



MISSOURI DEPARTMENT OF SOCIAL SERVICES  
 CHILDREN'S DIVISION  
**INDEPENDENT LIVING CONTINUUM OF SERVICES**  
**CONTRACTOR SERVICES SUMMARY**

(TYPE OF CONTRACTED SERVICE)		
<input type="checkbox"/> TRAINER <input type="checkbox"/> CHAFEE PROGRAM ASSISTANT <input type="checkbox"/> FACILITATOR CHAPERONE <input type="checkbox"/> SUPPORT MENTOR <input type="checkbox"/> ADULT OFFICE/ CLASSROOM ASSISTANT <input type="checkbox"/> YOUTH OFFICE/ CLASSROOM ASSISTANT		
DATE OF SERVICE	TIME OF SERVICE	HOURS WORKED
DESCRIPTION OF SERVICES PROVIDED		
<input type="checkbox"/> SIGN-IN AND AGENDA SHEETS ARE ATTACHED		
CHECK TYPE OF CONTRACTED SERVICE		
<input type="checkbox"/> TRAINER <input type="checkbox"/> CHAFEE PROGRAM ASSISTANT <input type="checkbox"/> FACILITATOR CHAPERONE <input type="checkbox"/> SUPPORT MENTOR <input type="checkbox"/> ADULT OFFICE/ CLASSROOM ASSISTANT <input type="checkbox"/> YOUTH OFFICE/ CLASSROOM ASSISTANT		
DATE OF SERVICE	TIME OF SERVICE	HOURS WORKED
DESCRIPTION OF SERVICES PROVIDED		
<input type="checkbox"/> SIGN-IN AND AGENDA SHEETS ARE ATTACHED		
CHECK TYPE OF CONTRACTED SERVICE		
<input type="checkbox"/> TRAINER <input type="checkbox"/> CHAFEE PROGRAM ASSISTANT <input type="checkbox"/> FACILITATOR CHAPERONE <input type="checkbox"/> SUPPORT MENTOR <input type="checkbox"/> ADULT OFFICE/ CLASSROOM ASSISTANT <input type="checkbox"/> YOUTH OFFICE/ CLASSROOM ASSISTANT		
DATE OF SERVICE	TIME OF SERVICE	HOURS WORKED
DESCRIPTION OF SERVICES PROVIDED		
<input type="checkbox"/> SIGN-IN AND AGENDA SHEETS ARE ATTACHED		
CHECK TYPE OF CONTRACTED SERVICE		
<input type="checkbox"/> TRAINER <input type="checkbox"/> CHAFEE PROGRAM ASSISTANT <input type="checkbox"/> FACILITATOR CHAPERONE <input type="checkbox"/> SUPPORT MENTOR <input type="checkbox"/> ADULT OFFICE/ CLASSROOM ASSISTANT <input type="checkbox"/> YOUTH OFFICE/ CLASSROOM ASSISTANT		
DATE OF SERVICE	TIME OF SERVICE	HOURS WORKED
DESCRIPTION OF SERVICES PROVIDED		
<input type="checkbox"/> SIGN-IN AND AGENDA SHEETS ARE ATTACHED		
CHECK TYPE OF CONTRACTED SERVICE		
<input type="checkbox"/> TRAINER <input type="checkbox"/> CHAFEE PROGRAM ASSISTANT <input type="checkbox"/> FACILITATOR CHAPERONE <input type="checkbox"/> SUPPORT MENTOR <input type="checkbox"/> ADULT OFFICE/ CLASSROOM ASSISTANT <input type="checkbox"/> YOUTH OFFICE/ CLASSROOM ASSISTANT		
DATE OF SERVICE	TIME OF SERVICE	HOURS WORKED
DESCRIPTION OF SERVICES PROVIDED		
<input type="checkbox"/> SIGN-IN AND AGENDA SHEETS ARE ATTACHED		
CHECK TYPE OF CONTRACTED SERVICE		
<input type="checkbox"/> TRAINER <input type="checkbox"/> CHAFEE PROGRAM ASSISTANT <input type="checkbox"/> FACILITATOR CHAPERONE <input type="checkbox"/> SUPPORT MENTOR <input type="checkbox"/> ADULT OFFICE/ CLASSROOM ASSISTANT <input type="checkbox"/> YOUTH OFFICE/ CLASSROOM ASSISTANT		
DATE OF SERVICE	TIME OF SERVICE	HOURS WORKED
DESCRIPTION OF SERVICES PROVIDED		
<input type="checkbox"/> SIGN-IN AND AGENDA SHEETS ARE ATTACHED		
CHECK TYPE OF CONTRACTED SERVICE		
<input type="checkbox"/> TRAINER <input type="checkbox"/> CHAFEE PROGRAM ASSISTANT <input type="checkbox"/> FACILITATOR CHAPERONE <input type="checkbox"/> SUPPORT MENTOR <input type="checkbox"/> ADULT OFFICE/ CLASSROOM ASSISTANT <input type="checkbox"/> YOUTH OFFICE/ CLASSROOM ASSISTANT		
DATE OF SERVICE	TIME OF SERVICE	HOURS WORKED
DESCRIPTION OF SERVICES PROVIDED		
<input type="checkbox"/> SIGN-IN AND AGENDA SHEETS ARE ATTACHED		

**TRAINING ATTENDED**

DATES	TITLE
TRAINING HOURS	<input type="checkbox"/> SIGN-IN AND AGENDA SHEETS ARE ATTACHED
DATES	TITLE
TRAINING HOURS	<input type="checkbox"/> SIGN-IN AND AGENDA SHEETS ARE ATTACHED
DATES	TITLE
TRAINING HOURS	<input type="checkbox"/> SIGN-IN AND AGENDA SHEETS ARE ATTACHED

**REIMBURSEMENTS**

GROUP FOOD/SUPPLIES COST	DATE	PURPOSE
<input type="checkbox"/> SIGN-IN AND AGENDA SHEETS ARE ATTACHED		<input type="checkbox"/> RECEIPTS ARE ATTACHED
OTHER COST	DATE	PURPOSE
GROUP FOOD/SUPPLIES COST	DATE	PURPOSE
<input type="checkbox"/> SIGN-IN AND AGENDA SHEETS ARE ATTACHED		<input type="checkbox"/> RECEIPTS ARE ATTACHED
OTHER COST	DATE	PURPOSE
GROUP FOOD/SUPPLIES COST	DATE	PURPOSE
<input type="checkbox"/> SIGN-IN AND AGENDA SHEETS ARE ATTACHED		<input type="checkbox"/> RECEIPTS ARE ATTACHED
OTHER COST	DATE	PURPOSE
GROUP FOOD/SUPPLIES COST	DATE	PURPOSE
<input type="checkbox"/> SIGN-IN AND AGENDA SHEETS ARE ATTACHED		<input type="checkbox"/> RECEIPTS ARE ATTACHED
OTHER COST	DATE	PURPOSE

SIGNATURE OF CONTRACTOR		DATE
SIGNATURE OF ILP SPECIALIST		DATE