

MODEL AGREEMENT  
PARAMEDICAL AUXILIARY STAFF<sup>1</sup>

BETWEEN:

1. Mr and Mrs ....., parents of the pupil ..... enrolled in year ..... of the ..... cycle of the European School, ....., resident at ....., hereinafter referred to as the parents.
  
2. Mr / Mrs ....., (speech therapist / psychomotor therapist / physiotherapist / psychologist / occupational therapist / orthoptist<sup>2</sup> ..... ) practising at ....., hereinafter referred to as the member of the paramedical auxiliary staff.
  
3. The European School, ....., represented by ....., Director, hereinafter referred to as the School.

WHEREAS:

The pupil ..... has special educational needs. It has emerged that in addition to the support put in place by the School's teaching team, coordinated by the Support Advisory Group, it is beneficial for the pupil for ..... sessions to be organised on school premises. The parents of the pupil of ..... wish this paramedical support to be provided by Mr/Mrs ....., whom they have chosen freely, without any involvement on the School's part.

1. The member of the paramedical auxiliary staff will provide ..... sessions for the pupil ..... at the rate of ..... times per week from .../.../20... to .../.../ 20..., at ..... (time) on ..... (day(s)), in room ....., made available for that purpose by the School.
  
2. The member of the paramedical auxiliary staff hereby undertakes to participate in / to produce a detailed report in anticipation of the meeting of the Support Advisory Group charged with assessing the pupil's development and fixed for .../.../20.... For attendance at each meeting of the Support Advisory Group at the School's request, he/she will receive a flat-rate payment made by the School, corresponding to the maximum amount of the reimbursement for a consultation in his/her speciality (or a similar speciality) authorised by the Sickness Fund of the European Schools in the School's host country.

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<sup>1</sup> Model agreement established for Belgium (subject to the application of specific national legislation in force in the host country of the School for other countries).

<sup>2</sup> Specialisation to be indicated

3. The member of the paramedical auxiliary staff has been chosen by the parents. The parents hereby undertake to pay the cost of the services provided by the member of the paramedical auxiliary staff, without any financial contribution from the School (without prejudice to what is laid down in Article 2). The cost of the services provided by the member of the paramedical auxiliary staff is the subject of a separate agreement concluded between the parents and the member of the paramedical auxiliary staff in question.
  
4. The School will make available to the member of the paramedical auxiliary staff and to the pupil ..... a room (No .....) in building .... according to the calendar shown below:
 

Day	Time
Day	Time

The member of the paramedical auxiliary staff will ensure that the room and any specific teaching material or equipment made available to him/her are kept in a perfect state of repair.
  
5. The member of the paramedical auxiliary staff will perform the task defined in Article 1 autonomously and will be guided, in performance of this agreement, by the pupil's best interests, which will be assessed, where appropriate, in collaboration with the educational team. The School and the member of the paramedical auxiliary staff hereby acknowledge that they have not entered into any legal relationship and that there is no relationship of subordination between them. The member of the paramedical auxiliary staff hereby undertakes to fulfil all his/her legal, ethical, fiscal and administrative obligations and gives an assurance that he/she has all the required qualifications.

Done at .....

In triplicate, each of the parties acknowledging receipt of their copy,

The School

The member of the paramedical auxiliary staff

The parents