Signature

Print Principal's Name

Date



THE SCHOOL DISTRICT OF PALM BEACH COUNTY
INFORMATION TECHNOLOGY/RECORDS MANAGEMENT

Student Records Request to Release or Transfer Information

This form is used to facilitate the release or transfer of student information to authorized individuals. Individuals requesting information from or releasing information to must complete all applicable sections below. A copy of your driver's license, state ID, or other form of photo identification showing your name, date of birth, and signature is required. Requests will not be processed without the proper identification.

Student ID # (optional)	Student First Name	M.I.	Last Name	Birth Date
Student Former Name (if applicable)			Parent/Guardian Name (if applicable)	
Student Address		City		State Zip Code
Last School Attended (including preschool)			City	
Grade Level This Year			Last Date Attended	

Request for: ☐ Release of Student Records ☐ Request To View Student Records

Agency/Individual/Advocate				
Contact Name	Phone #	Ext.	Email Address	
Mailing Address	City		State	Zip Code

Send Records To (if address is different from above)				
Contact Name	Phone #	Ext.	Email Address	
Mailing Address	City		State	Zip Code

Provide all education records or select the specific information being requested in reference to the above named student.

☐ Exceptional Student Education/Section 504/Gifted	☐ Transcript	☐ Monitoring/Safety Plan	☐ Attendance
☐ English Language Learner/ESOL	☐ Testing	☐ Health Records	☐ All
Other: _____			

I understand that the purpose of this release is to facilitate the communication of student information to authorized individuals. The Family Educational Rights and Privacy Act (FERPA) of 1974, as amended, protects the privacy of education records, and student related information. I understand and agree that this information will not be disclosed to any third party without the express consent of the parent or adult student.

I authorize: ☐ The School District of Palm Beach County to ☐ Other to

☐ release the student records for the above named student

☐ receive the above selected educational records for the above named student

☐ discuss student records or other student related information

This release is active from: date _____ to date _____ or until the end of the school year - whichever one comes first.

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Date

Printed Name of Student

Signature of Student if 18 Years of Age or Older

Date



THE SCHOOL DISTRICT OF PALM BEACH COUNTY
RISK AND BENEFITS MANAGEMENT

Hold Harmless Agreement

The Hold Harmless Agreement spells out the insurance requirements for the Vendor/Concessionaire/Service Provider. Insurance is required for all events as described in the Special Event Risk Planning Guide regardless of dollar value of the event.

Vendor/Concessionaire/Service Provider Name	Contact Name	Contact Phone #	
Address	City	State	Zip Code

MINIMUM INSURANCE REQUIREMENTS

- Commercial General Liability. Required \$1,000,000 per occurrence, \$2,000,000 aggregate. This policy shall cover the contractual liability assumed by Vendor/Concessionaire/Service Provider under the indemnification provision set forth in the agreement, and include Bodily Injury, Property Damage, Personal Injury. The School Board of Palm Beach County shall be endorsed as an additional insured to the policy.
- Automobile Liability Insurance. Required only if you are providing transportation (e.g. limousine or bus service) or bringing automobiles onto District property at the event. \$500,000 limit required. The School Board of Palm Beach County shall be endorsed as an additional insured to the policy.
- Workers' Compensation Insurance. Required if you have employees engaged in the performance or work under this agreement.
- Waiver of Subrogation – In the event of loss, damage or injury to the Vendor/Concessionaire/Service Provider and/or the Vendor's/Concessionaire's/Service Provider's property, the Consultant shall look solely to any insurance in its favor without making any claim against the School Board of Palm Beach County. The Vendor hereby waives any right of subrogation against the School Board of Palm Beach County, for loss, damage or injury within the scope of the Vendor's insurance, and on behalf of itself and its insurer, waives all such claims against the School Board of Palm Beach County. This waiver must be endorsed to the Commercial General Liability policy, Auto policy and Workers' Compensation policy where applicable.

A Certificate of Insurance showing policy limits, the additional Insured endorsement to the policy and waiver of subrogation MUST be submitted with your lease or contract.

The terms and conditions of this agreement shall apply with respect to Vendor's/Concessionaire's/Service Provider's operations for any school or ancillary buildings owned by the School Board of Palm Beach County.

NOTE: Other insurance may be required depending on the nature of the work performed or the type and size of the scheduled event.

HOLD HARMLESS

I/We _____ (name of the vendor/concessionaire/service provider)
shall save, defend, indemnify, and hold harmless, the School Board of Palm Beach County, including all officers, directors, instructors, support staff and volunteers with respect to my/our liability for "bodily injury," "property damage" or "personal and advertising injury" caused by my/our acts or omissions for the acts or omissions of those acting on my/our behalf:

- In the performance of my/our ongoing operations; or
- In the sale or distribution of my/our products; or
- In connection with my/our property or premises rented to you.
- In following, all requirements found in the School Board of Palm Beach County's lease agreement.

Signature of Vendor, Concessionaire, or Service Provider

Date

NOTE: Failure of Vendor/Concessionaire/Service Provider to keep the required insurance policies in full force and effect during the work covered by this agreement shall constitute a breach of agreement. In the event of a breach, the School Board of Palm Beach County shall have the right but not the duty to procure insurance covering the vendor for the period of this agreement. The School Board of Palm Beach County will deduct the cost of this insurance from the proceeds due to the Vendor/Concessionaire/Service Provider.