

# LearnWell

**Date:** 12/4/2023

**To:** Paul Kish

**Fax Number/Email:** paul.kish@clearviewschools.org

**From:** Jillian Cartwright, jcartwright@learnwelleducation.com

**File Number:** Ref-281799

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A student from your district has been admitted to a medical facility we partner with to provide educational services. Following this cover page is a one page agreement that must be signed and returned.

At the bottom of this page is additional information you may find helpful.

If you have any questions, please contact our office and someone will gladly assist you.

We look forward to working with both your school district and students.

Sincerely,



Kathleen Egger  
VP Teaching Operations  
ph: 508-732-9101

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**PROCEDURE:** Students assigned to LearnWell receive direct instruction and continuous administrative support. Instructors are assigned within 24 hours of our company's notification of the requirement for services. For each student served, LearnWell makes its best effort to obtain the student's individual course work from his or her school, complete the assignments with the student in a classroom setting, and return the course work to the student's school system to ensure the student remains up to date with their academics. A session report for each class session with the student is completed to document the details of the session and can be provided to the district at any point in time, upon request.

**BILLING:** LearnWell submits an invoice to the school system, on a weekly or monthly basis (depending on preference), and payment is expected within 30 days of receipt of invoice.

**COMMITMENT:** *THERE IS NO REQUIRED MINIMUM COMMITMENT FROM YOUR SCHOOL SYSTEM.* LearnWell will work with one student or one hundred students. We work in conjunction with any existing instructors and only provide services to those students assigned to our program. We will accept any preexisting assignments, or handle all issues, for which schools feel our support would be beneficial to the students.



**TO: Paul Kish**  
**INSTRUCTION FOR:** [REDACTED]  
**ADMISSION DATE: 11/30/2023**  
**SERVICES TO BEGIN: 12/4/2023**  
**LOCATION: SUN Behavioral Health - Columbus Adolescent Inpatient 4N**  
**INSTRUCTION (hrs/wk): 5**  
**File Number: Ref-281799**

**Additional Notes:**

LearnWell will perform the following specific actions to support your student:

1. 5 hours of educational services per week, delivered individually or in a classroom setting, by a certified teacher who is a direct employee of LearnWell
2. Ongoing communication via phone, fax, or e mail, with the applicable school officer to receive, complete and return the student's school work.
3. A Session Report that documents details of each teaching session (i.e. length of session, goals, student's attitude, etc.) will accompany all invoices, upon request.

**Absence Policy:** Our policy is to ensure all students that are cleared and capable of being seen in class sessions, are seen with 95% accountability.

**Your signature below authorizes instruction** to the student named above at the rate of \$48.75 per hour of instruction. Each hour of instruction delivered in any setting requires administrative and preparation time, and LearnWell bills an additional 33% for those services (i.e., each 3 hours of teaching generates one (1) hour of admin/prep time cost).

**APPROVAL SIGNATURE:** \_\_\_\_\_

**PRINT NAME:** \_\_\_\_\_

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**AFTER SIGNING, PLEASE RETURN THIS PAGE VIA FAX (508-732-9998) or EMAIL (intel@learnwelleducation.com).**