

PREVIOUS CLIENT INFORMATION

CLIENT #1	
School District Name	
Address, City and State	
Program POC (name, email, phone number)	
Contract Administrator (name, email, phone number)	
Term dates of contract	
Services Provided	
Number of assigned SLP staff	
Number of students serviced (i.e, students who received direct and indirect SLP services)	
Size of school district (i.e. total number of students)	
Total Contract Amount	
Specialized skills / services provided	
Goals / Outcomes / Achievements	

PREVIOUS CLIENT INFORMATION

CLIENT #2	
School District Name	
Address, City and State	
Program POC (name, email, phone number)	
Contract Administrator	

(name, email, phone number)	
Term dates of contract	
Services Provided	
Number of assigned SLP staff	
Number of students serviced (i.e, students who received direct and indirect SLP services)	
Size of school district (i.e. total number of students)	
Total Contract Amount	
Specialized skills / services provided	
Goals / Outcomes / Achievements	