

DOVER SCHOOL DISTRICT	POLICY CODE: IHBAE-E
DATE OF ADOPTION: JUNE 22, 2009	PAGE 1 OF 1

POLICY FOR INDEPENDENT EVALUATION OF STUDENTS
APPROVED FEE SCHEDULE EFFECTIVE FY-09
(No change in fees for FY-10)

Type of Evaluation	Hourly Rate	Total Cost
Academic	\$110.00	\$1045.00
Cognitive Battery, Including Academic Intelligence	\$110.00	\$1265.50
Neuropsychological	\$137.50	\$1375.00
Social/Emotional	\$250.00	\$3000.00
Speech/Language	\$137.50	\$1375.00
Occupational Therapy	\$110.00	\$1100.00
Physical Therapy	\$ 93.50	\$ 935.00
Physician	\$ 93.50	\$ 935.00
	\$200.00	\$ 600.00

-Time estimate is an average based on a range; time will vary depending on referral question.

-Report writing time is included in costs.