



SELF- DIRECTION TRANSITION PROGRAM ENROLLMENT AND BILLING AGREEMENT

Requirements for consideration and enrollment:

- Enrolled in OPWDD Self-Direction - Enrollment contingent upon verification through applicant's broker. This program is funded through the Individual Directed Goods and Services (IDGS) Transition Program line within the participant's budget.
- Participants must commit to the two year/twice weekly enrollment period for the Transition Program.
- Participants must be able to engage and attend in a small group learning environment (3:1 ratio) for up to two hours requiring minimal assistance and/or redirection.
- Participants must be able to utilize coping strategies when needed and be able to utilize the bathroom independently.
- Participants must adhere to necessary safety protocols related to Covid-19 guidance and other general safety protocols.

Parent/Guardian Acknowledgement of Responsibility for enrolment and billing:

- This program is funded through my son/daughter's OPWDD Self-Direction budget under the IDGS line for Transition Services with a monthly tuition of \$800/month, \$9,600/year.
- Program enrollment is for two years.
- Parent is responsible for submission of monthly program invoices to their FI immediately upon receipt.
- Payment is to be made directly to Recipes 4 Learning.

Name of Applicant: _____ DOB: _____

Completed by (print name): _____

I have read this agreement thoroughly and understand the terms for enrollment and submission of invoices. I authorize Recipes 4 Learning to communicate with contacts provided including brokers and fiscal intermediaries for document retrieval and review as well as further discussion as needed related to enrollment, budgets and service provision

Photo Release Authorization: I authorize Recipes 4 Learning to utilize photos and/or videos of the program participant named above related to Recipes 4 Learning standard marketing and digital community engagement.

Signature: _____ Date: _____