DIRECT SERVICE PROFESSIONAL (DSP) TRAINING STIPEND AGREEMENT

Regional Center:			
Vendor Name:			
Vendor Phone #:			
Vendor Address:			
Vendor E-mail:			
Vendor Number(s):			
Service Code:			
Sub-Code:			
provided to individuals with developmental disabilities. For each DSP that completes an approved training course, the DSP's employer will be paid \$775, not to exceed two courses per DSP. Of the \$775, \$625 must be paid as gross wages by the vendor to the DSP and \$150 is to be retained by the vendor for their employer related costs. For the vendor number/service code identified above, I hereby certify that \$625 of the \$775 reimbursement amount will be paid as gross wages to the DSP who completed the approved training courses.			
Vendor Signature		Date	_
Regional Center Sigr	 nature		