



**Dear Independent Related Service Provider Individual or Agency:**

The Central Based Support Team (CBST) is responsible for the maintenance of the New York City Department of Education's - Municipality List of Independent Providers of Related Services for Preschool Students with Disabilities. This list is shared with and used by Committees on Preschool Special Education (CPSEs.)

The information included in this set of materials is intended for agency or individual related service providers wishing to provide independent related services to New York City preschool students with disabilities.

Independent related service providers wishing to have their names included on the Municipality List must:

- Complete the appropriate application form (enclosed).
- Complete the Fingerprint Referral and Personal History form. This form is available at the following site:

<http://schools.nyc.gov/NR/ronlyres/EE6DD35B-B76A-4846-ADE8-8D8514315BDC/0/Form551FingerprintReferral.pdf>

- Submit the application form, copies of applicable licenses and/or certifications and proof of DOE fingerprinting to:

**The New York City Department of Education  
Central Based Support Team  
1780 Ocean Avenue, 4<sup>th</sup> Floor  
Brooklyn, NY 11230  
Attention: Helen Kennedy  
Phone (718) 758-7645 Fax (718) 758-7640  
E-mail [hkenned@schools.nyc.gov](mailto:hkenned@schools.nyc.gov)**

Once CBST has determined eligibility of a service provider(s) it will notify the agency or individual provider. Independent related service providers and agencies must contact the CPSEs to ensure that CPSE administrators are aware of the provider's desire to serve students requiring related services in that geographic area. CPSEs will then contact providers regarding individual students on a rotation basis. Only providers approved to appear on the Municipality List will be eligible for selection by a CPSE. CPSE may not accept an Agreement from an individual who has not received prior approval from the CBST. The Municipality List is available at the following site.

<http://schools.nyc.gov/Academics/SpecialEducation/ParentResources/Related+Services+Information.htm>.

**After being contacted by the CPSE a 2011-2012 Agreement must be signed and returned to the appropriate CPSE for each student receiving services during the period of time from July 1, 2011 through June 30, 2012. The name of the related service provider that appears on the Agreement must be the same as the person who meets with the student.**

To receive payment for services providers must:

- Register and activate an account on the **Vendor Portal**. RS invoice user guide is on login page:  
<https://vendorportal.nycenet.edu/vendorportal/login.aspx> (new providers only).
- Complete and fax a W-9 form with cover letter to NPSP: Attention: Tammy Robinson (718) 935-3801  
<http://schools.nyc.gov/Offices/DCP/Vendor/Default.htm> (new providers only).
- Complete and retain original two-sided preschool related service invoice (**all providers**).

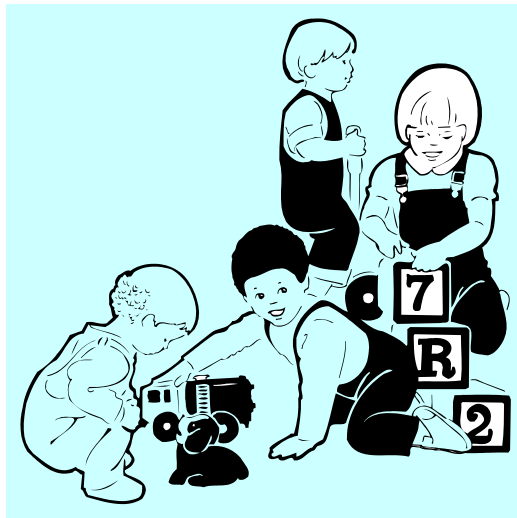
<http://schools.nyc.gov/NR/ronlyres/E6F2C8A7-1FF9-446B-87B8-6EB1B917B6D0/0/BILLINGFORM.pdf>

If you have any questions regarding the Municipality List, please contact Helen Kennedy at (718) 758-7645. If you have any questions regarding payments, please contact Pauline Bandolik at (718) 935-2161.

Sincerely,

Angela G. Carr, Ph.D., Director  
Central Based Support Team

Application Form  
For  
Independent Related  
Service Providers  
(Individuals)  
2011-2012



**INDEPENDENT RELATED SERVICE PROVIDER APPLICATION FORM**  
**- INDIVIDUAL PROVIDER -**

\_\_\_\_\_ of \_\_\_\_\_

TYPE OF RELATED SERVICE \_\_\_\_\_

This form must be completed by an independent related service provider whose name is to appear on the 2011-2012 Municipality List of Independent Providers of Related Services for Preschool Students with Disabilities. IT IS NOT TO BE USED BY PROVIDERS WORKING FOR AN AGENCY.

NAME OF RELATED SERVICE PROVIDER: \_\_\_\_\_

District(s) in which you are able to provide related services (check as many as appropriate)

SOCIAL SECURITY: \_\_\_\_\_

MANHATTAN 1  2  3  4  5  6

ADDRESS: \_\_\_\_\_

BRONX 7  8  9  10  11  12

\_\_\_\_\_ ZIP CODE \_\_\_\_\_

BROOKLYN 13  14  15  16  17  18

19  20  21  22  23  32

BIRTHDAY: MONTH \_\_\_\_\_ DATE \_\_\_\_\_ DO NOT PROVIDE YEAR

QUEENS 24  25  26  27  28  29  30

STATEN ISLAND 31

TELEPHONE NUMBER: ( \_\_\_\_\_ ) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

My capacity to serve preschool students is as follows:

Days available: \_\_\_\_\_ Hours from: \_\_\_\_\_ to: \_\_\_\_\_ # of students \_\_\_\_\_

=====  
 Possess a New York State Education Department bilingual extension? (Circle one) YES NO  
 Evidence of passing Language Proficiency Assessment (LPA)? (Circle one) YES NO

If yes, please specify the language(s) for which you have a bilingual extension and/or Language Proficiency Assessment (LPA).

\_\_\_\_\_  
 \_\_\_\_\_

**NOTE:** A copy of applicable licenses/certifications including bilingual proficiency must be affixed to this form. Providers are required to promptly update this licensure and/or certification as it is renewed, changed, suspended or revoked for any reason, and/or where revised expiration dates are issued by New York State. The Department of Education (DOE) also requires evidence of fingerprinting. Please attach the receipt for proof of fingerprinting by the DOE or provide us with the date of fingerprinting if the receipt cannot be found. DOE employee's names may not be put on the list. Mail Form to: NYC Department of Education, Central Based Support Team at 1780 Ocean Avenue, Brooklyn NY 11230 Attention: Helen Kennedy or by fax (718) 758-7640.

Speech therapists must possess both an SLP certificate and TSHH license. The DOE does not accept "temporary" TSHH licenses.

----- For Office Use Only -----

Reviewed by: \_\_\_\_\_

# Application Form For Independent Related Service Providers

(Agency)

2011-2012



# INDEPENDENT RELATED SERVICE PROVIDER APPLICATION FORM

\_\_\_\_\_ of \_\_\_\_\_

## AGENCY

RELATED SERVICE \_\_\_\_\_  
 (Prepare separate documents for each related service)

This form must to be completed for all independent related service providers whose names are to appear under your agency's name on the 2011-2012 Municipality List of Independent Providers of Related Services for Preschool Students with Disabilities. (Please type or print all information)

NAME OF AGENCY: \_\_\_\_\_

NAME OF CONTACT: \_\_\_\_\_

TAX IDENTIFICATION NUMBER: : \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE NUMBER: (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

The agency's capacity to serve preschool students is as follows:

Days available: \_\_\_\_\_ Hours from: \_\_\_\_\_ to: \_\_\_\_\_ # of students \_\_\_\_\_

District(s) in which this agency is able to provide related services (check as many as appropriate)

- MANHATTAN 1  2  3  4  5  6   
 BRONX 7  8  9  10  11  12   
 BROOKLYN 13  14  15  16  17  18   
 19  20  21  22  23  32   
 QUEENS 24  25  26  27  28  29  30   
 STATEN ISLAND 31

Therapist/Clinician Name(s) & E-mail Address <small>(complete additional pages as necessary)</small>	Social Security Number	Zip Code	Birthday <small>Do not Provide Year</small>		Does the Therapist/clinician have a N.Y. State Education Department issued bilingual extension and/or Language Proficiency Assessment (LPA)? <small>YES/NO</small>	If yes, please specify the language(s) for which you have a bilingual extension and/or Language Proficiency Assessment (LPA).	For Speech Service Providers Please check Appropriate Box(es)	
			<small>Month</small>	<small>Date</small>			TSHH	SLP
Name: _____ E-mail: _____							<input type="checkbox"/>	<input type="checkbox"/>
Name: _____ E-mail: _____							<input type="checkbox"/>	<input type="checkbox"/>
Name: _____ E-mail: _____							<input type="checkbox"/>	<input type="checkbox"/>

**NOTE:** A copy of applicable licenses/certifications including bilingual proficiency must be affixed to this form. Providers are required to promptly update this licensure and/or certification as it is renewed, changed, suspended or revoked for any reason, and/or where revised expiration dates are issued by New York State. The Department of Education (DOE) also requires evidence of fingerprinting. Please attach the receipt for proof of fingerprinting by the DOE or provide us with the date of fingerprinting if the receipt cannot be found. DOE employee's names may not be put on the list.

Mail Form to: NYC Department of Education, Central Based Support Team at 1780 Ocean Avenue, Brooklyn, NY 11230 Attention: Helen Kennedy or by fax (718) 758-7640.

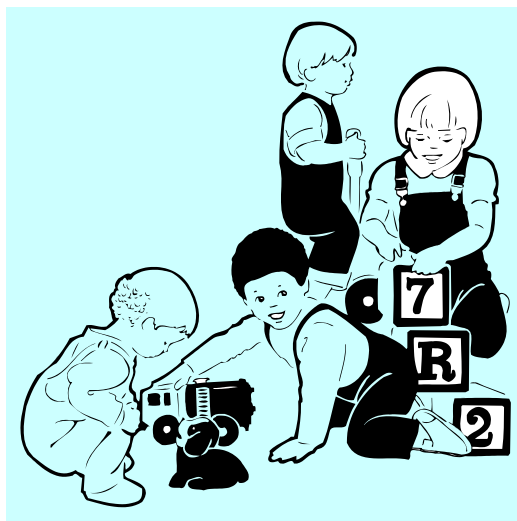
----- For Office Use Only -----

Reviewed by: \_\_\_\_\_



≈2011-2012≈

**INDEPENDENT RELATED SERVICE PROVIDER AGREEMENT  
INDIVIDUAL OR AGENCY  
FOR  
THE PROVISION OF RELATED SERVICES  
TO  
PRESCHOOL STUDENTS**





**2011-2012 Independent Related Service Provider Individual or Agency Agreement  
for the Provision of Related Service to Preschool Students**

**All Information Needs to be Completed by either Individual or Agency Independent Related Service Provider:**

Individual

Agency

Student's Name: _____		DOB: ___/___/___		NYC ID#: _____	
Related Service Recommended: _____			Language of Instruction: _____		
No. of Sessions Per Week: _____		Length of Session: _____		CSE _____ District # _____	
<input type="checkbox"/> Individual		<input type="checkbox"/> Group _____		<input type="checkbox"/> Coordination of related services	

Parent/Guardian's Name: _____		Work Telephone #: (____) _____	
		Home Telephone #: (____) _____	
The related service will <u>initially</u> be provided at (please check one):			
<input type="checkbox"/> School		<input type="checkbox"/> Provider's Place of Business	
<input type="checkbox"/> Home		<input type="checkbox"/> Other (Specify): _____	
Address where service will be provided: _____			Zip Code _____

Independent Individual Provider's Name: _____	
Address: _____ Zip Code: _____	
Telephone No: (____) _____	E-mail: _____
Professional Title//Discipline of Provider: _____	Provider's SS No.: _____
Rate (see attached schedule): _____	
-----	
Agency's Name: _____ Agency Tax ID No. _____	
Address: _____ Zip Code: _____	
Telephone No: (____) _____	E-mail: _____
Actual Individual Provider's Name: _____	Provider's SS No.: _____
Professional Title//Discipline of Provider: _____ Rate (see attached schedule): _____	

By providing the related service to the above named student, the independent individual/agency provider agrees to:

- Serve the student in accordance with the recommendation prescribed on the Individualized Education Program (i.e. language, frequency, duration and group size).
- Schedule and provide services Monday-Friday. In the event of a scheduling conflict or to make-up a missed session, service may be provided (with parental consent) on a weekend. In rare circumstances service may be provided (with parental consent) on a school holiday except for a State or Federal holiday.
- Schedule the services at times when no other special education services are provided.
- Maintain schedules indicating to whom, when and where services are provided and submit the schedules upon request by DOE.
- Complete "first attend" information on the Authorization to Receive Services letter and immediately forward it to the appropriate CPSE.
- Submit bills for services provided directly to the Department of Education's Bureau of Nonpublic School Payables using only the official two sided form.
- Comply with the Department's security clearance procedures (including that all related service providers are finger printed by the DOE) before providing services to any student.
- Make no requests to the parent/guardian for payments for services provided.
- Maintain weekly student specific progress notes. Related service student progress reports, including goals and short-term objectives, must be submitted to the appropriate CPSE thirty (30) days prior to the Annual or Requested review, or by February 1, 2012, if the student is in the last year of preschool eligibility.

2011-2012 Independent Related Service Provider Individual or Agency Agreement for the Provision of Related Service to Preschool Students

- Participate in Individualized Education Program conferences and parent/guardian meetings when requested at no additional cost to the Department of Education of the City of New York.
- Participate in Department of Education (DOE) citywide conferences/workshops when requested, at no additional cost to the Department of Education of the City of New York.
- Coordinate services, if specified and written on the IEP, for students receiving more than one related service.

**NOTE:** Billable for one half hour per month.

- Maintain related service attendance on the two sided Monthly Billing Form for Preschool Related Service Providers. Forms must be signed after services are provided.
- Prepare or participate in the preparation of reports, documents and/or in the collection of data or information requested by the Department of Education of the City of New York or other agencies, at no additional cost to the Department of Education of the City of New York, in order that the Department of Education of the City of New York receive Medicaid reimbursement for the costs associated with the provision of related services.
- Complete and submit to CBST the "Certification of Under the Direction and Accessibility" form as appropriate.
- Carry his/her own professional malpractice/liability insurance.

Notification of Changes:

- If the related service provider is notified or becomes aware of a change in the student's name, address, etc., or if the provider is made aware of the parent/guardian's intent to withdraw the student from the CPSE recommended service, it is **extremely important** to notify the CPSE immediately. The provider must complete the Student Information (T-2P) Notice and submit it to the student's current CPSE.
- If an approved student (who has been referred to a related service provider and who has not yet established a first attend date) is unavailable to receive services within five (5) days from the student's first eligible date, the provider shall contact the parent to ascertain the reason for the delay. If the provider is unable to ascertain the reason for the absence the provider must promptly complete and forward the T-2P Notice to the CPSE.
- If, after receiving his/her related services, the student is absent five (5) consecutive sessions the provider must complete and submit a T-2P form to the CPSE.
- Notify the CPSE if the location where the related services will be provided changes from the initial location. A new IEP conference is not required, however, the provider may change the location only with the agreement of the parent/guardian. The provider must notify the CPSE of the new location within five (5) school days of the change.
- Immediately notify the parent and CPSE if the service provider changes. A new IEP conference will not be required; however, the new service provider must sign the Agreement. The new provider's name must appear on the Municipality list. The Agreement must be forwarded to CPSE within five (5) school days of the change.
- Immediately notify the parent and CPSE if you cannot provide the related services.

Conflict of Interest Issues:

- Any individual currently employed by the Department of Education of the City of New York may not provide related services as an independent provider under the independent provider Agreement.
- Any individual who leaves the employment of the Department of Education of the City of New York or any other New York City Agency may not provide service under this Agreement for a minimum of one year in accordance with the provisions of the New York City Charter, (i.e. Section 2604[h], and Chancellor's Regulation C-110) unless a waiver is obtained.
- Any agency currently under contract to the Department of Education of the City of New York may not provide related services as an independent provider in the Committed of Special Education for which they have been awarded a contract.

Other Considerations:

- The fiscal year means the period commencing on the 1<sup>st</sup> day of July and ending the 30<sup>th</sup> day of June the following year. The summer session is any six (6) consecutive weeks between July 1 and August 31. The ten (10) month school year is any forty (40) weeks between September 7 and June 30<sup>th</sup>. Providers may implement the Department of Education calendar or develop an alternative calendar. Providers must expressly indicate to parents when services will be provided if services will be offered when the Department's schools are closed.
- Make-up sessions during the summer session may be conducted during July and August. Make-up sessions during the ten-month school year may be conducted between September and June. No make-up sessions may be offered during a week which would cause the student to receive a greater number of sessions than recommended as appropriate, on the student's IEP.
- Unless a waiver has been obtained, the clinician who conducted the student's evaluation may not be selected from the Municipality List to provide the related service to the student.
- Upon request by the Chancellor or his/her designee, all records relating to the student's receipt of services in the related service provider's possession (including financial records, progress notes, etc.) must be provided to the Department of Education.

**2011-2012 Independent Related Service Provider Individual or Agency Agreement for the Provision of Related Service to Preschool Students**

**Termination:** The Chancellor or his/her designee, in his sole discretion, reserves the right to terminate this Agreement upon fifteen (15) calendar days written notice to the provider except: The Agreement will be terminated if it is determined that signatures of parents, principals, or designees have been requested prior to the provision of services

- Where the health, safety or welfare of a student(s) is believed to be endangered, in which case twenty-four (24) hours notice, oral or written, shall suffice.
- Where a related service provider takes an extended leave of absence, in which case forty-eight (48) hours notice, oral or written, shall suffice.

**Indemnification:** The Contractor shall protect, indemnify and hold harmless the Department of Education from any and all claims, suits, actions, costs and damages to which the Department may be subjected by reason of injury to person or property, or wrongful death, as may result of any act, omission, carelessness, malpractice or incompetence of the Contractor, or anyone employed or engaged by the Contractor, in connection with the performance of this Agreement.

The Contractor affirms and declares that said Contractor is not in arrears to the City of New York upon any debt, contract or taxes and is not a defaulter as a surety or otherwise, upon any obligation to the City of New York, and has not been declared not responsible, or disqualified, by any agency of the City of New York, nor is there any proceeding pending relating to the responsibility or qualification of the Contractor to receive public contracts except as stated in the affirmation pertaining to the foregoing which has been furnished to the Department.

**Important:** You will not be eligible to receive payments as an individual independent related service provider without receiving approval from the NYC Department of Education. If approved and your annual billing exceeds \$100,000 you will be required to enter a comprehensive agreement with the Department of Education.

The signature below indicates approval and acceptance of this Agreement by the related service provider.

\_\_\_\_\_  
Signature of Independent (Individual)  
Related Service Provider

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

-----  
\_\_\_\_\_  
Signature of Agency Representative

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Service Provider

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

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**DO NOT WRITE BELOW THIS LINE - FOR NYC PUBLIC SCHOOLS USE ONLY**

\_\_\_\_\_  
Date Agreement Received  
by Department of Education  
Preschool Administrator

\_\_\_\_\_  
Department of Education Preschool  
Administrator's Signature

\_\_\_\_\_  
Date Issued to  
Independent Provider/  
Agency Provider

**CERTIFICATION  
OF  
UNDER THE DIRECTION AND ACCESSIBILITY**

I, \_\_\_\_\_, CCC-SLP, Licensed Speech-Language

Pathologist with current license number \_\_\_\_\_  
certify that I am providing "Under the Direction" (attached) services to the  
following Certified Teachers of the Speech and Hearing Handicapped (Therapist):

<b>Name of Therapist</b>	

**I am providing accessibility to the Teachers of the Speech and Hearing Handicapped in the following manner:**

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\_\_\_\_\_  
Signature of licensed Speech/Language Pathologist

\_\_\_\_\_  
Date

## 2011-2012 Rate Schedule for Independent Providers of

### **Related Services for New York City Preschool Students**

The rate schedule below represents the allowable rate for independent providers of Related Services. For students who are Medicaid-eligible, institutional providers should bill Medicaid directly. The rates charged by independent providers must be no higher than the lowest rate normally charged by you. Rates should be prorated as necessary. Services provided must comply with the frequency, duration and group size specified on the student's Individualized Education Program.

Related Service	Maximum Rate	Session
<b>Counseling (by a Psychologist)</b>	<b>\$ 45.00</b>	<b>30 minutes</b>
<b>Counseling (by a Social Worker)</b>	<b>\$ 40.00</b>	<b>30 minutes</b>
<b>Health (by a Registered Nurse)</b>	<b>\$ 45.00</b>	<b>30 minutes</b>
<b>(by a Health Aide)</b>	<b>\$ 20.00</b>	<b>60 minutes</b>
<b>Hearing Education Services</b>	<b>\$ 45.00</b>	<b>30 minutes</b>
<b>Sign Language Interpreter</b>	<b>\$ 30.00</b>	<b>30 minutes</b>
<b>Occupational Therapy</b>	<b>\$ 45.00</b>	<b>30 minutes</b>
<b>Physical Therapy</b>	<b>\$ 45.00</b>	<b>30 minutes</b>
<b>Speech Therapy</b>	<b>\$ 45.00</b>	<b>30 minutes</b>
<b>Vision Education Services</b>	<b>\$ 45.00</b>	<b>30 minutes</b>
<b>Orientation/Mobility Specialist</b>	<b>\$ 45.00</b>	<b>30 minutes</b>

**NOTE:** Coordination of services is reimbursed for one half-hour session per month, as per the above rate schedule.

Related services that are provided in group sessions will be paid at prorated amounts, e.g. group of 2 students =\$22.50 per half-hour session per student.

### **Independent Speech Invoicing**

The rate for independent speech providers will increase as the group size increases. In addition, the base rate for independent speech services provided in a language other than English has been increased by 20%. Accordingly, these services will be paid according to the following schedule:

Group Size	(1)	(2)	(3)	(4)	(5)
<b>Premium</b>	1.00 X	1.25 X	1.50 X	1.75 X	2.00 X
<b>Speech (English)*</b>	\$ 45.00	\$56.25	\$67.50	\$78.75	\$90.00
<b>Speech (Other)*</b>	\$ 54.00	\$67.50	\$81.00	\$94.50	\$108.00

\* Rates are per half-hour

Please note that these are session rates, not student rates. Therefore, one English half-hour session with a group of 2 two children will result in each child being invoiced for \$28.13, one English half-hour session with a group of 3 children will result in each child being invoiced for \$22.50, etc.

## Related Service Student Progress Report

Student's Name \_\_\_\_\_ NYC ID # \_\_\_\_\_

Related Service \_\_\_\_\_ Frequency \_\_\_\_\_ Duration \_\_\_\_\_ Group Size \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Home District \_\_\_\_\_ Language \_\_\_\_\_

Provider's Name \_\_\_\_\_

Name of Agency \_\_\_\_\_ Date Service Commenced \_\_\_\_/\_\_\_\_/\_\_\_\_  
(if applicable)

**1. Present Level of Functioning:**

**2. Annual Goals:**

**3. Short-Term Objectives:**

**4. Progress in Meeting Short-Term Goals Evaluation Methods and Criteria:**

Signature of Provider: \_\_\_\_\_

Date: \_\_\_\_\_



## 2011-2012 SCHOOL YEAR CALENDAR

January 24, 2011

The School Year Calendar mandates that school sessions begin for all students on Wednesday, September 7, 2011 and includes a Midwinter Recess (Monday, February 20 through Friday, February 24, 2012). It reflects that on Tuesday, November 8, 2011, and Thursday, June 7, 2012, students in all five boroughs will not be in attendance, but schools in all five boroughs will be scheduled for a Chancellor's Conference Day for staff development related to the Regents High Learning Standards and Assessments. The calendar must be adhered to without exception, unless notifications of subsequent changes are received pursuant to collective bargaining agreements or for other reasons, provided these other reasons are not inconsistent with collective bargaining or legal obligations.

### 2011

August	29,	Monday	The following staff report: Assistant Principals and school-based intermediate supervisors not designated to work an increased work year.
September	5,	Monday	Labor Day ( <b>schools closed</b> )
September	6,	Tuesday	Classroom Teachers, Bilingual Teachers in School and Community Relations, Guidance Counselors, Attendance Teachers, Nurses, Therapists, Laboratory Specialists and Technicians, Educational Paraprofessionals (except for School Secretaries, Psychologists and Social Workers) report. School Secretaries, Psychologists and Social Workers report for a regular work day. Employees in titles not listed should consult the applicable collective bargaining agreement. For all UFT-represented employees who, pursuant to the June 22, 2009 agreement, report to school on the Tuesday following Labor Day, that Tuesday shall be utilized first and foremost for preparation of the classroom and for the arrival of students. If time permits, the remainder of the day may be utilized for professional development. Students will not be in attendance.
September	7,	Wednesday	<b>SCHOOL SESSIONS BEGIN FOR ALL STUDENTS</b> Early dismissal for non-District 75 Kindergarten Students only Partial school time for Prekindergarten public school students.
September	8,	Thursday	Early dismissal for non-District 75 Kindergarten Students only Partial school time for Prekindergarten public school students.
September	9,	Friday	First Full day for non-District 75 Kindergarten public school students. Partial school time for Prekindergarten public school students.
September	12,	Monday	First Full day for all Prekindergarten public school students.
September	29, 30,	Thursday and Friday	Rosh Hashanah ( <b>schools closed</b> )
October	6,	Thursday	Prekindergarten Non-Attendance Day
October	10,	Monday	Columbus Day Observed ( <b>schools closed</b> )
November	8,	Tuesday	Election Day Chancellor's Conference Day for staff development related to the Regents High Learning Standards and Assessments. <b>Students will not be in attendance.</b>
November	11,	Friday	Veterans Day ( <b>schools closed</b> )
November November	24, 25,	Thursday and Friday	Thanksgiving Recess ( <b>schools closed</b> )
December January	26, 2,	Monday through and including Monday	Winter Recess (including Christmas and New Year's Day) ( <b>schools closed - students return to school on Tuesday, January 3, 2012</b> ).

## 2012

January	16,	Monday	Dr. Martin Luther King, Jr. Day <b>(schools closed)</b>
January	27,	Friday	Prekindergarten Non-Attendance Day
January	30,	Monday	Fall Term ends for high school students. <b>No high</b> school students will be in attendance. Chancellor's Conference Day for staff development in <b>all high</b> Schools. All other students will be in attendance. (See section 7 below for details on high school student attendance on January 30.)
January	31,	Tuesday	Spring Term begins for <b>high</b> school students.
February	20, 24,	Monday through Friday	Midwinter Recess (including Washington's Birthday) <b>(schools closed)</b>
March	23,	Friday	Prekindergarten Non-Attendance Day
April April	6, 13,	Friday through Friday	Spring Recess (including Good Friday, Easter and Passover) <b>(schools closed-Students return to school on Monday, April 16).</b>
May	28,	Monday	Memorial Day Observed <b>(schools closed)</b>
June	7,	Thursday	Chancellor's Conference Day for staff development related to the Regents High Learning Standards and Assessments. School staff report to work if required by their collective bargaining agreement. <b>Students in all five boroughs will not be in attendance.</b>
June	22,	Friday	In non-District 75 high schools having to administer Regents Exams from June 13 through June 21, students in high school administering Regents exams will not be in attendance on Regents Rating Day, Friday, June 22.
June	27,	Wednesday	<b>LAST DAY FOR ALL STUDENTS (all students report)</b> An early dismissal of students is to be scheduled on Wednesday, June 27 under the guidelines outlined in Section 13 below. Last day for all Classroom Teachers, Bilingual Teachers in School and Community Relations, Attendance Teachers, Nurses, Therapists, Laboratory Specialists and Technicians, and last day for Paraprofessionals.
June June	28, 29,	Thursday and Friday	All other staff report <b>except</b> Classroom Teachers, Bilingual Teachers in School and Community Relations, Attendance Teachers, Nurses, Therapists, Laboratory Specialists and Technicians, and Paraprofessionals.

The school year calendar incorporates the following understandings:

1. That two Chancellor's Conference Days are to be used for staff development related to the Regents High Learning Standards and Assessments (November 8 and June 7 in elementary, middle schools high schools);
2. That this calendar does not preclude subsequent changes that may be made pursuant to collective bargaining agreements or for other reasons, but in no case can this calendar or subsequent changes result in a loss of state aid;
3. That all requests for shortened sessions resulting in early dismissals of students and any other changes in this calendar must be submitted for review and approval. Subsequent to receiving approval, 4 weeks prior notification to parents must be provided;
4. That the Chancellor shall use the power vested in him or her by law when, in violation of this citywide school year calendar, a school is closed or shortened sessions (defined in section 9 below) are scheduled without prior authorization.

The following should be also be noted:

5. The School Year Calendar for 2011-2012 meets the State Education Department requirement of a minimum of 180 state aidable days in all schools in the City School District.

6. All schools will be open citywide on Election Day, Tuesday, November 8, 2011 and on Thursday, June 7, 2012 for a for a Chancellor's Conference Day for staff development related to the Regents High Learning Standards and Assessments. On both days, students in all five boroughs will not be in attendance. Prekindergarten teachers will participate in activities planned by the Prekindergarten Borough Office.
7. Monday, January 30, 2012 will be scheduled by all high schools for professional development. No high school students will be in attendance, with the exception of high school level students in District 75 (these students will be in attendance on January 30). The high school spring term begins on Tuesday, January 31 with a full day of instruction.
8. All schools will be open on Friday, February 10 and Monday, February 13, 2012 and students will be in attendance.
9. As a result of professional / Chancellor Conference Days, shortened sessions for various purposes, and Regents Days, the total number of instructional days (days when students report to school) may be different from the number of state aidable days. A shortened session is any day when school is in session for Prekindergarten for less than 2.5 hours of instruction, exclusive of lunch, for kindergarten through grade 6 students for less than 5 hours of instruction, exclusive of lunch and of the extra session of 37.5 minutes for targeted students, or any day when school is in session for grade 7 and above students for less than 5.5 hours of instruction, exclusive of lunch and of the extra session of 37.5 minutes for targeted students.
10. Calculations of aidable days incorporate Chancellor Conference/Regents Examination Days. Under Commissioner's Regulations, Chancellor Conference Days may include general staff orientation, curriculum development, in-service education, or Parent-Teacher Conferences. They may not include routine administrative matters such as grading examinations or pupil assignments, recordkeeping, or lesson planning.
11. In part, the school calendar takes into account the following citywide centrally-scheduled shortened sessions: two Parent-Teacher Conference shortened sessions (one in the Fall Term and one in the Spring Term), and other citywide shortened sessions. Separate notifications will be forthcoming regarding all of these citywide centrally-scheduled shortened sessions. An early dismissal of students is to be scheduled on the last day of school, subject to the guidelines outlined in section 13 below.
12. In non-District 75 high schools having administered the Regents examinations from June 13 through June 21, high school students will not be in attendance on Regents Rating Day, Friday, June 22.
13. As concerns the early dismissal of students on the last day of school (Wednesday, June 27, 2012), the day should be recorded as a regular day of instruction for purposes of the Period Attendance Report, and schools must adhere to the following guidelines: students are required to attend school, pupil attendance must be taken, recorded and reported as part of the average daily attendance, and students are to receive instruction and/or guidance and assistance as needed. Schools should provide at least 4 weeks prior notice to parents and to the Office of Pupil Transportation regarding the specific time they have set for the early dismissal at their site.
14. To avoid the risk of a reduction in State Aid, and to limit impacts on bus scheduling for students, schools will not be closed or shortened sessions (defined in section 9 above) will not be scheduled without prior authorization. Prior to requesting a shortened session, on a timely basis, the following should be considered: in weeks when a single scheduled shortened session for Kindergarten through grade 6 is requested, the school must still be in session for 25 hours of instruction, exclusive of lunch and of the extra session of 37.5 minutes for targeted students. When a shortened session is scheduled during a 4 day week (for instance, when the week includes a holiday), the school must still be in session for 20 hours of instruction over that week, exclusive of lunch and of the extra session of 37.5 minutes for targeted students. Further clarification and information on exceptions are available upon request.
15. In a week when, exclusive of lunch and of the extra session of 37.5 minutes for targeted students, 25 hours of instruction are scheduled for kindergarten through grade 6 students, or 20 hours in a 4 day week, and an approved shortened session is scheduled, schools may designate that shortened session as a regular day of instruction for purposes of the Period Attendance Report. For students in grades 7 and above, see section 16 below.
16. As concerns Grades 7 and above, in weeks when a single scheduled shortened session is requested, the school must still be in session for the minimum weekly instructional time requirement of 27.5 hours of instruction, exclusive of lunch and of the extra session of 37.5 minutes for targeted students. When a shortened session is scheduled during a 4 day week (for instance, when the week includes a holiday), the school must still be in session for 22 hours of instruction over that week, exclusive of lunch and of the extra session of 37.5 minutes for targeted students.

17. **For Non-District 75 Kindergarten**, there are 185 aidable days (184 instructional days).
18. **For District 75 Kindergarten through Grade 6 Level and All Grades 1 through 6**, there are 187 aidable days (184 instructional days).
19. **For Grades 7 and 8 Citywide and Grade 9 in Middle Schools (including District 75)**, there are 186 aidable days (184 instructional days).
20. **For High School Level Grades 9 through 12**, there are 187 aidable days in all boroughs, 182 of which are instructional (in District 75, there are 187 aidable days, 184 of which are instructional days).
21. Staff development activities must meet needs that are mandated or of high priority, including implementation of the new comprehensive, system-wide instructional approach to literacy and mathematics under the Children First initiative, school violence prevention and intervention, the implementation of the Continuum for Students with Disabilities, performance standards, science education, assessments, etc., as they relate to general, special and bilingual education. There must be an appropriate focus on the Regents High Learning Standards and Assessments as indicated in section 1.
22. On Tuesday, November 8, 2011 (Election Day), and on Thursday, June 7, 2012 (Anniversary Day), a Chancellor's Conference Day for staff development related to the Regents High Learning Standards and Assessments is scheduled in all five boroughs. Students IN ALL FIVE BOROUGHS will NOT be in attendance on either day. (Under Section 2586 of the Education Law, Anniversary Day is the first Thursday in June, or the second Thursday in June when the first Thursday falls within the same week as Memorial Day.)
23. Concerning the partial school time for Prekindergarten students (staggered entrance), it is recommended that an Orientation Session takes place on Wednesday, September 7, 2011 for the parents of all Prekindergarten students. This session is to help families with the transition process. Parents or caregivers should be notified so that they can make appropriate plans regarding the schedule, pick up and drop off. For assistance with staggered entrance, orientation or phase-in planning, please contact the Office of Early Childhood Education at 212.374.0351 or [earlychildhood@schools.nyc.gov](mailto:earlychildhood@schools.nyc.gov). Information is also available at the Early Childhood Website.
24. Non-attendance days for Prekindergarten students are designed for staff to participate in professional development activities that meet the Chancellor's mandate, (See section 21 above). In addition, the Office of Early Childhood Education provides professional development related to the successful implementation of a high quality program. Information is based on current research, performance standards, assessment, integrated curricula etc., as it relates to the cognitive, social and emotional, aesthetic and physical development in all prekindergarteners including English Language Learners and children with disabilities.
25. Consultation on the school year calendar has taken place with superintendents, parent representatives, the Nonpublic Schools Committee, and appropriate collective bargaining representatives.

**CALENDAR FOR RELATED SERVICES**  
**(2011-2012)**

<u>Month/Date</u>	<u>Remaining Weeks</u>	<u>Month/Date</u>	<u>Remaining Weeks</u>
<b>September</b> 06	40	<b>February</b> 06	19
12	39	13	18
19	38	20	<b>Midwinter Recess</b>
26	37	27	17
<hr/>			
<b>October</b> 03	36	<b>March</b> 05	16
10	35	12	15
17	34	19	14
24	33	26	13
31	32		
<hr/>			
<b>November</b> 07	31	<b>April</b> 02	12
14	30	09	<b>Spring Recess</b>
21	29	16	11
28	28	23	10
		30	09
<hr/>			
<b>December</b> 05	27	<b>May</b> 07	08
12	26	14	07
19	25	21	06
26	<b>Christmas Recess</b>	28	05
<hr/>			
<b>January</b> 03	24	<b>June</b> 04	04
09	23	11	03
16	22	18	02
23	21	25	01
30	20		

**CALENDAR NOTES**

Services may not be provided July 4, 2011 or other legal holidays.

Summer services must be offered between July 1<sup>st</sup> and August 31<sup>st</sup>.

School year services must be offered between September 6, 2011 and June 30, 2012.

**MEMORANDUM**

Date: \_\_\_\_\_

TO:

FROM:

Re: \_\_\_\_\_

Student's Last Name, First

SUBJECT: Change Notice/Determination of Status

DOB: \_\_\_\_\_

NYC Student Identification #

**Section I** (To be used to correct/change student's name, date of birth, NYC Identification #)

Current: \_\_\_\_\_

Change to: \_\_\_\_\_

**Section II** (To be used for change of address)

Date of Change: \_\_\_\_\_

Previous Address: \_\_\_\_\_

New Address: \_\_\_\_\_

Telephone # \_\_\_\_\_

Telephone # \_\_\_\_\_

District # \_\_\_\_\_

District # \_\_\_\_\_

**Section III** (To be used when the provider has been notified by the parent that the child is to be withdrawn from the program)

Date the student was withdrawn from program: \_\_\_\_\_  
(Please affix any written correspondence received from parent)

**Section IV** (To be used when provider cannot ascertain reason for absence for five (5) consecutive schooldays or the student does not attend at any time within twenty (20) days of the authorized first attend date.)

- Student Status:  Enrollment never established  
 (Check one)  Enrollment established through attendance  
 Enrollment established by reason of legal excuse

Dates of student's absence From: \_\_\_\_\_ To: \_\_\_\_\_

Provider's efforts to ascertain reason for absence:

\_\_\_\_\_  
\_\_\_\_\_

Signature of Service Provider: \_\_\_\_\_ Date: \_\_\_\_\_

**Section V** (To be used by CPSE staff to provide notification to the service provider regarding the student's status)

- Student Status:  The Provider may retain the student on register  
 (Check one)  The Provider must discharge the student from its register  
 as of \_\_\_\_\_ (date cannot predate this notice)

**C O M M E N T S**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of the CPSE Representative: \_\_\_\_\_ Date: \_\_\_\_\_

# RELATED SERVICE PAYMENT INQUIRY FORM

(Please print clearly or type all information)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Student's Last Name, First D.O.B. CPSE NYC ID Number  
Dist.#

\_\_\_\_\_  
Independent Agency Name (if applicable)

\_\_\_\_\_  
Agency Tax ID

\_\_\_\_\_  
Contact Person

(\_\_\_\_\_)\_\_\_\_\_  
Telephone # Date

\_\_\_\_\_  
Actual Related Service Provider Name

\_\_\_\_\_  
Provider SS#

Type of Service(s)

Session/Duration/Program Size

Language

<u>Type of Service(s)</u>	<u>Session/Duration/Program Size</u>	<u>Language</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**NONPAYMENT PERIOD:**

**FY**

**1<sup>st</sup> Attend Date**

Place an "X" in the appropriate box(es)  2 Month

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

10 Month

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**FOR EACH STUDENT MISSING FROM YOUR PAYMENT:**

- (1) attach a copy of the applicable IEP pages;
- (2) attach a copy of Authorization Letter (i.e., A-1P, AR-1P, etc.);
- (3) if necessary, provide explanation below.

**EXPLANATION:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please forward this document and all attachments to the student's CPSE.

Date received at CPSE: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date Contacted Vendor: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature: \_\_\_\_\_

CPSE Administrator or Designee

# DOE PRESCHOOL ADMINISTRATORS

09/14/11

## CSE 1

### NAME/ADDRESS

### PHONE

### FAX

#### CPSE #7,9,10

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Gabrielle Massa  
Rudene Scipio  
Grace Mattheson  
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(718) 329-8106  
(718) 329-8103  
(718) 329-8067  
(718) 741-7902

(718) 741-7928

**ROSETTA BROWNLEE**  
**Chairperson**  
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#### CPSE #7,9,10

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## CSE 2

### NAME/ADDRESS

### PHONE

### FAX

#### CPSE #8, Room #220

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Renee Covington  
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(718) 794-7446  
(718) 794-7420 x2352

(718) 794-7445  
(718) 794-7435

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#### CPSE #11, Room #208

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(718) 794-7472

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## CSE 3

### NAME/ADDRESS

### PHONE

### FAX

#### CPSE #25

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**Chairperson**  
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#### CPSE #26

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#### CPSE #28,29

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## CSE 4

### CPSE #24 - 3rd Floor

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Edgardo Santiago

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**CSE 4****NAME/ADDRESS****PHONE****FAX**

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**JENNIFER LOZANO-LUNA****Chairperson**

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**CPSE #27**

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Laverne Ferguson  
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(718) 642-5718  
(718) 642-5721

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**CPSE #30 - 5<sup>th</sup> Floor**

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Fatmeh Farokhi  
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**MARIAMA SANDI****Chairperson**

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**CPSE #23**

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**CPSE #32**

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**CSE 6****NAME/ADDRESS****PHONE****FAX****CPSE #17 2<sup>nd</sup> Floor**

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**CPSE #22 2<sup>nd</sup> Floor**

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Dr. Flor de Maria Rubinos  
Catherine Buzzetta

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**CSE 7**

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Albert Juliano	(718) 420-5791	
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<b><u>CPSE #14</u></b>	(718) 935-3226	
Paul Beharry	(718) 935-3947	
Maureen Carney	(718) 935-3946	
131 Livingston Street Brooklyn, NY 11201		
<b><u>CPSE #15</u></b>	(718) 935-3226	
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Fabiana Czemerinski	(718) 935-2703	
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Evet Anderson 131 Livingston Street, Room 411 Brooklyn, NY 11201		

**CSE 9**

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**CSE 10**

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Milta Zeno	(212) 342-8333	
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