



EnCourage Institute Program Policies

EnCourage Institute for Teaching and Learning, Grandville location

EnCourage Institute's Learning Center at BRAINS

To insure that parents, students, and intervention specialists at EnCourage Institute are working together and to maintain good communication about services at EnCourage Institute, we have put in place the following policies for educational interventions and educational therapy programs.

- ★ EnCourage Institute programs include but are not limited to Education Interventions, Education Therapy, Movement Therapy, Reading and Math Clinics and other classes (hereafter called "Programs")
- ★ Program meetings will take place weekly as determined by the schedule in place. Typically, Programs that are not special classes meet each week and are 1 hour to 90 minutes long. Instruction will be based upon the Intervention Plan developed in consultation with the parents/guardians, Dr. Rozendal, the intervention specialist, and student (when appropriate). In some cases the hour may be divided into a percentage for student work and percentage for parent instruction (i.e., 45/15 minute split).
- ★ Class meetings will be held according to the published schedule.
- ★ Payment Policies
 - Programs and classes will be paid for in advance according to published sessions. Fall, Winter and Spring sessions are 10 weeks long and Summer sessions are 6 weeks long. Students starting in the middle a session will be charged only for the weeks remaining in the session. Cash, check, Visa/MasterCard or VIP TRIP certificates may be used for payment.
 - Checks should be made out to EnCourage Institute for Teaching and Learning. Checks returned for insufficient funds will generate a \$15 finance charge.
 - If weekly payments or an alternative payment schedule is arranged with EnCourage Institute following the payment arrangement form (attached). Payment by cash, check or VIP TRIP certificates must be made prior to the start of the individual program meeting. Please give payment to the intervention specialist before the meeting begins.
 - A credit/debit card may be provided for Program charges on the attached form. If a credit card is provided, EnCourage Institute will post a charge for the Program meetings according to the schedule designated on the credit card form.
 - Any accounts that have a balance due 30 days past the end of a session will have the account turned over to a collections agency for payment. To avoid this, please contact EnCourage Institute to make payment arrangements.
- ★ Cancellation Policies
 - If a meeting needs to be cancelled by the student/family, please notify the intervention specialist a minimum of 24 hours in advance. Every effort will be made to reschedule the session, but no guarantees can be made for availability of the specialist or therapist to reschedule the meeting. Notification can be made by email or phone.
 - If a meeting is not cancelled within the 24-hour timeframe, then payment for the meeting is required. If payment is on a weekly basis, then payment for the missed week is expected no later than the start of the following meeting.
 - If the intervention specialist cancels a meeting, it will be rescheduled as soon as possible based on the availability of the student and specialist. No charges will be incurred for meetings cancelled by the specialist that cannot be rescheduled prior to the next regularly scheduled meeting. If sessions have been pre-paid a credit will be applied toward future sessions.



★ Termination Policies

- Program sessions will continue to be scheduled in 10-week blocks unless notification of cancellation is made in writing to EnCourage Institute at least 10 days prior to the termination date.

★ Student Participation Policies

- Students are expected to participate in all activities during the intervention and/or therapy meetings. EnCourage Institute specialists will make every effort to provide engaging and meaningful activities but learning does require the attention and participation of the student.
- If in the rare event that behavior or inattention problems on the part of the student cannot be resolved on a particular week, the intervention specialist may terminate the meeting and full payment will still be required.

★ Parent/Guardian Participation Policies

- It is recommended that the parent/guardian responsible for the student remain at the EnCourage Institute site while the student is working with the specialist.
- If the parent/guardian chooses to leave the EnCourage Institute site while his/her child is working with the specialist or therapist, s/he agrees that neither EnCourage Institute nor BRAINS will be held liable for any injury or problems that may arise while the student is at the location.
- If the intervention specialist, student, or parent/guardian is uncomfortable with the parent/guardian leaving EnCourage Institute location during the intervention or therapy meetings, the parent/guardian agrees to remain on-site.

★ Home Assignment Policies

- Often home assignments will be provided to reinforce the work done in the intervention meetings. Parents and students agree to do the assigned work prior to the next intervention meeting.
- Students who are working at EnCourage Institute for reading, writing, and/or language arts are expected to read 15-30 minutes every night. Books read should be easy to read (99% of the words are known by the student).
- In addition, parents should read 15-30 minutes out loud to the student each night (regardless of the age of the student). Read aloud books should be more advanced than what the student can read independently, but not too difficult so that the student cannot understand the story even with a discussion about what is happening. A list of book ideas for nightly reading can be provided upon request.

★ School Consultation Policies

- EnCourage Institute works directly with parents and follows federal guidelines for disclosure of information to outside parties, including schools.
- We welcome the opportunity to talk with school personnel to coordinate services and consult on behalf of our students, however, we are not permitted to do so without a signed communication consent form (attached).
- We will provide a written report about diagnostic evaluations, intervention plans, and/or progress reports upon request to parents who can forward information to the schools (additional fee may be required for formal reports not included as part of the regular interventions).



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- Any communication directly with the schools will also be shared with parents in the form of a written summary or through direct conversation with parents. However, any and all information regarding EnCourage Institute students will not be shared with schools or outside personnel without written consent and notification.
- School meetings, including IEP meetings, MET meetings, and consultations will be billable to the parents at the intervention specialist's hourly consultation rate. Phone consultations with school personnel and parents are typically not billed time and will be addressed on an individual basis.

★ Communication of Concerns

- EnCourage Institute intervention specialists and therapists will maintain ongoing conversations with students and parents either before/after tutoring meetings or through phone calls and emails as needed.
- If there are any concerns on the part of the student or parents/guardians it is expected that those concerns will be shared with Dr. Rozendal and/or the intervention specialist as soon as possible.
- Similarly, EnCourage Institute specialists will communicate any concerns with the student and parents/guardians as soon as they arise to facilitate a quick resolution.

★ EnCourage Institute reserves the right to change or amend these policies at any time.

I have read these policies and agree to the Program arrangements.

(Student Signature if appropriate)

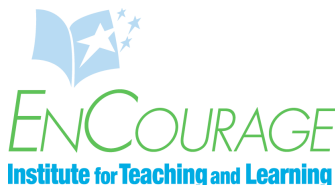
(Date)

(Parent/Guardian Signature)

(Date)

(Parent/Guardian Signature)

(Date)



Payment Agreement

Payment by Check

I agree to pay EnCourage Institute for Teaching and Learning according to the schedule below (please fill out the schedule). I also agree to pay for any missed sessions subject to the tutoring arrangements invoiced.

Signed: _____ Date: _____

Credit/Debit Card

I authorize EnCourage Institute for Teaching and Learning to charge my credit/debit card on the following dates for listed amount. (please fill out the schedule)

Credit/Debit Card Information

VISA MasterCard Discover

Card Number: _____ Exp. Date _____ security code _____
(3 digits on card back)

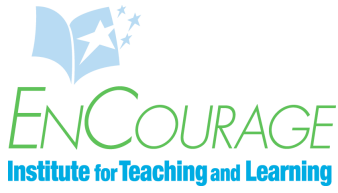
Name on Card _____

Authorizing Signature: _____

Payment Schedule:

Week	Date	Charge Amount	Balance	Notes
		<i>Starting Balance</i>	\$	
1		\$	\$	
2		\$	\$	
3		\$	\$	
4		\$	\$	
5		\$	\$	
6		\$	\$	
7		\$	\$	
8		\$	\$	
9		\$	\$	
10		\$	\$	

CONTACT INFORMATION: EnCourage Institute for Teaching and Learning
 2845 Wilson Ave. SW, Suite D
 Grandville, MI 49418
 Phone: (616) 530-2224
 Fax: (616) 825-6164



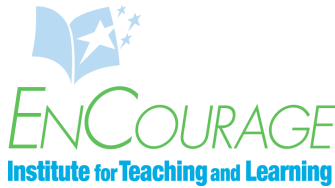
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Session Schedule for

Time:

Location:

Week	Date	Notes/Reminders
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		



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TWO WAY AUTHORIZATION TO RELEASE CONFIDENTIAL INFORMATION

Between: _____

And: EnCourage Institute for Teaching and Learning, LLC.
2845 Wilson Ave. SW, Suite D
Grandville, MI 49418
(616) 530-2224
Fax: (616) 825-6164

Client: _____
DOB: _____
SS# (if needed) _____

I, _____ (client or client’s guardian) give my permission to the above named to obtain and/or release by means of verbal, written, photocopy, or fax, certain confidential information about my medical, psychiatric, and/or educational treatment and/or records.

Information and/or Material to be released:

_____ Complete records _____ Other _____

Purpose of disclosure:

_____ Continuation of services _____ Personal Use
_____ Coordination of services _____ Other _____

I am also aware of all consequences that might occur as a result of signing this consent form or of my refusal to do so: My signature means that I have read this form and/or have had it read to me and explained in a language I can understand. All the blank spaces have been filled in except for signatures and dates.

Right to revoke or terminate - You have a right to revoke or terminate this authorization by submitting a written request to EnCourage Institute for Teaching and Learning. This can be done in person or by mailing a request to:
EnCourage Institute for Teaching and Learning
2845 Wilson Ave. SW, Suite D
Grandville, MI 49418

Expirations or termination of authorization – This authorization will expire at the end of the calendar year in which the authorization was initiated, unless you specify an earlier termination. You must submit a new authorization after the expiration date to continue the authorization. You have the right to terminate this authorization at any time. You must notify EnCourage Institute, in writing, if you decide to terminate the authorization prior to the normal expiration date.

(Please list an earlier expiration if less than one year): _____

Redisclosure – We have no control over the person(s) you have listed to receive your protected information. Therefore, your protected information disclosed under this authorization will no longer be protected by the requirements of the Privacy Rule and will no longer be the responsibility of EnCourage Institute for Teaching and Learning.

A true and exact photostatic/faxed copy of this authorization shall have the same effect as the original.

(Client signature or “X” if not a minor)

(Date Signed)

(Client’s Guardian)

(Date Signed)