



Annualized Caseload Training:

In order to determine annualized caseload for a teacher, you will need a November caseload report. Here we are looking at a sample caseload report from a LEA for a self-contained high school classroom. According to this information, Teacher Tammy provides direct service minutes of 12,595 to 11 students. This document also indicates that she is responsible for 1,695 indirect minutes. For Safety Net purposes, indirect minutes cannot be considered in annualized caseload.

For computing annualized caseload, you would use the November direct service minutes of 12,595 and multiply that number by the number of weeks in the school year. Traditionally, there are 36 weeks in the school year for a total of 180 days. Based on our calculations, this amount would be 453,420 minutes attributed for Teacher Tammy.

A	В	C D		F G	Н
		Current IEP - Staff Cost	Worksheet		
Note: This worksheet is linked to	o the Worksheet C Su	mmary.			
3				SSID Number	1234567890
4 Enter data in green cells.				Number of weeks	24
	ber of weeks in cell H	4, but may be overwritten if needed.		Services from	12/1/2019
6				to	6/17/2040
		Teachers) (used to complete lines 1–	on Worksheet C Su	mmary)	
1. Name	Teacher Tammy	2. Name		varile	
Annual Special Education Base	\$74,891	Annual Special Education Base		Annual Special Education Base	
9 Salary	\$7.4,05.1	Salary		Salary	
Annual Caseload in Minutes for all	453.420	Annual Caseload in Minutes for all		Annual Caseload in Minutes for all	
0 students	435,420	students		students	
1 Cost per Minute	0.1652	Cost per Minute	0	Cost per Minute	0
MPW of direct service provided	1,465	MPW of direct service provided		MPW of direct service provided	
2 to this student per IEP		to this student per IEP		to this student per IEP	
Number of weeks staff member	24.0	Number of weeks staff member	24.0	Number of weeks staff member	24.0
3 served student		served student		served student	
4 Benefit Rate	1.3763	Benefit Rate	1.3763	Benefit Rate	1.3763
5 Total Cost for this student	\$7.994	Total Cost for this student	\$0	Total Cost for this student	\$0
6					
7 Special Education Classified Staf	f (used to complete l	ines 4–9 on Worksheet C Summary)			
8 4. Name	Para Patty	5. Name		6. Name	
9 Position	1:1 Paraeducator	Position		Position	
0 Hourly Rate	\$21.25	Hourly Rate		Hourly Rate	
MPW of direct service provided	1,518	MPW of direct service provided		MPW of direct service provided	
to this student per IEP		to this student per IEP		to this student per IEP	
Number of weeks staff member	24.0	Number of weeks staff member	24.0	Number of weeks staff member	
served student		served student		served student	24.0
	1,5412	Benefit Rate	4 5 4 4 5	Benefit Rate	
3 Benefit Rate			1.5412		1.5412
Benefit Rate Number of Students served at the		Number of Students served at the	1.5412	Number of Students served at the	1.5412
	1	Number of Students served at the same time	1.5412		1.5412
Number of Students served at the same time	1	same time	1.5412	Number of Students served at the same time	1.5412
Number of Students served at the	1 \$19,886			Number of Students served at the	
Number of Students served at the same time Total Cost for this student	1	same time Total Cost for this student		Number of Students served at the same time Total Cost for this student	
Number of Students served at the same time Total Cost for this student Total 7. Name	1	same time		Number of Students served at the same time	
Number of Students served at the same time Total Cost for this student Position	1	same time Total Cost for this student 8. Name Position		Number of Students served at the same time Total Cost for this student 9. Name Position	
Number of Students served at the 4 same time 5 Total Cost for this student 6 7 7. Name 8 Position 9 Hourly Rate	1	same time Total Cost for this student 8. Name Position Hourly Rate		Number of Students served at the same time Total Cost for this student 9. Name Position Hourly Rate	
Number of Students served at the 4 same time 5 Total Cost for this student 6 7 7, Name 8 Position 9 Hourly Rate MPW of direct service provided	1	same time Total Cost for this student 8. Name Position Hourly Rate MPW of direct service provided		Number of Students served at the same time Total Cost for this student 9. Name Position Hourly Rate MPW of direct service provided	
Number of Students served at the 4 same time 5 Total Cost for this student 6 7 7. Name 8 Position 9 Hourly Rate MPW of direct service provided to this student per IEP	1	same time Total Cost for this student 8. Name Position Hourly Rate MPW of direct service provided to this student per IEP		Number of Students served at the same time Total Cost for this student 9. Name Position Hourly Rate MPW of direct service provided to this student per IEP	
Number of Students served at the 4 same time 5 Total Cost for this student 6 7 7. Name 8 Position 19 Hourly Rate MPW of direct service provided 10 to this student per IEP Number of weeks staff member	1	same time Total Cost for this student 8. Name Position Hourly Rate MPW of direct service provided to this student per IEP Number of weeks staff member		Number of Students served at the same time Total Cost for this student 9. Name Position Hourly Rate MPW of direct service provided to this student per IEP Number of weeks staff member	
Number of Students served at the 4 same time 5 Total Cost for this student 6 7 7. Name 8 Position 9 Hourly Rate MPW of direct service provided 10 to this student per Number of weeks staff member 11 served student	1 \$19,886	same time Total Cost for this student 8. Name Position Hourly Rate MPW of direct service provided to this student per IEP Number of weeks staff member served student	\$0	Number of Students served at the same time Total Cost for this student 9. Name Position Hourly Rate MPW of direct service provided to this student per IEP Number of weeks staff member served student	\$0
Number of Students served at the 4 same time 5 Total Cost for this student 6 7 7. Name 8 Position 19 Hourly Rate MPW of direct service provided 10 to this student per IEP Number of weeks staff member	1 \$19,886	same time Total Cost for this student 8. Name Position Hourly Rate MPW of direct service provided to this student per IEP Number of weeks staff member	\$0	Number of Students served at the same time Total Cost for this student 9. Name Position Hourly Rate MPW of direct service provided to this student per IEP Number of weeks staff member	\$0

We would input the Annual Caseload on the Current IEP-Staff Costs Tab under Special Education Certificated Staff under Teacher Tammy on line 10.