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Mississippi Department of Education Office of Special Education OUEST FOR POSITIVE BEHAVIOR SPECIALIST(S) OSE/FY 202

R	EQUEST FO	R POSITIV	E BEĤA	VIOR SPEC	CIALIS	Γ(S) OSE/	FY 2026	6		
District Name		District Code	:			odate formation _	yes	no		
Name of Individual License #	Expiration	Status			Payment Method (indicate percentages)		ages)	PBS Total Allocated	MDE USE ONLY	
		Date	New	Returning	(A) PBS (state)	(B) PBS (federal)	IDEA	State (local)/ District	Amount (A) + (B)	
The District assures that the response behavioral assessments as require District understands that all the form	d by the 2004 A	Amendments	to the Ind	lividuals with						ıal
Superintendent's Signature			Date							
Approval by Mississippi Departmer	nt of Education,	Office of Spec	cial Educa	tion						
Submission Approval MDE Staff	Member	_	Date		<u> </u>					
Submission Approval MDE Direc	etor	_	Date		_					

Revised August 2025