

**DEPARTMENT OF SPECIAL SERVICES  
TOWNSHIP OF UNION PUBLIC SCHOOLS  
M-E-M-O-R-A-N-D-U-M**

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**TO: Dr. Gerald Benaquista**

**C: Dr. Jose Rodriguez  
Marissa McKenzie  
Yolanda Koon  
Bernadette Watson  
Diane Cappiello  
Suan Lam**

**From: Kim Conti**

**Re: Board Agenda Item**

**Date: May 26, 2026**

**Approve Morris Union Jointure Commission, 340 Central Avenue, New Providence, New Jersey to provide:**

- **Physical Therapy: \$235.00 per hour**
- **Occupational Therapy: \$215.00 per hour**
- **Speech Therapy: \$250.00 per hour**
- **Full-Time Personal Aides for ESY: \$11,600.00**
- **Full-Time Personal Aides for School Year: \$69,600.00**
- **Half-Time Aides for ESY: \$5,800.00**
- **Half-Time Aides for School Year: \$34,800.00**

**These services are in accordance with the student's IEPs and will be charged to Account # 11-000-216-320-01-19, not to exceed \$650,000.00 for the 2026-2027 school year.**

**Morris-Union Jointure Commission  
Developmental Learning Center – New Providence, Warren  
Full-time Personal One-to-One Teacher Assistant  
For students who attend the DLCs 2026 Extended School Year**

AGREEMENT dated this day March 5, 2026 between the **School District / Board of Education**, in the County of **County**, and the State of New Jersey (hereinafter referred to as the "SENDING DISTRICT"), and the Morris-Union Jointure Commission Board of Education, in the County of Union, and the State of New Jersey (hereinafter referred to as the "RECEIVING DISTRICT").

**WITNESSETH**

NOW, THEREFORE, in consideration of the covenants herein contained, the parties agree as follows:

1. The SENDING DISTRICT agrees to purchase educational services from the RECEIVING DISTRICT. The RECEIVING DISTRICT agrees to provide educational services to the SENDING DISTRICT in accordance with the applicable New Jersey statutes and the regulations of the State Board of Education. The specific educational services to be purchased and provided are described in 1a. below.
  - 1a. The specific educational services described in this section are to be provided for:

**Last, First**, an educationally disabled resident pupil from the SENDING DISTRICT.

The educational services to be provided are for a **full-time teacher assistant**. The SENDING DISTRICT agrees to reimburse the RECEIVING DISTRICT for all costs associated with the employment of a **full-time teacher assistant** inclusively for the purpose of implementing an individualized comprehensive behavioral management program. It is expressly understood that the teacher assistant will be an employee of the RECEIVING DISTRICT and will abide by all applicable rules and regulations, with ethical and legal consideration regarding confidentiality related to school district and state regulations.
2. The RECEIVING DISTRICT will provide a **full-time teacher assistant** that may or may not be the same teacher assistant on a daily basis. The services of the two full-time teacher assistants will not be available during the lunch period.
3. This AGREEMENT shall be in effect for **2026 ESY**. The educational services for a **full-time teacher assistant** shall commence **June 25, 2026** and terminate on the last day of the Morris-Union Jointure Commission Extended School Year Program, **August 6, 2026**.


For educationally disabled student(s) enrolled the first school day of the Extended School Year, the SENDING DISTRICT agrees to pay **\$11,600.00** fee for services to the RECEIVING DISTRICT. If the student starts after the first day of ESY, the SENDING DISTRICT will prorate the fee based on the per diem rate.
4. The RECEIVING DISTRICT agrees to provide the SENDING DISTRICT with a monthly fee for services bill.
5. The SENDING DISTRICT shall remain responsible for the entire fee for a **full-time teacher assistant** for chosen services in number 3 above until it communicates to the RECEIVING DISTRICT in writing a disenrollment date for the educationally disabled resident student. In the event the SENDING DISTRICT provides timely written notice of disenrollment, the RECEIVING DISTRICT agrees to adjust fee for services for the final month of attendance based upon a per diem rate.
6. Subject to the provisions of the New Jersey Torts Claims Act and the New Jersey Contractual Liability Act, the SENDING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests assume all liability for and agree to indemnify and hold the RECEIVING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests harmless from and against any and all claims, losses,

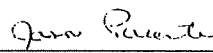
damages, injuries, and expenses, including but not limited to reasonable attorneys' fees arising from or incurred in connection with any acts, omissions, or negligence by the SENDING DISTRICT, or its agents, employees, officers volunteers, licensees, invitees, and guests related to the performance of their obligations under this Agreement. Subject to the provisions of the New Jersey Tort Claims Act and the New Jersey Contractual Liability Act, the RECEIVING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests assume all liability for and agree to indemnify and hold the SENDING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests harmless from and against any and all claims, losses, damages, injuries, and expenses, including but not limited to reasonable attorneys' fees arising from or incurred in connection with any acts, omissions, or negligence by the RECEIVING DISTRICT, or its agents, employees, officers, volunteers, licensees, invitees, and guests related to the performance of their obligations under this Agreement. Both the SENDING DISTRICT and RECEIVING DISTRICT shall maintain liability insurance with limits as required by law.

IN WITNESS WHEREOF, the parties have caused this AGREEMENT to be duly executed this **March 5, 2026**.

\_\_\_\_\_  
Board President, Sending District Board of  
Education

\_\_\_\_\_  
Board Secretary, Sending District  
Board of Education

  
\_\_\_\_\_  
Nick Markarian, Board President  
Receiving District Board of Education

  
\_\_\_\_\_  
Jason Parenti, Board Secretary  
Receiving District Board of Education

**Morris-Union Jointure Commission  
Developmental Learning Center – New Providence, Warren  
Full-time Personal One-to-One Teacher Assistant  
For students who attend the DLCs 2026 – 2027 School Year**

AGREEMENT dated **March 5, 2026** between the **District / Board of Education**, in the County of **County**, and the State of New Jersey (hereinafter referred to as the "SENDING DISTRICT"), and the Morris-Union Jointure Commission Board of Education, in the County of Union, and the State of New Jersey (hereinafter referred to as the "RECEIVING DISTRICT").

**WITNESSETH**

NOW, THEREFORE, in consideration of the covenants herein contained, the parties agree as follows:

1. The SENDING DISTRICT agrees to purchase educational services from the RECEIVING DISTRICT. The RECEIVING DISTRICT agrees to provide educational services to the SENDING DISTRICT in accordance with the applicable New Jersey statutes and the regulations of the State Board of Education. The specific educational services to be purchased and provided are described in 1a. below.

1a. The specific educational services described in this section are to be provided for:

**Last, First**, an educationally disabled resident pupil from the SENDING DISTRICT.

The educational services to be provided are for a **full-time teacher assistant**. The SENDING DISTRICT agrees to reimburse the RECEIVING DISTRICT for all costs associated with the employment of a **full-time teacher assistant** inclusively for the purpose of implementing an individualized comprehensive behavioral management program. It is expressly understood that the teacher assistant will be an employee of the RECEIVING DISTRICT and will abide by all applicable rules and regulations, with ethical and legal consideration regarding confidentiality related to school district and state regulations.

2. The RECEIVING DISTRICT will provide a **full-time teacher assistant** that may or may not be the same teacher assistant on a daily basis. The services of the two full-time teacher assistants will not be available during the lunch period.

3. This AGREEMENT shall be in effect for the **2026-2027** school year. The educational services for a full-time teacher assistant shall commence **September 2, 2026** and terminate on the last day of the Morris-Union Jointure Commission school year as set in accordance with state regulations.

For educationally disabled student(s) enrolled the first school day of the School Year, the SENDING DISTRICT agrees to pay **\$69,000.00** fee for services based upon the annual fee for the RECEIVING DISTRICT. If the student starts after the first day of school, the SENDING DISTRICT will prorate the first month fee based on the per diem rate.


4. The RECEIVING DISTRICT agrees to provide the SENDING DISTRICT with a monthly fee for services bill.

5. The SENDING DISTRICT shall remain responsible for the entire fee for a **full-time teacher assistant** for chosen services in number 3 above until it communicates to the RECEIVING DISTRICT in writing a disenrollment date for the educationally disabled resident student. In the event the SENDING DISTRICT provides timely written notice of disenrollment, the RECEIVING DISTRICT agrees to adjust fee for services for the final month of attendance based upon a per diem rate.

6. Subject to the provisions of the New Jersey Torts Claims Act and the New Jersey Contractual Liability Act, the SENDING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests assume all liability for and agree to indemnify and hold the RECEIVING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests harmless from and against any and all claims, losses, damages, injuries, and expenses, including but not limited to reasonable attorneys' fees arising from or incurred in connection with any acts, omissions, or negligence by the SENDING DISTRICT, or its agents, employees, officers, volunteers, licensees, invitees, and guests related to the performance of their obligations under this Agreement. Subject to the provisions of the New Jersey Tort Claims Act and the New Jersey Contractual Liability Act, the RECEIVING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests assume all liability for and agree to indemnify and hold the SENDING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests harmless from and against any and all claims, losses, damages, injuries, and expenses, including but not limited to reasonable attorneys' fees arising from or incurred in connection with any acts, omissions, or negligence by the RECEIVING DISTRICT, or its agents, employees, officers, volunteers, licensees, invitees, and guests related to the performance of their obligations under this Agreement. Both the SENDING DISTRICT and RECEIVING DISTRICT shall maintain liability insurance with limits as required by law.

IN WITNESS WHEREOF, the parties have caused this AGREEMENT to be duly executed this date of **March 5, 2026**

\_\_\_\_\_  
President, Sending District  
Board of Education

  
\_\_\_\_\_  
Nick Markarian, Board President  
Receiving District Board of Education

\_\_\_\_\_  
Board Secretary, Sending District  
Board of Education

  
\_\_\_\_\_  
Jason Parenti / Board Secretary,  
Receiving District Board of Education

**Morris-Union Jointure Commission**  
**Developmental Learning Center – New Providence, Warren**  
**Half-time Personal One-to-One Teacher Assistant**  
**For students who attend the DLCs 2026 ESY and 2026- 2027 School Year**

AGREEMENT dated **March 5, 2026** between the **District / Board of Education**, in the County of **Sussex**, and the State of New Jersey (hereinafter referred to as the "SENDING DISTRICT"), and the **Morris-Union Jointure Commission Board of Education**, in the County of **Union**, and the State of New Jersey (hereinafter referred to as the "RECEIVING DISTRICT").

**WITNESSETH**

NOW, THEREFORE, in consideration of the covenants herein contained, the parties agree as follows:

1. The SENDING DISTRICT agrees to purchase educational services from the RECEIVING DISTRICT. The RECEIVING DISTRICT agrees to provide educational services to the SENDING DISTRICT in accordance with the applicable New Jersey statutes and the regulations of the State Board of Education. The specific educational services to be purchased and provided are described in 1a. below.

1a. The specific educational services described in this section are to be provided for:

**Last, First**, an educationally disabled resident pupil from the SENDING DISTRICT.

The educational services to be provided are for a **half-time teacher assistant**. The SENDING DISTRICT agrees to reimburse the RECEIVING DISTRICT for all costs associated with the employment of a **half-time teacher assistant** inclusively for the purpose of implementing an individualized comprehensive behavioral management program. It is expressly understood that the teacher assistant will be an employee of the RECEIVING DISTRICT and will abide by all applicable rules and regulations, with ethical and legal consideration regarding confidentiality related to school district and state regulations.

2. The RECEIVING DISTRICT will provide a half-time teacher assistant that may or may not be the same teacher assistant on a daily basis. The services of the half-time teacher assistant will not be available during the lunch period.

3. This AGREEMENT shall be in effect for 2026 ESY and the 2026-2027 school year. The educational services for a half-time teacher assistant shall commence **June 25, 2026** and terminate on the last day of the Morris-Union Jointure Commission school year as set in accordance with state regulations.

**Choose all that apply:**

3a. \_\_\_\_ For educationally disabled student(s) enrolled the first school day of the Extended School Year, the SENDING DISTRICT agrees to pay **\$5,800.00** fee for services to the RECEIVING DISTRICT. If the student starts after the first day of ESY, the SENDING DISTRICT will prorate the fee based on the per diem rate.

3b. \_\_\_\_ For educationally disabled student(s) enrolled the first school day of the School Year, the SENDING DISTRICT agrees to pay **\$34,800.00** after the first day of school, the SENDNIG DISTRICT will prorate the first month fee based on the per diem rate.

4. The RECEIVING DISTRICT agrees to provide the SENDING DISTRICT with a monthly fee for services bill.


5. The SENDING DISTRICT shall remain responsible for the entire fee for a **half-time teacher assistant** for chosen services in number 3 above until it communicates to the RECEIVING DISTRICT in writing a disenrollment date for the educationally disabled resident student. In the event the SENDING DISTRICT

provides timely written notice of disenrollment, the RECEIVING DISTRICT agrees to adjust fee for services for the final month of attendance based upon a per diem rate.


6. Subject to the provisions of the New Jersey Torts Claims Act and the New Jersey Contractual Liability Act, the SENDING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests assume all liability for and agree to indemnify and hold the RECEIVING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests harmless from and against any and all claims, losses, damages, injuries, and expenses, including but not limited to reasonable attorneys' fees arising from or incurred in connection with any acts, omissions, or negligence by the SENDING DISTRICT, or its agents, employees, officers, volunteers, licensees, invitees, and guests related to the performance of their obligations under this Agreement. Subject to the provisions of the New Jersey Tort Claims Act and the New Jersey Contractual Liability Act, the RECEIVING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests assume all liability for and agree to indemnify and hold the SENDING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests harmless from and against any and all claims, losses, damages, injuries, and expenses, including but not limited to reasonable attorneys' fees arising from or incurred in connection with any acts, omissions, or negligence by the RECEIVING DISTRICT, or its agents, employees, officers, volunteers, licensees, invitees, and guests related to the performance of their obligations under this Agreement. Both the SENDING DISTRICT and RECEIVING DISTRICT shall maintain liability insurance with limits as required by law.

IN WITNESS WHEREOF, the parties have caused this AGREEMENT to be duly executed this date of **March 5, 2026**.

\_\_\_\_\_  
President, Sending District  
Board of Education

  
\_\_\_\_\_  
Nick Markarian, Board President  
Receiving District Board of Education

\_\_\_\_\_  
Board Secretary, Sending District  
Board of Education

  
\_\_\_\_\_  
Jason Parenti / Board Secretary,  
Receiving District Board of Education

**RELATED SERVICES CONTRACT HOURLY 2026 EXTENDED SCHOOL YEAR**

Please Note: This form is to be used only for services that are **not included** as a class component. Please use **one contract per service**.

Student: \_\_\_\_\_ D.O.B.: \_\_\_\_\_  
 Sending District: \_\_\_\_\_ Sending District Code: \_\_\_\_\_  
 Receiving District: Morris-Union Jointure Commission Receiving District Code: 3395  
 Class Name: \_\_\_\_\_ Teacher: \_\_\_\_\_  
 School: Developmental Learning Center NP / WN School Code: 050 / 080  
 Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_

**PERSONAL ONE-TO-ONE TEACHER ASSISTANT**

Full Day (FT)  
 Half-Time (PT)

**COST/  
MONTH**

\$11,600  
 \$5,800

**SERVICES REQUESTED: (check one only)**

Adaptive Physical Education  
 Occupational Therapy Services w/OTR  
 Physical Therapy Services  
 Speech/Language Services

**COST/HOUR**  
**Member Non-Member**

|       |       |
|-------|-------|
| \$210 | \$275 |
| \$215 | \$285 |
| \$235 | \$315 |
| \$250 | \$335 |

**INSERVICES**

Inservice half day  
 Inservice full day

**COST PER INSERVICE**

|         |         |
|---------|---------|
| \$805   | \$1,070 |
| \$1,425 | \$1,895 |

Please **check one** of the three options below.

- Evaluation only. Authorize up to \_\_\_\_\_ hours for the evaluation. We wish to review recommendations before requesting therapy. (In this case, a second form must be submitted if you wish to request services).
- Evaluation and proceed with therapy as recommended by the evaluating therapist up to \_\_\_\_\_ hrs./wk.
- Therapy (Note:  $\frac{1}{2}$  hour minimum and 15 minute increments only)

Individual: \_\_\_\_\_ sessions/week \_\_\_\_\_ minutes/session  
 Group: \_\_\_\_\_ sessions/week \_\_\_\_\_ minutes/session  
 Consultation: \_\_\_\_\_ sessions/week \_\_\_\_\_ minutes/session

I hereby agree to authorize payment to the Morris-Union Jointure Commission for the provision of the aforementioned service at the rate stipulated in this contract. I understand that the monthly invoice for this service will reflect the hourly rate multiplied by 4.2 weeks per month. I further understand that written notice must be given to the Morris-Union Jointure Commission for discontinuance of the above service.

In certain circumstances concerning distance to student's site, the Morris-Union Jointure Commission may charge an additional fee for travel.

Subject to the provisions of the New Jersey Torts Claims Act and the New Jersey Contractual Liability Act, the SENDING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests assume all liability for and agree to indemnify and hold the RECEIVING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests harmless from and against any and all claims, losses, damages, injuries, and expenses, including but not limited to reasonable attorneys' fees arising from or incurred in connection with any acts, omissions, or negligence by the SENDING DISTRICT, or its agents, employees, officers, volunteers, licensees, invitees, and guests related to the performance of their obligations under this Agreement. Subject to the provisions of the New Jersey Tort Claims Act and the New Jersey Contractual Liability Act, the RECEIVING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests assume all liability for and agree to indemnify and hold the SENDING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests harmless from and against any and all claims, losses, damages, injuries, and expenses, including but not limited to reasonable attorneys' fees arising from or incurred in connection with any acts, omissions, or negligence by the RECEIVING DISTRICT, or its agents, employees, officers, volunteers, licensees, invitees, and guests related to the performance of their obligations under this Agreement. Both the SENDING DISTRICT and RECEIVING DISTRICT shall maintain liability insurance with limits as required by law.

\_\_\_\_\_  
**(Print) Director of Special Services**

\_\_\_\_\_  
School Business Administrator  
(If required by requesting district)

\_\_\_\_\_  
**(Signature) Director of Special Services**

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

MORRIS-UNION JOINTURE COMMISSION

340 Central Avenue

New Providence, NJ 07974

(908) 464-7625

FAX (908) 464-1244

RELATED SERVICES CONTRACT HOURLY 2026-2027 SCHOOL YEAR

Please Note: This form is to be used only for services that are **not included** as a class component. Please use one contract per service.

Student: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Sending District: \_\_\_\_\_ Sending District Code: \_\_\_\_\_

Receiving District: Morris-Union Jointure Commission Receiving District Code: 3395

Class Name: \_\_\_\_\_ Teacher: \_\_\_\_\_

School: Developmental Learning Center NP / WN School Code: 050 / 080

Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_

**PERSONAL ONE-TO-ONE TEACHER ASSISTANT**

Full Day (FT)

Half-Time (PT)

**COST/  
MONTH**

\$6,960

\$3,480

**SERVICES REQUESTED: (check one only)**

Adaptive Physical Education

Occupational Therapy Services w/OTR

Physical Therapy Services

Speech/Language Services

| <b>COST/HOUR</b> |                   |
|------------------|-------------------|
| <b>Member</b>    | <b>Non-Member</b> |
| \$210            | \$275             |
| \$215            | \$285             |
| \$235            | \$315             |
| \$250            | \$335             |

**INSERVICES**

Inservice half day

Inservice full day

| <b>COST PER INSERVICE</b> |         |
|---------------------------|---------|
| \$805                     | \$1,070 |
| \$1,425                   | \$1,895 |

Please **check one** of the three options below.

- Evaluation only. Authorize up to \_\_\_\_\_ hours for the evaluation. We wish to review recommendations before requesting therapy. (In this case, a second form must be submitted if you wish to request services).
- Evaluation and proceed with therapy as recommended by the evaluating therapist up to \_\_\_\_\_ hrs./wk.
- Therapy (Note: ½ hour minimum and 15 minute increments only)

Individual: \_\_\_\_\_ sessions/week \_\_\_\_\_ minutes/session

Group: \_\_\_\_\_ sessions/week \_\_\_\_\_ minutes/session

Consultation: \_\_\_\_\_ sessions/week \_\_\_\_\_ minutes/session

I hereby agree to authorize payment to the Morris-Union Jointure Commission for the provision of the aforementioned service at the rate stipulated in this contract. I understand that the monthly invoice for this service will reflect the hourly rate multiplied by 4.2 weeks per month. I further understand that written notice must be given to the Morris-Union Jointure Commission for discontinuance of the above service.

In certain circumstances concerning distance to student's site, the Morris-Union Jointure Commission may charge an additional fee for travel.

Subject to the provisions of the New Jersey Torts Claims Act and the New Jersey Contractual Liability Act, the SENDING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests assume all liability for and agree to indemnify and hold the RECEIVING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests harmless from and against any and all claims, losses, damages, injuries, and expenses, including but not limited to reasonable attorneys' fees arising from or incurred in connection with any acts, omissions, or negligence by the SENDING DISTRICT, or its agents, employees, officers, volunteers, licensees, invitees, and guests related to the performance of their obligations under this Agreement. Subject to the provisions of the New Jersey Tort Claims Act and the New Jersey Contractual Liability Act, the RECEIVING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests assume all liability for and agree to indemnify and hold the SENDING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests harmless from and against any and all claims, losses, damages, injuries, and expenses, including but not limited to reasonable attorneys' fees arising from or incurred in connection with any acts, omissions, or negligence by the RECEIVING DISTRICT, or its agents, employees, officers, volunteers, licensees, invitees, and guests related to the performance of their obligations under this Agreement. Both the SENDING DISTRICT and RECEIVING DISTRICT shall maintain liability insurance with limits as required by law.

\_\_\_\_\_  
(Print) Director of Special Services

\_\_\_\_\_  
School Business Administrator    Date  
(If required by requesting district)

\_\_\_\_\_  
(Signature) Director of Special Services

\_\_\_\_\_  
Date

RELATED SERVICES COUNSELING CONTRACT HOURLY 2026 EXTENDED SCHOOL YEAR

Please Note: This form is to be used only for counseling services that are not included as a class component.

Student: \_\_\_\_\_ D.O.B.: \_\_\_\_\_  
Sending District: \_\_\_\_\_ District Code: \_\_\_\_\_  
Receiving District: \_\_\_\_\_ District Code: \_\_\_\_\_  
Class Name: \_\_\_\_\_ Teacher: \_\_\_\_\_  
School: \_\_\_\_\_ School Code: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_

**SERVICE REQUESTED:**

   Counseling Services

| COST/HOUR     |                   |
|---------------|-------------------|
| <u>Member</u> | <u>Non-Member</u> |
| \$120         | \$170             |

Please complete the information below.

1. Counseling: (Note: ½ hour minimum and 15 minute increments only)

Individual: \_\_\_\_\_ sessions / week / month \_\_\_\_\_ minutes/session

I hereby agree to authorize payment to the Morris-Union Jointure Commission for the provision of the aforementioned service at the rate stipulated in this contract. I understand that the monthly invoice for this service will reflect the hourly rate multiplied by 4.2 weeks per month. I further understand that written notice must be given to the Morris-Union Jointure Commission for discontinuance of the above service.

In certain circumstances concerning distance to student's site, the Morris-Union Jointure Commission may charge an additional fee for travel.

Subject to the provisions of the New Jersey Torts Claims Act and the New Jersey Contractual Liability Act, the SENDING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests assume all liability for and agree to indemnify and hold the RECEIVING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests harmless



**RELATED SERVICES COUNSELING CONTRACT HOURLY 2026-2027 SCHOOL YEAR**

**Please Note: This form is to be used only for counseling services that are not included as a class component.**

Student: \_\_\_\_\_ D.O.B.: \_\_\_\_\_  
Sending District: \_\_\_\_\_ District Code: \_\_\_\_\_  
Receiving District: \_\_\_\_\_ District Code: \_\_\_\_\_  
Class Name: \_\_\_\_\_ Teacher: \_\_\_\_\_  
School: \_\_\_\_\_ School Code: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_

**SERVICE REQUESTED:**

     Counseling Services

| COST/HOUR     |                   |
|---------------|-------------------|
| <u>Member</u> | <u>Non-Member</u> |
| \$120         | \$170             |

**Please complete the information below.**

1. Counseling: (Note: ½ hour minimum and 15 minute increments only)

Individual: \_\_\_\_\_ sessions / week / month \_\_\_\_\_ minutes/session

I hereby agree to authorize payment to the Morris-Union Jointure Commission for the provision of the aforementioned service at the rate stipulated in this contract. I understand that the monthly invoice for this service will reflect the hourly rate multiplied by 4.2 weeks per month. I further understand that written notice must be given to the Morris-Union Jointure Commission for discontinuance of the above service.

In certain circumstances concerning distance to student's site, the Morris-Union Jointure Commission may charge an additional fee for travel.

Subject to the provisions of the New Jersey Torts Claims Act and the New Jersey Contractual Liability Act, the SENDING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests assume all liability for and agree to indemnify and hold the RECEIVING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests harmless

from and against any and all claims, losses, damages, injuries, and expenses, including but not limited to reasonable attorneys' fees arising from or incurred in connection with any acts, omissions, or negligence by the SENDING DISTRICT, or its agents, employees, officers, volunteers, licensees, invitees, and guests related to the performance of their obligations under this Agreement. Subject to the provisions of the New Jersey Tort Claims Act and the New Jersey Contractual Liability Act, the RECEIVING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests assume all liability for and agree to indemnify and hold the SENDING DISTRICT and its agents, employees, officers, volunteers, licensees, invitees, and guests harmless from and against any and all claims, losses, damages, injuries, and expenses, including but not limited to reasonable attorneys' fees arising from or incurred in connection with any acts, omissions, or negligence by the RECEIVING DISTRICT, or its agents, employees, officers, volunteers, licensees, invitees, and guests related to the performance of their obligations under this Agreement. Both the SENDING DISTRICT and RECEIVING DISTRICT shall maintain liability insurance with limits as required by law.

\_\_\_\_\_  
Director of Special Services                      Date

\_\_\_\_\_  
School Business Administrator                      Date  
(If required by requesting district)

\_\_\_\_\_  
Superintendent of Schools                      Date  
(If required by requesting district)

MUJC Service Contract Rates 2026-2027

| Service Name                        | Member Rate<br>2026-2027 | Non-Member<br>Rate 2026-2027 | Rate<br>Type |
|-------------------------------------|--------------------------|------------------------------|--------------|
| *ABA Home Program-Supervision       | \$230                    | \$310                        | Hourly       |
| *ABA Home Program-Teacher           | \$185                    | \$240                        | Hourly       |
| *ABA Home Program-Teacher Assistant | \$170                    | \$220                        | Hourly       |
| *ABA Home Program-Support Assistant | \$145                    | \$195                        | Hourly       |
| *Adaptive Physical Education/Hourly | \$210                    | \$275                        | Hourly       |
| *Counseling/Hourly                  | \$120                    | \$170                        | Hourly       |
| *Inservice, full day                | \$1,425                  | \$1,895                      | Flat Rate    |
| *Inservice, half day                | \$805                    | \$1,070                      | Flat Rate    |
| *Occupational Therapy/Daily         | \$905                    | \$1,290                      | Flat Rate    |
| *Occupational Therapy/Hourly w/OTR  | \$215                    | \$285                        | Hourly       |
| *Physical Therapy/Daily             | \$985                    | \$1,310                      | Flat Rate    |
| *Physical Therapy/Hourly            | \$235                    | \$315                        | Hourly       |
| *Speech/Language Therapy/Daily      | \$1,010                  | \$1,340                      | Flat Rate    |
| *Speech/Language Therapy/Hourly     | \$250                    | \$335                        | Hourly       |

**MORRIS-UNION JOINTURE COMMISSION  
TUITION RATES FOR 2026-2027**

**AUTISM PROGRAM**

|  |                     |                             |
|--|---------------------|-----------------------------|
| <b>Regular School Year (10 months)</b> | <b>\$111,262.00</b> | <b>Monthly= \$11,126.20</b> |
| <b>ESY (6-week program)</b>            | <b>\$18,544.00</b>  | <b>Flat Rate</b>            |

**MD PROGRAM**

|  |                    |                            |
|--|--------------------|----------------------------|
| <b>Regular School Year (10 months)</b> | <b>\$57,550.00</b> | <b>Monthly= \$5,755.00</b> |
| <b>ESY (6-week program)</b>            | <b>\$9,592.00</b>  | <b>Flat Rate</b>           |

**1:1 T.A. (AIDE) RATES**

|  |                    |                            |
|--|--------------------|----------------------------|
| <b>Regular School Year (full-time)</b> | <b>\$69,600.00</b> | <b>Monthly= \$6,960.00</b> |
| <b>Regular School Year (part-time)</b> | <b>\$34,800.00</b> | <b>Monthly= \$3,480.00</b> |
| <b>ESY - 2026 (full-time)</b>          | <b>\$11,600.00</b> | <b>Flat Rate</b>           |
| <b>ESY - 2026 (part-time)</b>          | <b>\$5,800.00</b>  | <b>Flat Rate</b>           |



## UNION TOWNSHIP BOARD OF EDUCATION - RIDER

This Rider is incorporated fully into the terms of the attached Agreement between **Morris-Union Jointure Commission** (“Receiving District”) and the **Union Tp. Board of Education (Sending District)**, for the **School Year 2026-2027 and Extended School Year**. To the extent that there are any inconsistencies between the terms of the Agreement and this Rider, the terms of the Rider take precedence.

### I. RESPONSIBILITIES OF PROVIDER

#### A. Qualifications of Personnel.

(i) Provider represents that it is an approved agency as required by the State of New Jersey for related services pursuant to N.J.A.C. 6A:14-5.1 and N.J.A.C. 6A:2-5.2. Proof of agency status may be required prior to execution of this Agreement.

(ii) Provider shall only provide employees who are licensed or certified as may be required by State law. Provider shall make available for inspection, upon request of the Board, verification of current licensure or certification, as applicable.

#### B. Background Check.

Provider shall provide its New Jersey Department of Education Office of Student Protection Status (NJDOE OSPS) Application Approval Employment History Report including fingerprint background check for each of its employees who provide direct services to a student during the term of this Agreement. During the term of the Agreement, Provider shall report to the Board any change in the information provided, including without limitation any arrest or conviction of any employees providing direct services to students. Failure to provide the NJDOE OSPS Application Approval Employment History Report or subsequent information about employees shall be considered a breach of Agreement.

#### C. Sexual Abuse/Child Abuse Disclosure Release Form

Provider shall comply with the Sexual Abuse/Child Abuse Disclosure requirements of P.L. 2018, c.5, N.J.S.A. 18A:6-7.7 (“PTT Law”), and hereby consents to any inquiries required by that law that may be performed by the Board.

Provider agrees to indemnify, defend and hold the Board and its respective officers, employees and agents harmless from and against any suits, actions, liabilities, claims, damages and expenses including, without limitation, costs of investigation, expert witness fees, and attorney fees for the defense of the underlying suit, arising out of or in any manner connected with Provider’s compliance with its obligations under the PTT Law, including services performed under this Agreement by Provider, or anyone directly or indirectly employed by it, for any acts or omissions for which Provider may be legally liable with respect to the PPT Law. If in any given case a court rules that Provider is not negligent and/or did not breach its statutory duty, then Provider would have no obligation to defend and indemnify the Board.

### II. FEES

The Provider shall be paid in accordance with the fee rates in the attached agreement, in an amount **Not To Exceed the amounts listed on the attached Fee Schedule.**

### **III. TERM.**

The Contract shall be for the 2026-2027 school year ending on June 30, 2027.

### **IV. PUBLIC CONTRACTING REQUIREMENTS**

A. Non-Discrimination. The Provider shall be fully responsible for the recruitment and hiring of staff necessary to perform this Agreement. The Provider shall operate in conformance with applicable provisions of all federal and state anti-discrimination statutes and directives, including the New Jersey Law Against Discrimination, N.J.S.A. 10:5-1 et seq., the mandatory language of N.J.A.C. 17:27-3.4(a) and N.J.A.C. 17:27-7.4(a) and (b), regarding Affirmative action, and the requirements of 42 U.S.C. 121.01 et seq., regarding the Americans with Disabilities Act.

The Provider certifies that it is an Equal Opportunity Employer and will not discriminate in the recruitment, selection, hiring, promotion or demotion of staff or the selection of services provided to children on the basis of or against any person because of race, creed, religion, color, national origin/nationality, ancestry, age, sex/gender (including pregnancy), marital status/civil union partnership, familial status, affectional or sexual orientation, gender identity or expression, domestic partnership status, atypical hereditary cellular or blood trait, genetic information, disability, (including perceived disability, physical, mental, and/or intellectual disabilities), or liability for service in the Armed Forces of the United States.

B. Records. Provider shall keep all records pertaining to its services under this Agreement for no less than five (5) years.

### **V. NOTICE**

**Notices to the Board shall be delivered to:**

Yolanda Koon, Business Administrator/Secretary Union Tp.  
Board of Education  
855 Lehigh Avenue  
Union, NJ 07083

**With a copy of legal notices to:**

Lester E. Taylor, Esq.  
Taylor Law Group, LLC  
430 Mountain Avenue, Suite 103  
New Providence, NJ 07974

**SIGNATURES**

**MORRIS-UNION JOINTURE COMMISSION**

**UNION TP. BOARD OF EDUCATION**

**(signed)**

\_\_\_\_\_

**(signed)**

\_\_\_\_\_

Print Name/Title

Print Name/Title

**FEE SCHEDULE -2026 – 2027**

- Physical Therapy - \$235/hour
- Occupational Therapy- \$215/hour
- Speech Therapy - \$250/hour
- Full time aides, ESY- \$11,600.00
- Full time aides 26-27 \$69,600.00
- Half time aides ESY - \$5,800.00
- Half time aides 26-27- \$34,800.00

Services will be in accordance with the student's IEPs and will be charged to Account #11-000-216-320-01-19,  
NOT TO EXCEED \$650,000.00