**The Written Agreement should be in plain language and made accessible for the person directing and receiving the services.**

**The Written Agreement should be written in the language that the person and their team primarily use to communicate.**

This agreement between J. Doe and Provider Alpha involves providing Personal Support Services, from July 1, 2024 through June 30, 2024. The service will be provided Monday through Friday from 6:30am - 9:30am.

**Scope of Agreement**

Provider Alpha agrees to provide Personal Support Services by supporting J. Doe in the following activities:

* Showering and getting dressed
* Making breakfast
* Reviewing weekly calendar

**Goals**

Provider Alpha agrees to support J. Doe in the following goals:

* Planning activities that matter to them
* Cooking a breakfast unassisted

**Billing Frequency and Rate**

Provider Alpha agrees to bill the participant on the 5th of each month. Provider Alpha will bill J. Doe $35.00 per hour, up to 15 hours per week as J. Doe receives the services.

Provider Alpha will not bill J.Doe for services not directly provided.

**Agreement Termination Guidelines**

The agreement can be ended at any time by either party with 30 days’ notice.

**To ensure accessibility, all persons present at the signing of the written agreement should witness it.**

**Witnesses**

J. Doe

Participant Self- Directing

Kerri Flynn

Provider Alpha Representative

Avery Hunter

Provider Alpha Representative

Finley Parker

Friend of Participant

Elizabeth Smith

Coordinator of Community Services