

Board Submission Form Bloomfield School District

Meeting Date: 11/8/2022

Item Title: Approval of Health Assistant Stipend to support a student on the bus

Action Requested By: Desiraye Benavidez Presented By: Desiraye Benavidez

Action Requested: Approval of Health Assistant Stipend to support a student on the bus

Item Summary: Health Assistant support on the bus to be compliant with a student's IEP

Brief History (if applicable):
A Health Assistant is needed on the bus, to be compliant with a student's IEP.

Answer the following:

Request: Approval of Health Assistant stipend for support a student on the bus

Benefit or Impact to the District: _____

Reason for Request: To be compliant with a student's IEP

Cost: 5,000 What Budget: 25153

Mandate: Yes No

Budget OR Grant: Budget: x Grant: _____

Summary By/Title: _____

Attachments: _____



Route for Staff Review:	Reviewed By:	Comments:
_____ Not Applicable	_____	_____
_____ Finance	_____	_____
_____ Purchasing	_____	_____
_____ Human Resources	_____	_____
_____ _____	_____	_____
_____ _____	_____	_____