1	Special Education Data				
1	- Standard	ls			
KDE Contact (Data Steward)	Nick Easter	Updated	09/03/2013		
Description	The purpose of the Special Education Data Standards document is to give Kentucky schools and districts a set of guidelines for entering data into the student information system. This document provides a series of screen shots and an explanation of the data elements required for state and federal reporting needs. Data standardization is important to ensure consistency in the data across schools in districts and across districts throughout the state				
Data Standard	The Kentucky Administrative Regulation	<u>s</u>			
Reg sites, data use, etc. How is data used	<ul> <li>Data is use to meets Federal Reporting Requirements</li> <li>December 1 Child Count</li> <li>Special Education Exit Report</li> <li>Special Education Behavior Report</li> <li>Special Education Behavior Report</li> <li>IAES End of Year Reporting</li> </ul>	irements unde – Expulsions – Removals	er Sec. 618 of		
Noted Changes for current year	Changes to Editor Based Conference Summary (removal of the Evaluation Date). Addition of KY Consent form, addition of SSP7:				
Available Ad-Hoc & Reports	Restraint and SSP8: Seclusion.           SPED EOY Behavior Data; IDEA Dec 1 Count Extract; Special Ed Exit           Report; Caseload Summary Report				
Available Training	Additional resources can be found on the <u>Student Information System</u> –				
	<u>Special Education</u> Webpage. Instructional Documents				
	Transfer of Student Special Education Record Help with Ad-hoc reporting	<u>ls</u>			
	Infinite Campus Ad Hoc Query Instructions				
	Infinite Campus Ad Hoc Field Descriptions				
	Infinite Campus Ad Hoc Tool Rights				
	<b>IDEA December 1 Child Count</b>				
	Special Education In Infinite Campus Question	ons and Answe	rs Document		
	User Rights for Special Education in IC	C			
	Instructions on Creating Template Banks in I	<u>.C.</u>			
	Special Education Private School Enrollment				
	Special education Student Enrollment				
	Infinite Campus Combine Student Instruction	<u>15</u>			

<b>1</b> A						Enrolling a Student
Campus Path:	Student	Information	Stude	nt Locator		
Student Locator should always be used to enroll a student						
Last Name Doe Name		State ID	Gender	Birth Date	%	
First Name Jack No mate	hes found					
Gender M 🗸						
Birth Date						
Middle Name						
SSN #						
State ID						
Search						
Gearch						
						<b>-</b>
			Create N	ew Student >		
If student is not found, 'Create a New	Student'					
Identity Info Section						
Identity Info						
*Last Name *First Name Middle	Name Suffix	•				
*Gender *Birth Date Soc S	ec Number					
Male 7/2/1996						
Race/Ethnicity *Is the individual Hispanic/Latino?		_				
*Is the individual from one or more of these races?						
(check all that apply)						
Asian						
Black or African American						
Native Hawaiian or Other Pacific Islander						
White						
*Race/Ethnicity Determination						
▼						
Last Name: The last name given to a	student at bir	th or legal cour	t docum	ents, as indic	cated	on their birth
certificate, social security card, passr	ort or through	a legal name c	hange; s	uch as, adop	tion	or marriage certificate.

**First Name:** The first name given to a student as indicated on their birth certificate, social security card, passport or through a legal name change; such as, adoption or marriage certificate. The first name should contain the proper first name of the student, please do not use nicknames here.

**Middle Name:** The middle name given to a student as indicated on their birth certificate, social security card, passport or through a legal name change; such as, adoption or marriage certificate. If a student does not have a middle name, it should be left blank. If only the middle initial is given, do not put punctuation at the end of the letter. If a female student is married, it is acceptable to put the maiden name in the middle name field. If a student has more than one middle name, please place both names in the middle name field.

Gender: Select student's gender from drop down menu - Male or Female

**Birth Date:** Enter month, day, year (##/##/##) on which the student was born. Age on all special education state reports will be calculated on the student's data of birth.

#### **Race/Ethnicity:**

**Is the student Hispanic/Latino?** Select from the drop list yes or no based on the federal definition -Hispanic or Latino means a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term ``Spanish origin" can be used in addition to ``Hispanic/Latino or Latino."

Is the individual of one or more of these races? Select one or more races based on the federal definitions listed below:

*American Indian or Alaska Native*: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.

*Asian*: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American: A person having origins in any of the Black racial groups of Africa.

*Native Hawaiian or Other Pacific Islander*: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

*White:* A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**Race/Ethnicity Determination:** Select from the drop list the option that identifies how the race/ethnicity was determined.

01: Parent Identified 03: Observer Determined 02: Self Identified 04: Unknown

1 <b>B</b>			General Enrollment Info	rmation Fields	
Campus Path: Student Information   General   Enrollment Tab					
General Enrollment Informatio	n Fields:				
General Enrollment Information					
Calendar	Schedule (read only)	*Grade	Class Rank Exclude		
11-12 Knox Central High School	MAIN 🔽	12 💙			
*Start Date No Show	End Date	End Action	*Service Type		
þ8/03/2011 III		×	P: Primary 💙		
*Start Status		End Status			
E01: First enrollment of the year	*			*	
		Dropout Reasons			
			*		
Start Comments		End Comments			

**Grade:** Use drop down menu to select grade level of student, 95-infants, 96-1 year olds, 97 - 2 year olds, 98 - 3 year olds; 99 - 4 year olds; 0 -Kindergarten, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12 and 14

NOTE: Grade 14 may only be selected for Special Education Students participating in Alternate Assessment, as determined by the student's Admissions and Release Committee and documented on his or her IEP. This student must turn 17 years of age on or before October 1st of current school year and must have progressed through a grade 12 assessments.

Start Date: Enter the date in which enrollment began

**Start Status:** Select appropriate entry or re-entry code (State defined codes). Student must be enrolled on the first day of school and a start status selected to be placed in the pool of students that may be reported on the Special Ed Exit Report. If student is a No Show, select NS from the drop list. Once the record is saved, the No Show checkbox will be selected. If student later enrolls in school this record should NOT be changed; instead a new enrollment record must be created.

End Date: Enter ending date of student's selected enrollment

End Status: Select appropriate withdrawal code (State defined codes)

Service Type: Indicates the type of enrollment and the intended service the student receives.

P: Primary – Select at school of accountability for student

S: Partial – Students who attend multiple schools in KY, the school of accountability should select P: Primary and the second school should choose S: Partial.

N: Special Ed Services Only - Students who attend school less than a full day due to the requirements of the student's IEP or who attend just for special education services/related services, i.e., Private School or home school students who attend the district for special education/related services only.

state Reporting	Fields:
State Reporting Fie State Exclude	Ids Perkins Only
Migrant	
-	
🔲 Immigrant	Refugee
Out Of State	Extra Year in Primary
Program 504	School Choice
Homeless	Living Status
Foreign Exchange	
Dropout Questionnaire	
Desident District	
, School of Accountability	District of Accountability
School of Accountability	District of Accountability
School of Accountability	District of Accountability
School of Accountability	Check this box if student is being tracked in the SIS for special education reporting only:
School of Accountability	Check this box if student is being tracked in the SIS for special education reporting only;
School of Accountability State Exclude: herefore, attend	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance
School of Accountability State Exclude: herefore, attend eports and appli	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance icable state reports.
School of Accountability State Exclude: herefore, attend eports and appli Resident Distric	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance icable state reports. et: Select district of resident if student is receiving services in the district but resides in another
School of Accountability State Exclude: herefore, attend eports and appli Resident District listrict, this elen	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance icable state reports. ct: Select district of resident if student is receiving services in the district but resides in another nent will be utilized on the IEP Enrollment Editor and the Private School Service Plan.
School of Accountability State Exclude: herefore, attend eports and appli Resident Distric listrict, this elen	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance icable state reports. ct: Select district of resident if student is receiving services in the district but resides in another nent will be utilized on the IEP Enrollment Editor and the Private School Service Plan.
School of Accountability State Exclude: herefore, attend reports and appli Resident Distric listrict, <i>this elen</i>	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance icable state reports. et: Select district of resident if student is receiving services in the district but resides in another nent will be utilized on the IEP Enrollment Editor and the Private School Service Plan.
School of Accountability State Exclude: herefore, attend reports and appli Resident Distric listrict, <i>this elen</i>	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance icable state reports. et: Select district of resident if student is receiving services in the district but resides in another nent will be utilized on the IEP Enrollment Editor and the Private School Service Plan.
School of Accountability State Exclude: herefore, attend eports and appli Resident Distric listrict, <i>this elen</i>	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance icable state reports. et: Select district of resident if student is receiving services in the district but resides in another <i>nent will be utilized on the IEP Enrollment Editor and the Private School Service Plan.</i> anguage is now located on Campus Path: Census > People > Demographics
School of Accountability State Exclude: herefore, attend eports and appli Resident Distric listrict, <i>this elen</i> Note: Home L Home Languag	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance icable state reports. ct: Select district of resident if student is receiving services in the district but resides in another <i>nent will be utilized on the IEP Enrollment Editor and the Private School Service Plan.</i> anguage is now located on Campus Path: Census > People > Demographics e: Choose from an alphabetical list of world languages. Home language is defined as the
School of Accountability State Exclude: herefore, attend eports and appli Resident Distric listrict, this elen Note: Home L Home Languag anguage most fi	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance icable state reports. ct: Select district of resident if student is receiving services in the district but resides in another <i>nent will be utilized on the IEP Enrollment Editor and the Private School Service Plan.</i> anguage is now located on Campus Path: Census > People > Demographics e: Choose from an alphabetical list of world languages. Home language is defined as the requently spoken at home. This information is obtained through question 1 on the Home
School of Accountability State Exclude: herefore, attend eports and appli Resident District district, this elen Note: Home L Home Language anguage most fi Language Surve	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance icable state reports. ct: Select district of resident if student is receiving services in the district but resides in another <i>nent will be utilized on the IEP Enrollment Editor and the Private School Service Plan.</i> anguage is now located on Campus Path: Census > People > Demographics e: Choose from an alphabetical list of world languages. Home language is defined as the requently spoken at home. This information is obtained through question 1 on the Home y available on TransACT. In the case of a foreign-born student living in an English speaking
School of Accountability State Exclude: herefore, attend eports and appli Resident District district, this elen Note: Home L Home Language anguage most fi anguage Surve home of his/her	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance icable state reports. et: Select district of resident if student is receiving services in the district but resides in another <i>nent will be utilized on the IEP Enrollment Editor and the Private School Service Plan.</i> anguage is now located on Campus Path: Census > People > Demographics e: Choose from an alphabetical list of world languages. Home language is defined as the requently spoken at home. This information is obtained through question 1 on the Home y available on TransACT. In the case of a foreign-born student living in an English speaking adopted family, choose the student's native language. If a student's Home Language is Native
School of Accountability State Exclude: herefore, attend reports and appli Resident Distric listrict, <i>this elen</i> Note: Home L Home Languag anguage most fi Language Surve nome of his/her	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance icable state reports. ct: Select district of resident if student is receiving services in the district but resides in another <i>nent will be utilized on the IEP Enrollment Editor and the Private School Service Plan.</i> anguage is now located on Campus Path: Census > People > Demographics e: Choose from an alphabetical list of world languages. Home language is defined as the requently spoken at home. This information is obtained through question 1 on the Home y available on TransACT. In the case of a foreign-born student living in an English speaking adopted family, choose the student's native language. If a student's Home Language is Native t Native American from the home language drop down menu. The next data element Native
School of Accountability State Exclude: herefore, attend reports and appli Resident Distric listrict, <i>this elen</i> Note: Home L Home Language anguage most fi Language Surve nome of his/her American, select	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance icable state reports. et: Select district of resident if student is receiving services in the district but resides in another <i>nent will be utilized on the IEP Enrollment Editor and the Private School Service Plan.</i> anguage is now located on Campus Path: Census > People > Demographics e: Choose from an alphabetical list of world languages. Home language is defined as the requently spoken at home. This information is obtained through question 1 on the Home y available on TransACT. In the case of a foreign-born student living in an English speaking adopted family, choose the student's native language. If a student's Home Language is Native t Native American from the home language drop down menu. The next data element, Native Language will become active. Then select the specific Native American Home Language from
School of Accountability State Exclude: herefore, attend eports and appli Resident Distric listrict, <i>this elen</i> Note: Home L Home Language anguage most fi Language Surve nome of his/her American, select American Home	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance icable state reports. et: Select district of resident if student is receiving services in the district but resides in another <i>nent will be utilized on the IEP Enrollment Editor and the Private School Service Plan.</i> anguage is now located on Campus Path: Census > People > Demographics e: Choose from an alphabetical list of world languages. Home language is defined as the requently spoken at home. This information is obtained through question 1 on the Home y available on TransACT. In the case of a foreign-born student living in an English speaking adopted family, choose the student's native language. If a student's Home Language is Native to Native American from the home language drop down menu. The next data element, Native Language will become active. Then select the specific Native American Home Language from prenu. <i>This element will be utilized on the IEP Enrollment Editor and the Private School School Service</i> adopted family, choose for the new for the specific Native American Home Language from
School of Accountability State Exclude: herefore, attend eports and appli Resident Distric listrict, <i>this elen</i> Note: Home L Home Language anguage most fi Language Surve nome of his/her American, select American Home his drop down r	Check this box if student is being tracked in the SIS for special education reporting only; ance is not tracked for student. This will allow users to exclude students on monthly attendance icable state reports. ct: Select district of resident if student is receiving services in the district but resides in another <i>nent will be utilized on the IEP Enrollment Editor and the Private School Service Plan.</i> anguage is now located on Campus Path: Census > People > Demographics e: Choose from an alphabetical list of world languages. Home language is defined as the requently spoken at home. This information is obtained through question 1 on the Home y available on TransACT. In the case of a foreign-born student living in an English speaking adopted family, choose the student's native language. If a student's Home Language is Native to Native American from the home language drop down menu. The next data element, Native Language will become active. Then select the specific Native American Home Language from nenu. <i>This element will be utilized on the IEP Enrollment Editor and the Private School Service</i>

Special Ed Fields:		
Special Ed Fields		
Special Ed Status	Full Funding	
A: Active 👻		
Primary Disability 07: Emotional Behavior Disability		
Setting		
6A:(age 6-21) >80% of day in genera	ed programs 👻	
Date Eligible but Refused	Special Ed Exit Status	Special Ed Exit Date
PartC ID		

\*The IDEA December 1 Child Count pulls Special Ed Status and Setting from the student's IEP Enrollment Status Editor. To be included on the child count report, data for the child MUST be populated on the IEP Enrollment Status editor, as shown <u>HERE</u>.

If student is determined 'Not eligible' for special education services, the information MUST be populated on the Enrollment tab.

**\*Special Ed Status:** From the drop list, select the option that defines the student's status within the special education process at a specific school location and assists in the determination as to whether this student will be included in the school's December 1<sup>st</sup> Child Count.

## Reference code file table <u>HERE</u>.

Primary Disability: This field is read only in this area and is populated when the user follows the below steps:

- 1. Select the Primary Disability on the Conference Summary | Eligibility/Continued Eligibility
- 2. Save and lock the document
- 3. Creates a KYIEP | Enrollment Status editor using the 'Get Status from Evaluation' button
- 4. Lock and Save the KYIEP
- 5. Primary Disability will write to the Enrollment Tab | Special Ed Section

**Full Funding:** Check this box if according to a student's IEP, the local board has approved a shortened school day/week and appropriate documentation has been forwarded to DLS, the school is eligible for full funding for this student. This selection is required to determine the adjustment to be made to SAAR (Superintendent's Annual Attendance Report).

Note: This student MUST also be placed in the Partial Day Attendance Group (contact your school attendance clerk).

**\*Setting:** From the drop list, select the appropriate LRE description. LRE settings are based upon student's age as of December 1st.

#### Reference code file table <u>HERE</u>

**Date Eligible but Refused:** Enter the month, day and year, if applicable, to indicate a parent(s) has declined special education services.

**Special Ed Exit Status:** From the drop list, select the reason the student is no longer receiving Special Education and Related Services

*Note: Please verify that the special education exit status corresponds with the appropriate general enrollment end status, if applicable.* 

Code	Description
01	Transfer to Regular Education
02	Graduated with a Diploma
03	Certificate of Attainment
04	Maximum Age

Code	Description
05	Deceased
06	Moved, Known to Continue
07	Dropped Out

**Special Ed Exit Date:** Enter month, day and year in which the student was released from special education services

# *Note: Please verify that the special education exit date corresponds with the appropriate general enrollment end date, if applicable.*

**Part C ID:** This is the Student Identification number assigned to infants and toddlers who have been identified and receiving services under the state's Part C, Program known as First Steps. Part C refers to the part of the Individuals with Disabilities Education Act that provides for services to Infants and Toddlers with disabilities ages birth through two (until their third birthday). Schools and districts must track and report if these children have been referred for services under Part B and if so when Part B eligibility status is determined, and if eligible when services began. The Part C ID number is currently provided to either the District's Preschool Coordinator or Director of Special Education four times during the school year. This information is made possible through a Memorandum of Understanding between the Kentucky Department of Education and the Cabinet for Health and Family Services, which administers the Part C program in Kentucky.

### Reference addendum First Steps Referral Process in Infinite Campus HERE

1C	Behavior Management
Campus Path: Student Information   Behavior   Admin   Event Typ	es
Behavior data entry was previously entered under Student Informa	tion   General   Behavior Tab

NOTE: Data entered into the Behavior Management Tool will display as read only on the student's behavior tab.

#### NEW LOCATION: Behavior | Behavior Management Tool

#### Incident Detail Information

An incident is a group of behavior events linked by time and proximity. Events do not have to be related nor have the same participants to be grouped together in an incident. So there could be multiple events attached to one incident.

Incident Detail Information This section stores information enabled until all required fields	n specific to the incident and will s are filled.	be shared on all participant's behavior tab. Add Event/Participant button will not be			
*Alignment Discipline ▼	Status In Progress ▼ Title	Submitted Date: Submitted By:			
*Date of Incident 08/03/2012	*Time of Incident 08:29 AM	Damages \$ Context Description			
Behavior Event Location Location Description SSL1: Classroom Details					
			Ŧ		
<ul> <li>Status: Select from the drop list the status of Incident detail</li> <li>In Progress</li> <li>Completed</li> </ul>					
Submitted by: Select	from the drop list the s	taff that reported the behavior incident detail			

Alignment: Select from the drop list the type of incident

- Discipline (negative)
- Award (positive)

Title: Enter a brief description of incident as a whole, i.e., Fight at Assembly

Date of Incident: Enter the date the incident occurred. This field defaults to the date the record is created. **Time of Incident:** Enter the time the incident occurred. This field defaults to the time the record is created. **Context:** Select from the drop list the context of the incident

- SS: School sponsored event, during school hours
- SN: School sponsored event, not during school hours
- NS: Non-school sponsored event, during school hours
- NN: Non-school sponsored event, not during school hours

Behavior Event Location: Select from the drop list the location in which the incident occurred

- SSL1: Classroom
- SSL2: Bus
- SSL3: Hallway/Stairwell
- SSL4: Cafeteria
- SSL5: Campus Grounds
- SSL6: Off-Campus
- SSL7: Restroom
- SSL8: Gymnasium

# Events and Participants Detail

Events and Participants Detail	Event Type: Select from the drop list the infraction
Events and Participants	<b>Call to Police:</b> Select checkbox if event resulted in a call
that person's behavior tab.	to police
	Arrest: Select checkbox if event resulted in an arrest
Add Event/Participant Add Resolution	Charges: Select checkbox if event resulted in charges
	being filed
Event Details	Gang Related: Select checkbox if event was gang
CHEATING	related
	<b>Civil Proceedings:</b> Select checkbox if event resulted in
Demerits: 0 State Code: 01-Poard Violation	civil proceedings. Select checkbox if event resulted in
Call Police Arrest Vi	civil proceedings
Gang Related Civil Proceedings Cr	
Law Violation	This field will display as <b>read only</b>
	based on the State Code mapping
Board Violation	via System Administration
▼ Participant Tuna	
Les Malaties Calent for a the days list the last idea	
Law violation: Select from the drop list the law violat	ion if applicable
<b>Board Violation:</b> Select from the drop list the board p	olicy violation if applicable
NOTE: If the event could be coded as a board AND a la	w violation, the law violation should be selected

NOTE: Behavior Reporting will include **all** incidents of assault, violence, use of weapons, alcohol, drugs, controlled substance (tobacco use), bullying and harassment **regardless of event resolution**. Behavior reporting will now produce a section of data that is **NOT** filtered based on resolutions of SSP1, SSP2, SSP3 or SSP5.

For an event that results in a resolution of SSP1, SSP2, SSP3 or SSP5 a selection of a law or board violation must be selected to save event.

**Law Violation:** Select from the drop list the law violation if applicable; codes highlighted below will be reportable to KDE

Code	Code Description	Code	Code Description
11	Criminal Homicide	1851	Barbiturates Possession and Use
20	Forcible Rape	<mark>1852</mark>	Barbiturates Distribution
<mark>30</mark>	Robbery	<mark>1861</mark>	Heroin Possession and Use
50	Burglary	<mark>1862</mark>	Heroin Distribution
60	Larceny - Theft	<mark>1871</mark>	Cocaine/crack Possession and Use
70	Motor Vehicle Theft	<mark>1872</mark>	Cocaine/crack Distribution
<mark>90</mark>	Arson	<mark>1881</mark>	Prescription drugs Possession and Use
100	Forgery	<mark>1882</mark>	Prescription drugs Distribution
110	Fraud	1891	Inhalant Possession and Use
120	Embezzlement	<mark>1892</mark>	Inhalant Distribution
130	Stolen Property	190	Gambling
140	Vandalism	<mark>210</mark>	DUI
<mark>151</mark>	Weapon - Handgun	<mark>230</mark>	Under Influence
<mark>152</mark>	Weapon - Rifle	240	Disorderly Conduct
<mark>153</mark>	Weapon/Other Firearm	260	Other
<mark>154</mark>	Weapon - Other	280	Loitering
160	Prostitution	<mark>301</mark>	1 <sup>st</sup> Degree Assault
171	Indecent Exposure	<mark>302</mark>	2 <sup>nd</sup> Degree Assault
172	Statutory Rape	<mark>303</mark>	3 <sup>rd</sup> Degree Assault
<mark>174</mark>	Sexual Assault (Unwanted touching in a	<mark>304</mark>	4 <sup>th</sup> Degree Assault
	<mark>sexual manner)</mark>		
<mark>1801</mark>	Other Drug Possession and Use	<mark>305</mark>	Menacing
<mark>1802</mark>	Other Drug Distribution	<mark>306</mark>	Felony Wanton Endangerment
<mark>1811</mark>	Alcohol Possession and Use	<mark>307</mark>	Misdemeanor Wanton Endanger.
<mark>1812</mark>	Alcohol Distribution	<mark>308</mark>	Felony Criminal Abuse
<mark>1821</mark>	Marijuana/hashish Possession and Use	<mark>309</mark>	Misdemeanor Criminal Abuse
<mark>1822</mark>	Marijuana Distribution	<mark>310</mark>	Terroristic Threat
<mark>1831</mark>	Hallucinogenic Possession and Use	<mark>320</mark>	Terroristic - Bomb
<mark>1832</mark>	Hallucinogenic Distribution	<mark>330</mark>	Terroristic-Ch/Bio/Nuc
<mark>1841</mark>	Amphetamines Possession and Use	<mark>340</mark>	Felony Stalking
<mark>1842</mark>	Amphetamines Distribution	341	Misdemeanor Stalking

**Board Violation:** Select from the drop list the board policy violation if applicable; codes highlighted below will be reportable to KDE

Code	Description	Code	Description
1001	Cheating	5002	Fighting - Student to Staff (physical aggression)
1002	Dress Code Incident	5003	Fighting - Student to Other (physical aggression)
1003	Leaving Campus	60	Inappropriate Sexual Behavior
1004	Skipping Class	70	Profanity or Vulgarity
1005	Skipping School	<mark>8001</mark>	Bullying
1006	Tardy to Class	<mark>8002</mark>	Harassment
1007	Truancy	<mark>8003</mark>	Threatening Staff
1008	Signing Parent/Staff Note	<mark>8004</mark>	Verbal Abuse
1009	Stealing	<mark>8005</mark>	Harassing Communications
1010	Failure to follow staff instructions	<mark>9001</mark>	Smoking
2001	Disruptive Behavior	<mark>9002</mark>	Chewing
2002	Bus Disturbance	<mark>9003</mark>	Tobacco - Other
40	Failure to Attend Detention	998	Other
5001	Fighting - Student to Student (physical aggression)	110	Dangerous Instruments (carrying or use)

## Participant Type:

Participant(s) Details				
Add Participant Filter:	Participant Name:	for and initiation	Poarch	
Current Student School Employees All People	Type name nere to search	for participant		
Search for Participant				
Filter: Current Student, Scl	nool Employees or All Pe	eople		
Participant Name: Search	for student by last name	e		
Participant(s) Details				
(Gender: F Gra	ide: 11 Age: 17)	Display on Portal	Hide Details	Role: Select from the drop list the role the
Role: Demerits	*Relationship to School			participant played in
Offender 🔻 0	1: Current Student	•		behavior event
Injury	Injury Description	Medical S	Service Provided:	<ul> <li>Offender</li> </ul>
1: No Injury 🔻				<ul> <li>Participant</li> </ul>
Details:				<ul> <li>Victim</li> </ul>
			÷	■ Witness

<b>Relationship to School:</b> Select from the drop list the appropriate participant relationship to the school in which
the event occurred
Enter the participant detail for each participant of the event; this will write the event/resolution information to the student's behavior tab.
Resolution Detail
DISORDERLY CONDUCT (Event ID: 16324)
Add Event/Participant
Add EvenioParticipant Add Resolution
Data is reported to KDE Special Education Behavior Reporting on resolution types that are manned to the
following state codes:
SSP1 Expelled with Services
SSP2. Expelled without Services
SSP3, Out of School Suspension
INSR, In School Removal
Resolution Details
*Resolution Type:
Resolution Assign Date: Resolution Start Date: Resolution Start Time: Resolution End Date: Resolution End Time:
08/03/2012  08/03/2012  09:21 AM
Behavior Admin Staff Name
Details:
* *
*Apply To: User must select checkbox by
DISORDERLY CONDUCT student name to apply resolution to
Save record
<b>Resolution Type:</b> Select from the drop list the appropriate resolution for specified participant in specified event
<b>Resolution Assign Date:</b> Enter the date the resolution was assigned to participant
Resolution Start Date: Enter the date the resolution begins
Resolution Start Time: Enter the time the resolution begins; verify the correct AM or PM designation
NOTE: The Resolution Date and Time default to the date/time the record is created, user should be updated to
reflect the actual date/time the resolution begins.

Г

**Resolution End Date:** Enter the date the resolution ends

Resolution End Time: Enter the time the resolution ends; verify the correct AM or PM designation

NOTE: If a resolution ends at the close of a specified school day, then the end date and time should be the close of school that day, not the beginning of school the next day.

**Apply To:** Select checkbox for participant in which resolution should be applied.

Please confirm that all local district codes used for out of school or in school removal are mapped to a State Resolution Code. This can be done under System Administration | Behavior | Resolution Codes.

Reference addendum Mapping Behavior Resolutions to State Code HERE

**1D** 

**Referral for Evaluation** 

Campus Path: Student Information | Special Ed | Documents Tab

#### **Referral for Evaluation**

Student's Full Name:	SSID: 2120071810
Date of Birth:	Gender: F Race/Ethnicity:
Student Represented by:	Parent Guardian Self Surrogate
Does Student Live with Parents?	YES No
If No, With Whom Does the Stude	ent Live?: Relationship:
Note: If student lives with someone must be completed and atta	e other than the parent, the Determination of Parent Representative for Educational Decision Making form ched
Parent/Guardian:	
Home Address:	
Home Phone:	Work Phone:
Primary Mode of Communication of	of the Student:
Primary Mode of Communication in	n the Home:
General Education Teacher:	Grade: 10
Referring Person/Title:	
Students Full Name: Auto	p-populates from Census
SSID: Auto-populates from	n Census
Date of Birth: Auto-popul	ates from Census
Gender: Auto-populates fr	rom Census
Race/Ethnicity: Enter the	student's Race/Ethnicity as entered into Census

**Student Represented by:** Select who represents the student in accordance with district procedures and the Student Representative Form.

Does Student Live with Parents? Select Yes or No

If No, Whom Does the Student Live? Enter full name					
<b>Relationship:</b> Indicate the relationship to the student with whom he/she lives.					
Parent/Guardian: Auto-populates from Household Information					
Home Address: Auto-populates from Household Information					
Home Phone: Auto-populates from Household Information					
Work Phone: Auto-populates from Household Information					
Primary Mode of Communication of the Student: Enter student's primary mode of communication					
Primary Mode of Communication in the Home: Enter how the student communicates in the home					
General Education Teacher: Enter student's general education teacher					
Grade: Enter student's grade for current year					
Referring Person/Title: Enter full name and title, may be someone within school or outside the school district					
Major Areas(s) of Concern: Check each reason for referring this student:					
Communication					
Communicates Basic Needs and Wants       Expressive Language         Articulation       Voice Quality         Knowledge of Sound/Letter Association       Receptive Language         Other Specify:       Other Specify:					
Academic Performance					
Oral ExpressionListening ComprehensionWritten ExpressionBasic Reading SkillsReading ComprehensionReading FluencyMathematics CalculationMathematics Reasoning and ApplicationOther Specify:Other Specify:					
Health, Vision, Hearing and Motor Abilities					
Gross Motor Skills       Fine Motor Skills         Body Control       Perceptual Motor         Locomotion       Sensory         Vision       Hearing         Developmental History       Other Specify         Other Specify       Other Specify					

Social and Emotional Status								
Interaction with Peers Interaction with Adults Acceptance of Rules Acceptance of Correction Acceptance to Disappoir Self Help Skills/Play Skil Team/Membership Other Specify:	n ntment Is		Mood Swings Repetitive Be Self Concept Inactivity or W Cooperation Self Control Expression of Other Specify	haviors /ithdrawal Feelings/Affect				
General Intelligence								
Understanding New Con Interpreting Data to Mak Comparing/Contrasting I Perceptual Discriminatio Other Specify:	cepts e Decisions Ideas of Objects n		Predicting Even     Problem Solv     Applying Knov     Memory     Other Specify	ents/Results ing wledge :				
Work Skills/Technical/Voca	ational Functioning	J						
Attending to Task Following Directions Independent Work Hal Seeking Assistance W Using Research Tools	bits ′hen Needed Effectively stamina		Punctuality Completing Organizing Using Tecl Identifying Recognizin	/ g Work g Materials/Belongin hnology to Gather/C Preferences/Interes ng Personal Limitatio	igs Drganize Info sts ons			
Maintaining Physical S Having Realist Vocatio Other Specify Iajor Areas(s) of Co or Children 0-5 who I	nal Goals ncern: Cheo have been ido	ck each r entified a	reason for ref	erring this stur rough early in	ident and sj ntervention	pecify w , include	hen "Oth current o	er" is select
Maintaining Physical S Having Realist Vocation Other Specify Iajor Areas(s) of Co or Children 0-5 who I Specialized Equipme	ncern: Chea have been ide nt Used by S	ck each r entified a Student:	reason for ref	erring this sturn rough early in	ident and sj ntervention	pecify w , include	hen "Oth e current o	er" is select concerns.
Maintaining Physical S Maintaining Physical S Having Realist Vocation Other Specify Iajor Areas(s) of Co or Children 0-5 who I Specialized Equipment udent, such as glasses chool Information: humber of Schools Atte	ncern: Chechave been ident Used by S nt Used by S nt Used by S s, hearing aident	ck each r entified a Student: Student: ds, wheel e:	reason for ref and served th Indicate any Ichair, leg bra	erring this stu rough early in v specialized e aces, etc.	ident and spotterion	pecify w , include	then "Oth e current o l <u>y</u> being u	er" is select concerns.
Maintaining Physical S Having Realist Vocation Other Specify Iajor Areas(s) of Co or Children 0-5 who I Specialized Equipment udent, such as glasses chool Information: lumber of Schools Atter Year and Grade:	ncern: Chechave been ident Used by S nt Used by S nt Used by S s, hearing aident	ck each r entified a Student: Student: ds, wheel e:	reason for ref and served th Indicate any Ichair, leg bra	erring this stu rough early in v specialized e aces, etc.	ident and spontervention	pecify w , include	hen "Oth e current α l <u>y</u> being τ	er" is select concerns.
Maintaining Physical S Maintaining Physical S Having Realist Vocation Other Specify Iajor Areas(s) of Co or Children 0-5 who I Specialized Equipmen udent, such as glasses chool Information: umber of Schools Atter Year and Grade: Days Enrolled	ncern: Chechave been ident Used by S nt Used by S nt Used by S s, hearing aid ended to date	ck each r entified a Student: Student: ds, wheel	reason for ref and served th Indicate any Ichair, leg bra	erring this stu rough early in v specialized eaces, etc.	ident and spontervention	pecify w , include	then "Oth e current o ly being u	er" is select concerns.
Maintaining Physical S Maintaining Physical S Having Realist Vocation Other Specify Iajor Areas(s) of Co or Children 0-5 who I Specialized Equipment udent, such as glasses chool Information: lumber of Schools Atter Year and Grade: Days Enrolled	ncern: Chechave been ident Used by S nt Used by S nt Used by S s, hearing aid ended to date	ck each r entified a Student: Student: ds, wheel	reason for ref and served th Indicate any Ichair, leg bra	erring this stu rough early in v specialized eaces, etc.	ident and spatement of the spatement of	current	then "Oth e current o ly being u	er" is select concerns.
Maintaining Physical S Maintaining Physical S Having Realist Vocatio Other Specify Iajor Areas(s) of Co or Children 0-5 who I Specialized Equipmer udent, such as glasses chool Information: lumber of Schools Atte Year and Grade: Days Enrolled	ncern: Chechave been ident Used by S nt Used by S nt Used by S s, hearing aid ended to date	ck each r entified a Student: Student: ds, wheel e:	reason for ref and served th Indicate any Ichair, leg bra	erring this sture rough early in v specialized eaces, etc.	ident and spatement of the spatement of	current	then "Oth e current of ly being u	er" is select concerns.
Maintaining Physical S Maintaining Physical S Having Realist Vocatio Other Specify Iajor Areas(s) of Co or Children 0-5 who I Specialized Equipmen udent, such as glasses chool Information: lumber of Schools Atte Year and Grade: Days Enrolled	ncern: Chechave been ident Used by S nt Used by S nt Used by S s, hearing aid ended to date Excused Unexcused Excused	ck each r entified a Student: Student: ds, wheel e:	reason for ref and served th Indicate any Ichair, leg bra	erring this sture rough early in v specialized eaces, etc.	equipment	current	then "Oth e current of ly being u	er" is select concerns.
Maintaining Physical S Maintaining Physical S Having Realist Vocatio Other Specify Iajor Areas(s) of Co or Children 0-5 who I Specialized Equipmer udent, such as glasses chool Information: umber of Schools Atter Year and Grade: Days Enrolled Number of Absences	ncern: Che have been ide nt Used by S nt Used by S s, hearing aid ended to date Excused Unexcused Unexcused	ck each r entified a Student: Student: ds, wheel e:	reason for ref and served th Indicate any Ichair, leg bra	erring this sture rough early in v specialized eaces, etc.	ident and syntervention	current	hen "Oth e current of ly being t	er" is select concerns.
Maintaining Physical S Maintaining Physical S Other Specify <b>fajor Areas(s) of Co</b> or Children 0-5 who I Specialized Equipmer udent, such as glasses ichool Information: lumber of Schools Atte Year and Grade: Days Enrolled Number of Absences Years in Scho Including Current	ncern: Che have been ide nt Used by S nt Used by S s, hearing aid ended to date Excused Unexcused Unexcused ol Year:	ck each r entified a Student: Student: ds, wheel e:	reason for ref and served th Indicate any Ichair, leg bra	erring this sture rough early in v specialized eaces, etc.	equipment of the second	current	then "Oth e current of ly being u	er" is select concerns.

Year and Grade: Enter current year and grade

Days Enrolled: Enter number of days enrolled in current school for current year

Number of Absences: Enter the number of excused and unexcused absences for current year

Number of Tardies: Enter the number of excused and unexcused tardies for current year

Years in School including Current Year: Enter the number years in grades 04-12

Years in Primary Program including Current Year: Enter the number years in grades K-03

Repeated Grades: Enter number of times student repeated a grade

Summary of Most Recent Grades (Provide Current or Most Recent Grades the Student Received by Content):

Reading	English	Other	
Spelling	Science	Other	
Math	Social Studies	Other	

Summary of Most Recent Grades: Enter current or most recent grades student received for each content area Summary of Standardized Group Test Data (Attach copies):

Achievement:	Test Name:		Date:
Reading	Math	Language	Spelling

**Summary of Standardized Group Test Data:** Enter current or most recent results from tests, such as, MAPS, GRADE, CTBS, G-MADE, etc.

Physical Functioning:

Attach documentation for results of each screening. (\*Required when Specific Learning Disability is suspected

VISION*	HEARING*	SPEECH	MOTOR*
Screening Date: Passed Failed	Screening Date: Passed Failed	Screening Date: Passed Failed	Screening Date: Passed Failed

Describe any Existing Medical Health Conditions Below:

Is Student Currently on Medication?: 
Yes No Specify Type and Dosage Below:

Screening Information: Enter Screening Dates and indicate pass or fail. \*Vision, Hearing and Motor screening is required when SLD is suspected.

Medical Health Conditions: Describe any existing health conditions

**Medications:** Indicate if student is currently on any medication, if yes, list prescription and non-prescription medications the child is currently taking on a regular basis.

Has this student been evaluated for spec	cial education prev	iously?	Yes	No	1				
<ul><li>If yes,</li><li>When was the student evaluated?</li><li>What was the suspected area of compared of the suspected area of compared of the suspected area of the suspected</li></ul>	? lisability?								
What services is this student receiving o the services below, Enter <b>[C]</b> if currently	r what services ha receiving or <b>[P]</b> if	s this stud the service	ent receive e was provi	d in the ded in t	past? Fo ne past	r			
Limited English Proficient Migrant Title 1	Speech Language	504	Extended So Services	chool s	Gifted and Talented	1			
Involvement with Outside Agency(ies):	Yes	No A	gency:						
Describe services that are being provide	d to this student b	y agency(i	es) listed al	bove:					
Ias student been evaluated for s	pecial educatio	on previo	ously? In	dicate	if studer	nt was p	revious	sly evalu	ated ar
<b>Has student been evaluated for s</b> etermined ineligible OR if student	<b>pecial educatio</b> t previously rec	on previo	ously? In ecial educ	dicate	if studer and was	nt was p released	revious I	sly evalu	ated ar
<b>Has student been evaluated for s</b> etermined ineligible OR if student <b>f Yes:</b> Enter date the student was	<b>pecial educatio</b> t previously rec evaluated and t	on previo eived sp he suspe	<b>Dusly?</b> In ecial educ ected disal	dicate cation bility	if studer and was	nt was p released	revious I	sly evalu	ated ar
Has student been evaluated for spletermined ineligible OR if student f Yes: Enter date the student was ndicate what services the studen of if services provided in the past	pecial education t previously rec evaluated and t at currently rec	on previo eived sp he suspe ceives or	Dusly? In ecial educ ected disal has rece	dicate cation bility <b>ived i</b>	if studer and was <b>n the pa</b> s	nt was p released	revious l current	sly evalus tly receiv	ated an
Has student been evaluated for spletermined ineligible OR if student f Yes: Enter date the student was indicate what services the studen P if services provided in the past involvement with Outside Agence	pecial education t previously rec evaluated and t at currently rec ies: Indicate ar	on previo eived sp the suspe ceives or ny agency	<b>Dusly?</b> In ecial educ ected disal <b>has rece</b> y (ies) stu	dicate cation bility <b>ived i</b> i	if studer and was <b>n the pas</b> as been :	nt was p released st: C if involved	revious l current l with,	sly evaluatly receiv such as,	ated ar
Has student been evaluated for spletermined ineligible OR if student f Yes: Enter date the student was ndicate what services the student 'if services provided in the past nvolvement with Outside Agence Pathways, Inc., IMPACT, Compred	pecial education t previously rec evaluated and t at currently rec ies: Indicate ar hend, Commiss	on previo eived spe he suspe ceives or ny agency ion for C	<b>Dusly?</b> In ecial educ ected disal <b>has rece</b> y (ies) stu Children w	idicate cation bility <b>ived in</b> ident h	if studer and was <b>n the pas</b> as been the ecial He	nt was p released st: C if involved alth Car	revious l current l with, e Need	sly evalu tly receiv such as, ls, First S	ated an ing Of
Has student been evaluated for spletermined ineligible OR if student f Yes: Enter date the student was indicate what services the student of if services provided in the past if services provided in the past involvement with Outside Agence Pathways, Inc., IMPACT, Compreheit / IPS, etc.	pecial education t previously rec evaluated and t at currently rec ies: Indicate ar hend, Commiss	on previo eived spe he suspe ceives or ny agency ion for C	<b>Dusly?</b> In ecial educ ected disal <b>has rece</b> y (ies) stu Children w	idicate cation bility <b>ived in</b> ident h vith Sp	if studer and was <b>n the pas</b> as been t ecial He	nt was p released st: C if involved alth Car	revious l current l with, e Need	sly evalus tly receiv such as, ls, First S	ated an ing OI steps,
Has student been evaluated for spletermined ineligible OR if student f Yes: Enter date the student was ndicate what services the studen P if services provided in the past nvolvement with Outside Agence Pathways, Inc., IMPACT, Compreh/IPS, etc.	pecial education t previously rec evaluated and t at currently rec ies: Indicate an hend, Commiss encies	on previo eived spe the suspe ceives or ny agency ion for C	<b>Dusly?</b> In ecial educ ected disal <b>has rece</b> y (ies) stu Children w	idicate cation bility <b>ived in</b> ident h	if studer and was <b>n the pas</b> as been t ecial He	nt was p released st: C if involved alth Car	revious l current l with, e Need	sly evaluatly receiv such as, ls, First S	ated ar ing Ol steps,
Has student been evaluated for spletermined ineligible OR if student f Yes: Enter date the student was andicate what services the student of services provided in the past antways, Inc., IMPACT, Comprese VIPS, etc.	pecial education t previously rec evaluated and t at currently rec ies: Indicate an hend, Commiss encies	on previo eived spe he suspe ceives or ny agency ion for C	<b>Dusly?</b> In ecial educ ected disal <b>has rece</b> y (ies) stu Children w	idicate cation bility <b>ived in</b> ident h vith Sp	if studer and was <b>n the pas</b> as been i ecial He	nt was p released st: C if involved alth Car	revious l current l with, e Need	sly evalu tly receiv such as, Is, First S	ated an ing OI
Has student been evaluated for spletermined ineligible OR if student f Yes: Enter date the student was indicate what services the student of services provided in the past involvement with Outside Agence Pathways, Inc., IMPACT, Comprese //IPS, etc. Describe services provided by age INTERVENTION STRATEGIES	pecial education t previously rec evaluated and t at currently rec ies: Indicate an hend, Commiss encies DO	on previo eived spe he suspe ceives or ny agency ion for C	Dusly? In ecial educ ected disal has rece y (ies) stu Children w	dicate cation bility <b>ived in</b> ident h vith Sp	if studer and was <b>a the pas</b> as been t ecial He Year:	nt was p released st: C if involved alth Car	revious l current l with, e Need	sly evaluatly receiv such as, ls, First S	ated an ing OI teps,
Has student been evaluated for spletermined ineligible OR if student f Yes: Enter date the student was ndicate what services the student? if services provided in the past nvolvement with Outside Agence? Pathways, Inc., IMPACT, Compreh/IPS, etc. Describe services provided by agence. Name: Grade Level: 09	pecial education t previously rec evaluated and t at currently rec ies: Indicate an hend, Commiss encies DO	on previo eived spe the suspe ceives or ny agenc; ion for C B: 08/20/1 acher:	ously? In ecial educ ected disal has rece y (ies) stu Children w	idicate cation bility <b>ived in</b> ident h vith Sp	if studer and was <b>n the pas</b> as been the ecial He Year:	nt was p released st: C if involved alth Car	revious l current l with, e Need	sly evaluatly receiv such as, ls, First S	ated ar
Has student been evaluated for spletermined ineligible OR if student f Yes: Enter date the student was ndicate what services the student of if services provided in the past nvolvement with Outside Agence Pathways, Inc., IMPACT, Comprese VIPS, etc. Describe services provided by agent NTERVENTION STRATEGIES Name: Grade Level: 09 School:	pecial education t previously rec evaluated and t at currently rec ies: Indicate an hend, Commiss encies DO Tea	on previo eived spe the suspe ceives or ny agency ion for C B: 08/20/1 acher:	ously? In ecial educ ected disal has rece y (ies) stu Children w	dicate cation bility <b>ived in</b> ident h vith Sp	if studer and was <b>a the pas</b> as been ecial He Year:	nt was p released st: C if involved alth Car	revious l current l with, e Need	sly evalu tly receiv such as, ls, First S	ated ar ing Ol
Has student been evaluated for spletermined ineligible OR if student f Yes: Enter date the student was ndicate what services the studen P if services provided in the past nvolvement with Outside Agence Pathways, Inc., IMPACT, Comprel /IPS, etc. Describe services provided by age NTERVENTION STRATEGIES Name: Grade Level: 09 School:	pecial education t previously rec evaluated and t at currently rec ies: Indicate an hend, Commiss encies DO Tea which interven	on previo eived spe he suspe ceives or ny agency ion for C B: 08/20/1 acher:	pusly? In ecial educ octed disal has rece y (ies) stu 2hildren w 994	idicate cation bility <b>ived in</b> ident h vith Sp	if studer and was <b>a the pas</b> as been t ecial He Year:	nt was p released st: C if involved alth Car	revious l current l with, re Need	sly evaluatly receiv such as, ls, First S	ated an ing O
Has student been evaluated for spletermined ineligible OR if student f Yes: Enter date the student was ndicate what services the studen 'if services provided in the past nvolvement with Outside Agence Pathways, Inc., IMPACT, Comprel /IPS, etc. Describe services provided by age INTERVENTION STRATEGIES Name: Grade Level: 09 School: Chool Year: Enter school year in Pacher: Indicate teacher providin	pecial education         t previously reconstruction         evaluated and the evaluated an	on previo eived spe he suspe ceives or ny agenc ion for C B: 08/20/1 acher:	pusly? In ecial educ ected disal has rece y (ies) stu Children w 994	idicate cation bility ived in ident h vith Sp	if studer and was <b>n the pas</b> as been ecial He Year:	nt was p released st: C if involved alth Car	revious l current l with, e Need	sly evalu tly receiv such as, ls, First S	ated an ing O

Documentation of Stud	lent Progress (Scores fro	om District Universal Screenings):	
Test Name:			
Reading:	Math:	Language:	Behavior:
Date:	Date:	Date:	Date:
Test Name:			
Reading:	Math:	Language:	Behavior:
Date:	Date:	Date:	Date:

Complete this section in accordance with district procedures to document patterns of progress and Rate of Improvement.

Interventions Implemented: (Documentation of Progress Data Must be Attached)

Targeted Area	Strategies/Interventions	Start Date	End Date	Impact on Targeted Area

For children 0-5 years that have been identified and served through early intervention, include a description of interventions. For children who have not been enrolled in an early intervention program, include the parent's description of any intervention. Parent(s) are not required to document specific strategies.

Complete at ARC meeting to discuss referral:

This referral, as reviewed by the ARC, indicates a suspected disability and there is a need for an individual evaluation.

This referral, as reviewed by the ARC, does not indicate a suspected disability and there is not a need for an Individual evaluation.

This referral, as reviewed by the ARC, does not include sufficient information to determine a suspected disability and the need to initiate a full and individual evaluation. The ARC has determined the information needed to be collected, and will reconvene on

Date of ARC Decision:	
Signature of LEA Representative:	

Check the appropriate findings, document Date of ARC Decision and Signature of LEA Representative.

<b>1E</b>	Eligibility Forms
Campus Path: Student Information   Special Ed   Documents Ta	ıb
Eligibility Forms	
The Eligibility Determination Forms document the Admissions and	Release Committee's determination of the
child's disability for which eligibility requirements for special education	ation and related services have been met. The
ARC completes the appropriate eligibility form(s) based on a review	v of the student's evaluation procedures, tests,

records, or reports.

Each disability has a corresponding eligibility form that must be completed on a student with a suspected disability to determine eligibility. The forms are as follows:

- Autism Eligibility Form
- Deaf/Blind Eligibility Form
- Developmental Delay Eligibility Form
- Emotional Behavioral Disability Eligibility Form
- Functional Mental Disability Eligibility Form
- Hearing Impaired Eligibility Form
- Mild Mental Disability Eligibility Form
- Multiple Disabilities Eligibility Form
- Other Health Impaired Eligibility Form
- Orthopedically Impaired Eligibility Form
- Specific Learning Disability Eligibility Form
- Speech/Language Eligibility Form
- Traumatic Brain Injury Eligibility Form
- Visually Impaired Eligibility Form

While there are some content consistencies across the eligibility forms, each form may also have unique criteria specific to the disability. All eligibility forms include these components:

Student's Full Name:

Date of Birth: 07/07/2002

Date of ARC: 09/01/2009

School: CENTRAL ELEMENTARY SCHOOL

Students Full Name: Auto-populates from Census

**Date of Birth:** Auto-populates from Census

School: Auto-populates from Enrollment

Date of ARC: Enter the date (MM/DD/YY) of the ARC meeting.

Evaluation information confirms there is an adverse effect on educational performance (must be present for eligibility).

Evaluation information confirms that lack of instruction in reading and/or math was not a determinant factor in the eligibility decision.

Evaluation information confirms that limited English proficiency was not a determinant factor in the eligibility decision.

Select if evaluation information confirms there is an adverse effect on educational performance. The ARC selects Y for Yes, N for No, or Insufficient for lack of evaluation data to support the eligibility decisions

Select if evaluation information supports the determination that **lack of instruction in reading and/or math** was **not** the determinant factor in the eligibility decision. The ARC selects Y for Yes, N for No, or Insufficient for lack of evaluation data to support the eligibility decisions

Select whether or not evaluation information supports the determination that **limited English proficiency was not the determinant factor** in the eligibility decision. The ARC selects Y for Yes, N for No, or Insufficient for lack of evaluation data to support the eligibility decisions.

Supporting Evidence:		
Supporting Ev	dence: Documen	it supporting evidence used and found during the determination of eligibility
process		
The ARC used the a	ove interpretation of the ev	valuation data to determine:
The student ha	a <b>francisco de la contracta de</b> elated services.	that adversely impacts his/her education and is eligible for specially designed
The student do	s not have a <b>familie and</b>	and is not eligible for specially designed instruction and related servic
The student hat eligible for spe	a <b>Gradient Contract</b> ally designed instruction a	, but it does not adversely impact his/her education; therefore, the student is not and related services.
Evaluation data area(s) of:	was insufficient to determi	ine eligibility. Additional assessments and/or data in will be obtained/collected the
The ARC will r	convene by	to review and determine eligibility.
The ARC used	the above interp	pretation of the evaluation data to determine: select the appropriate statemen
Evaluation da	a was insufficien	t to determine eligibility: select this statement, if the ARC determines that
additional data information.	assessments need	to be obtained and select a date to reconvene the ARC meeting to discuss the
Document dat	in which the AR	RC will reconvene to review and determine eligibility.
And my File it	<b>.</b>	
Autism Eugidi	ty Form unique o	crueria on euglouuy jorm:
🗌 Y 🔲 N 1	The student has a d	developmental disability, generally evident before age 3, significantly effecting verbal and
Insufficient	nonverbar communic	auon (musi de present for englishity), and
🗌 Y 🔲 N 1	The student has a de	evelopmental disability effecting social interaction (must be present for eligibility), and
Insufficient		
Y N 2	The student's deficits	s are not primarily the result of an emotional-behavior disability.
Insufficient		
Eligibility for	disability: This	section prompts the ARC in documenting sufficient information available <i>for</i>
each eligibility	requirement to de	termine if the student meets eligibility for a disability.

Deaf-Blindness Eligibility Form unique criteria on eligibility form:				
Y N	1a.	Student has a Hearing Impairment; and (Attached Hearing Impairment Eligibility Form)		
Y N	1b.	Student has a Visual Impairment. (Attached Visual Impairment Eligibility Form)		
Y N	2.	The combination of the two impairments causes such severe communication, developmental and educational needs that the student cannot be accommodated in special education programs designed solely for the children with visual impairment or hearing impairments, unless supplementary assistance is provided to address educational needs resulting from the two disabilities.		

**Eligibility for a disability:** This section prompts the ARC in documenting sufficient information available *for* <u>each eligibility requirement</u> to determine if the student meets eligibility for a disability.

Developmental Delay Eligibility Form unique criteria on eligibility form:

□+Y → □+N¶	1.¤	Stud	$\label{eq:student-is-three-(3)-through-eight-(8)-years-of-age. (Note: `Eligibility-for-DD-ends-on-the-child's-9^{th}-birthday.) \\ \label{eq:student-is-three-(3)-through-eight-(8)-years-of-age. (Note: `Eligibility-for-DD-ends-on-the-child's-9^{th}-birthday.) \\ \label{eq:student-is-three-(3)-through-eight-(8)-years-of-age. (Note: `Eligibility-for-DD-ends-on-the-child's-9^{th}-birthday.) \\ \label{eq:student-is-three-(3)-through-eight-(8)-years-of-age. (Note: `Eligibility-for-DD-ends-on-the-child's-9^{th}-birthday.) \\ \label{eq:student-is-three-(3)-through-eight-(8)-years-of-age. (Note: `Eligibility-for-DD-ends-on-the-child's-9^{th}-birthday.) \\ eq:student-is-three-(3)-thr$				
□+Y→□+N¶ □+Insufficient <sup>a</sup>	2.¤	Stud his/h	Student: has: not: acquired: skills: or: achieved: commensurate: with: recognized: performance: expectations: for- nis/her-age-in-one-or-more-of-the-developmental-areas(Check-all-that-apply.)@				
٥	ø		Cognitiona		Communication		
		۵.	Motor-developmenta	<b>D</b> o	Social-emotional development@		
		۵.	Self-help/adaptive behavior@	٥	0		
□+Y → □+N¶ □+Insufficient°	3.a.¤	And, of∙pe	And, student-demonstrates a measurable, verifiable difference between expected performance and current-level of performance documented by: a				
□+Y → □+N¶ □+Insufficient°	٥	įα	i.a Scores- of-two- (2)- standard-deviations-or-more-below-the-mean-in-one- (1)-or-more-of-the-five- (5)- [listed- above] developmental-areas-using-norm-referenced-instruments-and-procedures; or a				
□+Y→□+N¶ - +Insufficient©	٥	ij,¤	ii.o Scores of 1.½ standard deviations below the mean in two (2) or more of the five (5) developmental areas [listed above] using norm-referenced instruments and procedures;o				
□+Y → □+N¶ □+Insufficienta	3.b.¤	Or, normed scores are inconclusive and the professional judgment of the ARC verifies the existence of significant atypical quality or pattern of development					

**Eligibility for a disability:** This section prompts the ARC in documenting sufficient information available *for* <u>each eligibility requirement</u> to determine if the student meets eligibility for a disability.

### Emotional-Behavioral Disability Eligibility Form unique criteria on eligibility form:

Y N	1.	<ul> <li>When provided with interventions to meet instructional and social-emotional needs, the student continues to exhibit one or more of the following, when compared to the child's peer and cultural reference groups, across settings, over a long period of time and to a marked degree:</li> <li>Severe deficits exist in social competence or appropriate behavior which causes an inability to build or maintain satisfactory interpersonal relationships with adults or peers.</li> <li>Severe deficits exist in academic performance which are not commensurate with the student's ability level and are not solely a result of intellectual, sensory, or other health factors but are related to the child's social-emotional problems.</li> <li>A general pervasive mood of unhappiness or depression;</li> <li>A tendency to develop physical symptoms or fears associated with personal or school problems;</li> </ul>
Y N Insufficient	2.	The severe deficit in social competence, appropriate behavior, and academic performance is not the result of isolated inappropriate behaviors that are the result of willful, intentional, or wanton actions.

**Eligibility for a disability:** This section prompts the ARC in documenting sufficient information available *for* <u>each eligibility requirement</u> to determine if the student meets eligibility for a disability

Functional Mental Disability Eligibility Form unique criteria on eligibility form:

🗌 Y 🗌 N	<b>1</b> a.	Cognitive functioning is at least three (3) standard deviations below the mean;
Insufficient		
🗌 Y 🔲 N	1b.	Adaptive behavior is at least three (3) standard deviations below the mean;
Insufficient		
🗌 Y 🗌 N	1c.	Severe deficit in overall academic performance including acquisition, retention, and application of knowledge;
Insufficient		and
🗌 Y 🔲 N	1d.	Is typically manifested during the developmental period.
Insufficient		

**Eligibility for a disability:** This section prompts the ARC in documenting sufficient information available *for* <u>each eligibility requirement</u> to determine if the student meets eligibility for a disability.

#### Hearing Impairment Eligibility Form unique criteria on eligibility form:

□→Y → □→N¶ ¶ □→Insufficient	1.¤	Whether permanent or fluctuating, the student has a hearing loss that meets one or more of the criteria- below ( <i>check all that apply</i> ): n
:	Ω¤	1a.→a pure tone hearing loss in the speech range (500Hz, 1000Hz, and 2000Hz) of at least 25dB in the better ear; α
	Ω¤	1b.→a pure tone hearing loss in the high-frequency range (2000Hz, 4000Hz, and 6000Hz) of at least 45dB in the better ear; or¤
	Ω¤	1c.→ a unilateral hearing loss in the speech range (500Hz, 1000Hz, and 2000Hz) of at least 60dB in the impaired ear.¤
□+Y → □+N¶ 1	2.¤	The hearing loss results in difficulty in identifying linguistic information through hearing.a
→Insufficiento		

**Eligibility for a disability:** This section prompts the ARC in documenting sufficient information available *for* <u>each eligibility requirement</u> to determine if the student meets eligibility for a disability.

Mild Mental Disability Eligibility Form unique criteria on eligibility form:

Y N Insufficient	1a.	Cognitive functioning is at least two (2) standard deviations, but not more than three (3) standard deviations below the mean;
<u>Y</u> N	1b.	Adaptive behavior is at least two (2) standard deviations below the mean;
Insufficient		
Y N	1c.	Severe deficit in overall academic performance including acquisition, retention, and application of knowledge;
Insufficient		and
Y N	1d.	Is typically manifested during the developmental period.
Insufficient		

**Eligibility for a disability:** This section prompts the ARC in documenting sufficient information available *for* <u>each eligibility requirement</u> to determine if the student meets eligibility for a disability.

Multiple Disabilities Eligibility Form unique criteria on eligibility form:

D+Y→ D+N¶ D+Insufficientº	1a.¤	The student has a combination of two (2) or more of the following disabilities:¶ + Autism¶ + Emotional-Behavioral Disability¶ + Hearing Impairment¶ + Mild Mental Disability¶ + Functional Mental Disability¶ + Orthopedic Impairment or Physical Disability¶ + Other Health Impaired¶ + Specific Learning Disability¶ + Traumatic Brain Injury¶ + Visual Impairment¶ + Deaf/Blind¶ Attach a copy of the eligibility forms for all areas checked.¤
□+Y → □+N¶ □+Insufficienta	1b.¤	The student's disability is not solely a combination of deafness and blindness; a
□+Y → □+N¶ □+Insufficient°	1c.¤	The student's disability is not a combination of speech or language impairment and one other disabling condition; and o
□+Y → □+N¶	1d.¤	$The combination of these disabilities causes such severe educational needs that they cannot be accommodated through special education programs solely for one impairment.^{\alpha}$

**Eligibility for a disability:** This section prompts the ARC in documenting sufficient information available *for* <u>each eligibility requirement</u> to determine if the student meets eligibility for a disability. NOTE: An eligibility form for each disability selected must be completed.

#### Other Health Impairment Eligibility Form unique criteria on eligibility form:

☐+Y → □+N¶ ¶ ■+Insufficient©	1a.¤	The existence of a health impairment caused by chronic or acute health problems such as heart condition, tuberculosis, sickle cell anemia, hemophilla, epilepsy, rheumatic fever, nephritis, asthma, lead poisoning, leukemia, diabetes, acquired immune deficiency syndrome, attention deficit disorder, or attention deficit hyperactive disorderThe diagnosis of Other Health Impairment is (specify):
⊡+Y→ □+N¶	1b.¤	The effect of the impairment on (check all that apply):
+Insufficient°		□-→Strength∝
		□-→ Vitality¤
		Alertness (including heightened alertness to environmental stimuli that results in limited alertness with respect to the educational environment). <sup>α</sup>

**Eligibility for a disability:** This section prompts the ARC in documenting sufficient information available *for* <u>each eligibility requirement</u> to determine if the student meets eligibility for a disability.

#### Orthopedic Impairment Eligibility Form unique criteria on eligibility form:

□+Y→ □+N¶ ¶ □+Insufficient¤	1a.¤	The existence of an impairment caused by a congenital anomaly (e.g. clubfoot, absence of a member, etc.); OR a
□+Y→ □+N¶ ¶ □+Insufficient¤	1b.¤	The existence of an impairment caused by disease (e.g. poliomyelitis, bone tuberculosis, etc.); OR a
□+Y→ □+N¶ ¶ □+Insufficient <sup>o</sup>	1c.¤	The existence of an impairment from other causes such as cerebral palsy, amputations, fractures, burns that cause contractions, etc. a

**Eligibility for a disability:** This section prompts the ARC in documenting sufficient information available *for* <u>each eligibility requirement</u> to determine if the student meets eligibility for a disability.

Specific Learning Disability Eligibility Form unique criteria:

l →Y → ¶ ] →Inst	• □-•N¶ ufficient¤	1.¤	The student is provided with learning experiences and instruction appropriate for the student's age or state- approved grade level standards;¤
Ì →Y → Î ]→Insı	Image: Second secon		
			→ Oral Expression → □→ Listening Comprehension¶         → Written Expression → □→ Basic Reading Skills¶         → Reading Fluency Skills → □→ Reading Comprehension¶         → Mathematics Calculation → □→ Mathematics Reasoning¤
□+Y → 1 □+Inst	□→Y → □→N¶       3.0       □→The student fails to achieve a rate of learning to make sufficient progress to meet grade level standards aligned with the Kentucky Program of Studies in one or more of the areas identified above when assessed using a response to scientific, research-based intervention process;¶		
			" ■→The student exhibits a pattern of strengths and weaknesses in performance, achievement, or both relative to ability level or intellectual development.¤
∏→Y → ¶ ∏→Inst	• □+N¶ ufficient¤	4.¤	The deficits in achievement are <b>not</b> primarily the result of vision, hearing, or motor impairments; mental- disability; emotional behavioral disability; cultural factors, environmental or economic disadvantage, or limited English proficiency.¤
8a.¤	The fo	llowing a	grelevant behavior was noted during the observation of the child: ¶
8b.¤	Relatio	onship ¤	of the observed behavior (9a.) to the child's academic functioning: ¶
9.o	Educa	tionall ¤	y∙relevant medical findings, if an y: ¶
10.¤	The in interve	structi ntion a	onal·strategies·used·and·the·student-centered·data·collected·in·response·to·scientific,·research-based performance:·¶
□+Y→ □+Inst	Inficient∘	11.¤	Documentation of the instructional strategies, educational services, and data collected on student performance is given to the parent. <sup>q</sup>

 Eligibility for a disability: This section prompts the ARC in documenting sufficient information available for

 each eligibility requirement
 to determine if the student meets eligibility for a disability.

 Speech or Language Impairment Eligibility Form unique criteria on eligibility form:

 □+Y → □+N¶
 1.º

 Communication-disorder-in-one-or-more of-the-following:¶

¶ <b>∏+Insufficient</b> ¤	

Communication disorder in one or more of the following
□→Speech·Sound·Production·and·Use¶
□ →Language¶
➡Fluency ¶
→Voice.a

**Eligibility for a disability:** This section prompts the ARC in documenting sufficient information available *for* <u>each eligibility requirement</u> to determine if the student meets eligibility for a disability.

Note: The guidelines in the "Kentucky Eligibility Guidelines - Revised for Students with Speech or Language Impairment, 2009" may be used as supporting evidence to verify speech or language impairment.

# Traumatic Brain Injury Eligibility Form unique criteria on eligibility form:

□+Y → □+N¶ ¶ □+Insufficient¤	1.¤	Evaluat an exter and is N evidenc of the fo	ion information collected across multiple setti mal-physical-force, resulting in total or partial- IOT a congenital, degenerative, or brain injur ed by information that indicates an open or cl blowing areas (check all that apply) a	ngs-that-\ functiona y-induced losed-hea	verifies an acquired injury to the brain caused by al-disability or psychosocial impairments, or both, by birth trauma Traumatic brain injury is ad injury resulting in an impairment in one or more
		۵	Cognition¤	۵	Judgmento
		۵	Language¤	۵	Problemsolving¤
0	~	۵	Memory¤	۵	Sensory, perceptual, motor abilities
~	Ň	۵	Attention¤	۵	Psycho-social-behavior¤
		۵	Reasoning¤	۵	Physical functions <sup>a</sup>
		۵	Abstract-thinking¤	۵	Information processing and speech a
□+Y → □+N¶ ¶ ■+Insufficient°	2.¤	A-curren traumat	nt, educationally: relevant-statement, complete ic brain injuryThe diagnosis and extent of th	ed∙by∙a∘q ne∙brain∙i	ualified professional verifies the existence of a njury is:¶ messenger@webe: Frank Melvin registere

**Eligibility for a disability:** This section prompts the ARC in documenting sufficient information available *for* <u>each eligibility requirement</u> to determine if the student meets eligibility for a disability.

Visual Impairment Eligibility Form unique criteria on eligibility form:

□+Y → □+N¶ ¶ □+Insufficient°	1a.¤	The visual acuity, even with prescribed lenses, is 20/70 or worse in the better eye; OR a
□+Y → □+N¶ ¶ □+Insufficienta	1b.¤	The visual-acuity-is-better-than-20/70-and-the-child-has-any-of-the-following-conditions:¶ A-medically-diagnosed-progressive-loss-of-vision;¶ A-visual-field-of-twenty-(20)-degrees-or-worse;¶ A-medically-diagnosed-condition-of-cortical-blindness;-OR¶ A-functional-loss-of-vision.ª
□+Y→ □+N¶ ¶ □+Insufficienta	2.¤	$The student \cdot requires \cdot specialized \cdot materials \cdot and \cdot instruction \cdot in \cdot orientation \cdot and \cdot mobility, \cdot Braille, \cdot visual \cdot efficiency \cdot or \cdot tactile \cdot exploration. \\ \circ$

**Eligibility for a disability:** This section prompts the ARC in documenting sufficient information available *for* <u>each eligibility requirement</u> to determine if the student meets eligibility for a disability.

1 <b>F</b>				KY IEP
Campus Path: Stu	dent Information	Special Education   Doc	uments Tab	
KY IEP				
Create New Form • 2011 K • 2011 K • • • • • • • • • • • • •	from the drop list, Y IEP <14 - this pla Y IEP 14 - this plar in the child's 8 <sup>th</sup> gr when the child has earlier if determine Y IEP 16+ - this pla	select the appropriate KY an is used if student is less i is used: rade year; or reached the age of 14 yea ed appropriate by the ARC an is used by the child's 10	IEP plan than 14 years of age urs; or 5 <sup>th</sup> birthday and beyon	ıd
Education Plan Ed	litor:			
Education Plan The ability to lock or m Documents tab, outsid	ark a document as com e of the plan editors.	plete has been relocated to the	e main view of the	
*Meeting Date	*Start Date	*End Date		

Meeting Date: Enter the date the Admissions and Release Committee met to develop the current IEP

Start Date: Enter the date in which the IEP starts and services begin.

11/16/2011

**End Date:** Enter the date in which the IEP is due to be reviewed. This field will be auto populated, one year minus a day from the Meeting Date entered.

11/15/2012 📰

Type: From the drop list, select 'Initial' or 'Annual'

11/16/2011

Type Annual

**Note: Plan Completed:** This function has been removed with the E.1242 release. You now have to use the Lock/Unlock button on the Documents tab

Summary	Team Members	Documents	Contact Log		
	realitielesk PD Core		Contact Edg	ant Allaland Doour	ant.
			Print By New Docum	ent gopioad Docum	IEIIL
Documents	s list				

Student Demographics Ea	litor:		
Student Demographics			
Note: At the point the plan is get	nerated, a snapshot of	f the student data is take	n. To get a
fresh copy, click the button belo	W.		
	Refresh Student Infor	mation	
Last Name	First Name	Middle Name	Suffix
Race, Ethnicity	Gender	Birthdate	
6 : White	М	04/27/1995	
Student Address			
P.O. Box 64 SCALF, KY 40982			
School Name	School Phone	Student Number	Grade
Knox Central High School	(555)381-4931		10
Primary Disability, if currently ide	entified		
Speech Language			
Refresh Student Informa	tion: This will po	pulate demographic	informatio
Enrollment Status Editor:			

Enrollment Status
Note: At the point the plan is generated, a snapshot of the student data
is taken. To get a fresh copy, click the button below.
Get Special Ed Status from Enrollment
Oat Diashith, from Evolution
Get Disability from Evaluation
The editable values will change the values in the IEP and it will update
of the plan. The undate of the enrollment will only occur when the plan
is marked completed
State ID
1952392106
Primary Disability
07: Emotional Behavior Disability
Special Ed Status
A: Active
Special Ed Setting
6A:(age 6-21) >80% of day in general ed programs 🔹
Resident District
2
Home Primary Language
1380: Spanish
NOTE: Special education data should be populated using the 'C

*NOTE:* Special education data should be populated using the 'Get Disability from Evaluation' button. Data for IDEA December 1 Child Count will populate from this editor.

**Primary Disability:** Click 'Get Disability from Evaluation' button to auto-populate the Primary Disability as *Read only* from student's Conference Summary | Eligibility/Continued Eligibility Editor.

Code descriptions can be found <u>HERE</u>.

**\*Special Ed Status:** From the drop list, select the option that defines the student's status within the special education process at a specific school location and assists in the determination as to whether this student will be included in the school's December 1<sup>st</sup> Child Count.

Code	Title	Description
А	Active	Student is actively enrolled in special education
AR	Active/Referred	Student is already enrolled in special education and is being referred for another reason (e.g., student currently identified as Speech or Language Impaired and in the reevaluation process for another categorical disability area).
ER	Eligible – Parent Refused	Student eligible for special education services; however, parent refused services.
Ι	Inactive	Student no longer receives special education services (e.g., withdrawal, graduation, dropped out, exiting from Special Education services).
N	Not Eligible	Student was tested and determined not eligible to receive services
PR	Pre-Referral	Optional status designation to be used when school desires to track non-special education student in the intervention process
Z	Referred	Non-special education student is being referred for testing.

**\*Setting:** From the drop list, select the appropriate LRE description. LRE settings are based upon student's age as of December 1st.

Code		Description
3A1	10 hours or more in a regular early childhood	Majority of special education and related services provided <b>within</b> the early childhood program
3A2	program per week	Majority of special education and related services provided <b>in another location</b>
3B1	Less than 10 hours in a	Majority of special education and related services provided <b>within</b> the early childhood program
3B2	regular early childhood program per week	Majority of special education and related services provided <b>in another location</b>
3F		Residential Facility
3P	Special Education Program	Service Provider Location
38		Separate Class
<b>3</b> U	Separate School	
3X	Home	

Reference addendum LRE Flow Chart for 3-5 Year olds and clarification HERE

	Ages 6-21
Code	Description
6A	80% or more of the day in general ed programs
6B	40%-80% of the day in general ed programs
6C	<40% of the day in general ed programs
6F	Residential facility
6Н	Homebound/Hospital
6I	Correctional facilities
6J	Parentally Placed in Private School
6U	Separate School

Present Levels Editor:	
Present Levels	
Present Levels of Academic Achievement and Functional Performance,	
including how the disability affects the student's involvement and progress in	i
the general curriculum	
(For preschool children include the effect on participation in appropriate activities; Beginning	IC
in the child's 8th grade year or when the child has reached the age of 14, a statement of	
transition needs is included.)	
Communication Status:	
Performance commensurate with similar are neers	
	1
*	
	1
Academic Performance:	
Performance commensurate with similar age peers	
	1
×	
Health, Vision, Hearing, Motor Abilities:	
Not an area of concern at this time	
~	
L	1
Carriel and Employee Mathematica	
Performance commensurate with similar age peers	
·	
	1
General Intelligence:	
Performance commensurate with similar age peers	

Transition Needs:           Not an area of concern at this time (Checking this box is not an option when the sin the 8th Grade or 14 years or older because transition must be addressed for the device the second se	he student
Check all areas of need as identified by the Admissions and Release Committee (M one area may be checked.) Instruction Related services Community experiences Employment	ore than
Daily Living Skills     Post School Adult Living Objectives     Functional Vocational Evaluation	
	~
Functional Vision/Learning Media Assessment:	
	~

*Affect on the Involvement and Progress in the General Curriculum:* within domain areas listed below, the ARC documents how the disability affects the student's involvement in and progress in the general curriculum.

**Communication Status:** includes performance in the areas of voice, fluency, receptive and expressive language (includes pragmatics), and speech sound production and use. This includes any means (e.g., speech, sign language, augmentative communication) by which a student relates experiences, ideas, knowledge, and feelings to others.

Academic Performance: describes the level of development or achievement and how the student applies his/her learning in one or more of the following areas: basic reading skills, reading comprehension, reading fluency, math calculation, math reasoning, written expression oral expression, listening comprehension. The description may include strategies applied in learning and preferred learning styles

**Health, Vision, Hearing, Motor Abilities:** include information regarding the student's relevant health or physical needs. This information is typically provided through screening information and by health care providers, including physical and occupational therapists.

**Social and Emotional Status:** includes functional performance information about the student's social skills, interpersonal behavior, personal skills, self-related behaviors, sensory self-regulation, emotional behavior, organization and executive skills, environmental access/mobility skills, and independent living skills.

**General Intelligence:** includes information about the student's aptitude, knowledge application, thinking, memory, reasoning and problem solving skills.

**Transition Needs:** focuses on the needs related to the student's planned course of study. By the age of 16, the focus is also on the transition services which assist the student in reaching postsecondary goals. Transition needs must include one or more of the following:

- Instruction
- related service
- community experience

- development of employment
- post school adult living objectives
- acquisition of daily living skills, if appropriate
- Functional vocational evaluation.

**Functional Vision/Learning Media Assessment:** For a student who is blind or visually impaired, the ARC evaluates the student's reading and writing skills; needs related to learning; and appropriate reading and writing media including consideration of the future need for instruction in Braille and use of Braille.

#### Special Factors Editor:

Special Factors
Consideration of Special Factors for IEP Development: (The ARC MUST address
each question below and consider these issues in the review and revision of the IEP.)
Does the child's behavior impede his/her learning or that of others?
If Ves, include appropriate strategies, such as positive behavioral interventions and
supports in the Statement of Devices/Services helow
Does the child have limited English proficiency?
Yes No
If Yes, what is the relationship of language needs to the IEP?
*
· · · · · · · · · · · · · · · · · · ·
is the child blind or visually impaired?
Yes No
If Yes, the IEP Team must consider:
<ul> <li>Is instruction in Braille needed?</li> </ul>
Yes No
<ul> <li>Is use of Braille needed?</li> </ul>
• Will Braille be the student's primary mode of communication?
Yes No
(See evaluation data for supporting evidence.)
Does the child have communication needs?
Yes No
If Yes, specify below:
See Present Levels for Communication Status
Other (Specify):

**Does the child's behavior impede his/her learning or that of others?** If a child's behavior impedes his or her learning or that of others, the ARC develops strategies, including positive behavioral interventions, to address the behavior.

**Does the child have limited English proficiency?** For a child with limited English proficiency, the ARC describes the language needs as related to the student's IEP.

**Is the child blind or visually impaired?** For a child who is blind or visually impaired, the ARC uses an evaluation of the student's reading and writing media (including an evaluation of the child's future needs for instruction in Braille), to determine the need for instruction in Braille and the use of Braille.

**Does the child have communication needs?** For students with communication needs, the ARC addresses the student's language and communication needs in the areas of stuttering, impaired articulation, language impairment, voice impairment, delayed acquisition of language, or an absence of language.

Is the child deaf or hard of hearing?
in res, the IEP ream must consider.
<ul> <li>The child's language and communication needs; Describe;</li> </ul>
See Present Levels for Communication Status
Other (Specify):
<ul> <li>Opportunities for direct communications with peers and professional personnel in the child's language and communication mode, academic level and full range of needs; Describe:</li> </ul>
·
<ul> <li>Any necessary opportunities for direct instruction in the child's language and communication mode. Describe:</li> </ul>
×
Are assistive technology devices and services necessary in order to implement the child's IEP?
Yes No
If Yes, include appropriate devices in the Statement of Devices/Services below.
Statement of Devices/Services: If the ARC answers Yes to any of the questions above, include a statement of services and or devices to be provided to address the above special factors.
See Specially Designed Instruction
See Supplemental Aids and Services
See Behavior Intervention Plan
Other (Specify):
Contro (opeony).

**Is the child deaf or hard of hearing?** For a child who is deaf or hard of hearing, consider the student's language and communication needs, opportunities for direct communication (with peers and professional personnel) in the student's language and communication mode.

Are assistive technology devices and services necessary in order to implement the child's IEP? For students who may need assistive technology the ARC must determine the type(s) of device(s) and/or amount of services needed. The ARC documents the assistive technology in the IEP, and indicates the type of service in the "Statement of Devices/Services" box below.

**Statement of Devices/Services:** This box provides a summary and link to the location of the services identified based on the student's special factors.

Goals and Objectives Editor:	
Goal Editor	
Area	
Annual Goal: 🖃	
	~
	<u>×</u>
Method(s) of Measurement:	
	~
Specially Designed Instruction:	
	~
Student another and a standard for each and of this	IFD will be repeated at least
student progress and performance for each goal of this	i EP will be reported at least udeote
as often as the school reports the performance of an st	duonta.

Area: Enter the Content Area for the specified goal

**Annual Goal:** Enter statement of anticipated results to be achieved in a calendar year or less as determined by the ARC.

**Method(s) of Measurement:** Select from template bank the evaluation method in which the student's progress toward reaching the annual goal will be measured.

- Curriculum Based Measurement
- Direct Measures
- Indirect Measures
- Authentic Assessment

**Specifically Designed Instruction:** Select from template bank "**what the teacher does**" to instruct, assess, and re-teach the student. The SDI describes what the teacher does, as appropriate, to adapt the content, methodology, or the delivery of instruction. SDI is based on peer-reviewed research to the extent possible.

NOTE: 2011 KY 16+ IEP will have a prompt to indicate the linkage between annual goals and postsecondary goals:

For the IEP to be in effect by the child's 16th birthday and thereafter: This
annual goal will reasonably enable the student to meet the student's postsecondary
goal in the area(s) of:
Education/Training Employment Independent Living

ARC must determine which postsecondary goal, (as written on the transition page of the IEP), the annual goal supports.

#### Reporting Progress Editor:

Reporting Progre	SS	
Concurrent with	the issuance of Report Cards	
Other, specify		

The ARC informs the parent of if they will be informed of student progress toward the goal concurrent with the issuance of report cards OR the ARC may identify another means of reporting progress toward the goal.

Supplemental Aids and Services Editor:	
Supplementary Aids and Services	
A statement of supplementary aids and services, if any, to be provide behalf of the child.	d to the child or on
	^
	*
Enter in text box <b>"what the student needs"</b> in order to ad	vance appropriate

Enter in text box **"what the student needs"** in order to advance appropriately toward attaining the goal(s) and be involved and make progress in the general curriculum, to participate in extracurricular and other nonacademic activities, and be educated and participate with other students with and without disabilities. SAS includes strategies, aids, and services.

Accommodations of Assessments Editor:

Accommodations of Assessments			
Accommodations for Administration of State Assessments and			
Assessments in the classroom			
ARC determined no accommodations needed			
In order to justify appropriateness of accommodations for any state mandated tests, the testing accommodations must be used consistently as part of routine instruction and classroom assessment as well as meet all additional requirements established by the <i>Inclusion of Special</i> <i>Populations in the State-Required Assessment and Accountability</i> <i>Programs, 703 KAR 5:070</i> document.			
<b>NOTE:</b> The Kentucky Administrative Regulations regarding accommodations on state testing dictate whether a student may use a particular accommodation during the administration of state tests. Any IEP test accommodation that the regulations determine will invalidate a particular test or type of test <u>shall not</u> be utilized in administration of such tests to the student.			
Readers Scribes			
Paraphrasing			
Reinforcement and behavior modification strategies			
Prompting/cueing			
Manipulatives Braille			
Interpreters Extended time			
Other, specify:			
	-		
Student has been determined eligible for participation in the Alternate			
Assessment Program. Complete the Participation Guidelines for the KY			
Alternate Assessment form if selecting this checkbox. If determined eligible for the Alternate Assessment the ARC must also determine if the student is Dimension A or Dimension B			
Dimension A			
Dimension B			

The ARC may identify assessment accommodations to participate in state or district-wide assessment if they are used consistently as a part of the student's routine instruction and classroom assessment.

**Student has been determined eligible for participation in the Alternate Assessment System:** Select checkbox to indicate the ARC determined the student eligible for the alternate assessment

Specify Dimension A or Dimension B

*NOTE:* If student determined eligible for Alternate Assessment, the Alternate Assessment Guidelines form must be completed.

Supports and Modifications Editor:



The ARC identifies program modifications and supports for school personnel that are to be provided on behalf of a student to meet the unique needs of the student. This may include specialized training, use of school time, or user of school staff, and may involve specialized training for any staff that comes in contact with the student.

#### Least Restrictive Environment:

Least Restrictive Environment	
LRE and General Education:	
Explain the extent, if any, to which the student will not participate in general (content area):	education
	~
	~

The ARC determines the extent, if any, to which the student will **not** participate in general education (content area).

#### Special Ed Services Editor:

SPED Service Editor			
*Service			
	*		
Service Provider			
	*		
Service Position			
	*		
Location:			
*Start Date:		*End Date:	
00/05/2011		00/04/2012	
03/03/2011		03/04/2012	
*Minutes per Service Frequency		*Service Frequency	
*Convice Deried			
-Service Period	×		

Service: Select from drop list Special Education

NOTE: Special Education should be the only option in the Service drop list. Other options will not print on the IEP and should be removed via System Administration | Special Ed | Services

**Service Position:** Select the position of each person responsible for implementing the services from the service position drop list.

NOTE: Do not select from the Service Provider drop list. Selection will not print on the IEP and should be removed via System Administration | Special Ed | Service Providers

**Location:** Identify the setting (i.e., regular classroom, special classroom, community) in which the service(s) will be provided. Include the content class (i.e., language arts, science, PE) in which the student will receive SDI. NOTE: Co-teaching is the regular classroom)

Start Date: Enter the date in which services begin

End Date: Enter the date in which services are anticipated to end

**Minutes per Service Frequency:** List the number of minutes the service will be provided per session in each Service Period. This may be an approximation of time in terms of minutes, hours, or blocks of time, but <u>may not</u> be a range of time. Service Minutes does not equal total minutes; it is a subset of total minutes of class time.

Service Frequency: List the number of times the service will be provided in a Service Period.

**Service Period:** Identify the Service Period as daily, weekly, monthly, or annually

Reference addendum *Document Services for Trimester Scheduling* HERE

Reference the Collaborative Teaching Practices for Exceptional Children Question and Answer Document.

**Related Services Editor:** 

SPED Service Editor			
*Service			
	*		
Service Provider			
	*		
Service Position			
	*		
Location:	,		
*Start Date:		*End Date:	
09/05/2011		09/04/2012	
*Minutes per Service Frequency		*Service Frequency	
*Convice Deried			
-Service Period	×		

Service: Select from the drop list the related service that is provided

**Service Position:** Select the position of each person responsible for implementing the services from the service position drop list.

NOTE: Do not select from the Service Provider drop list. Selection will not print on the IEP and should be removed via System Administration | Special Ed | Service Providers

**Location:** Identify the setting (i.e., regular classroom, special classroom, community) in which the service(s) will be provided. Include the content class (i.e., language arts, science, PE) in which the student will receive SDI. NOTE: Co-teaching is the regular classroom)

Start Date: Enter the date in which services begin

End Date: Enter the date in which services are anticipated to end

**Minutes per Service Frequency:** List the number of minutes the service will be provided per session for each Service Period. This may be an approximation of time in terms of minutes, hours, or blocks of time, but <u>may not</u> be a range of time. Service Minutes does not equal total minutes; it is a subset of total minutes of class time.

Service Frequency: List the number of times the service will be provided in a Service Period.
Service Period: Identify the Service Period as daily, weekly, monthly, or annually
NOTE: Student must have Transportation as a related service on current IEP, if student's Transportation Code is indicated as T5-Special Transported.
Reference the Collaborative Teaching Practices for Exceptional Children Question and Answer Document.
Extended School Year
Extended School Year
Are extended school year services required for this student?
Ves No More Data Needed
If the ARC determines ESY services are to be provided, describe the service and indicate to which annual goal or goals the service is related. If the ARC determines no ESY services are to be provided, please document the reason(s) for this decision.
<b>Extended School Year (ESY):</b> means SDI and related services that are provided to a child with a disability beyond the normal school year in accordance with the child's IEP at no cost to the parents.
Transition Service Needs (14) Editor (applicable to 2011 KY IEP 14):
Transition Service Needs
What transition assessments were used to determine the student's
preferences and interests? (Check all that apply)
Student Interview Student Survey
Student Portfolio Vocational Assessments
Interest Inventory Parent Interview
Career Awareness Career Aptitude
Individual Learning Plan Other (describe below):
Transition Services Needs (Beginning in the child's 8th grade year or when the child has reached the age of 14 and thereafter.)
Needs Related to the Course of Study - See Present Levels of Performance
Does the student's Individual Learning Plan (ILP) include the student's course of study?
No. If No, do not proceed with development of IEP until ILP is initiated, including the
child's course of study.
graduation or exiting special education)
Do transition service needs focus on the child's course of study and are they addressed in the Present Levels?
No Yes

**Transition Assessments:** Check what assessments were used to determine preferences and interests of the student.

**Transition Service Needs** required beginning in the child's 8<sup>th</sup> grade year or when the child has reached the age of 14 and thereafter. ARC reviews (and revises if necessary), the student's multi-year course of study as outlined in the Individual Learning Plan (ILP).

Transition Services (16) Editor (applicable to 2009 KY IEP 16+):

Postsecondary Goal(s), Transition Services and Agency Res Postsecondary Goal(s) Related to Education/Training, Employment, an Independent Living:	ponsibilities nd if needed,
Transition Service:	
	<u>×</u>
Agency Responsible: 🗅	
	~
	~

**Postsecondary Goal:** Required by the student's 16<sup>th</sup> birthday, or younger, if appropriate. The ARC develops postsecondary goal in the areas of 1) education/training; 2) employment, and if needed, independent living. Postsecondary goals must be measurable and intended to occur after the student graduates from high school.

**Transition Service:** Required by the student's 16<sup>th</sup> birthday, or younger, if appropriate, the ARC documents the transition services needed by the student to reasonably enable the student to reach postsecondary goals. Multiple transition services can be documented and numbered.

**Agency Responsible:** List agency responsible for providing transition service. Correspond numbering as to what agency provides the numbered transition service.

Transfer of Rights Editor:



Enter the date that the student and parent were informed of reaching the age of majority rights, making sure to do so at an ARC meeting at least one year prior to the student's 18<sup>th</sup> birthday.

For changes to an IEP, reference Addendum to the IEP Process HERE

1G Conference Summar
Campus Path: Student Information   Special Ed   Documents Tab
Click New Document from the New Document Wizard
Summary Team Members Documents Contact Log
Documents List
Check the box next to 'Create new Conference Summary Report / Evaluation Check the box next to the appropriate Conference Summary Click the <b>Create Document</b> button
Summary Team Members Documents Contact Log
Create New Conference Summary Report / Evaluation / Consent: Initial Referral, Reevaluation, Eligibility, Disciplinary Review, IEP Review, Placement and Consent
Conference Summary
Conference Summary Referral - Initial
KY Consent
Create New Plan: Goals and Objectives, Services, Accommodations, Transition, and Other Information
Create New Progress Report: Report measurable progress against ongoing Plan Goals
Create New Simple Form: Notices, checklists, and supplemental forms
Create KY Summary Report:
DOCUM ENT SELECTED FOR CREATION: (no document selected)
Create Document Cancel
<ul> <li>Conference Summary Referral – Initial - this document should be used to document receipt and review of a Referral for special education and for Initial ARC meetings.</li> </ul>
• <i>Conference Summary</i> – this document should be used for all other ARC meetings including but not
limited to meetings for the purposes listed below:
• Reevaluation Plan • Eligibility/Continued Eligibility
<ul> <li>Disciplinary Review</li> </ul>
<ul> <li>IEP developed/revised</li> </ul>
<ul> <li>Placement options and decisions</li> </ul>

To create a Conference Summary the editors listed below require data entry upon saving/locking the document. (The Conference Summary should be locked as described on the following page prior to saving.)

- ARC Header
- Student Demographics
- Basis for ARC Decisions
- Parent Concerns and Input
- Other Factors
- Admission and Release Committee Members

Use the Save or Save and Continue function to navigate through the editors:

- Save saves data entered and user remains on current editor
- Save and Continue saves data entered and navigates user to the next editor, you only have to navigate to the editors mentioned above and the editor required based on purpose selected on the ARC Header editor.

As user navigates through the editors and saves data in each editor, the editor will be displayed in **bold** font.



**ARC Date:** Enter the Date of the Admissions and Release Committee meeting. This field auto-populates with the date the document was created.

NOTE: The document will be saved in the year based on the ARC Date entered. This date will display beside the document name on the documents display tree.

**Summary Complete:** Once meeting has concluded and the Conference Summary is complete, selecting this checkbox **LOCKS** the Conference Summary once it is saved.

**Purpose of the Meeting:** Select the purpose of the meeting, multiple options can be selected (selection required):

- Reevaluation Plan
- Eligibility/Continued Eligibility
- Disciplinary Review
- IEP Developed/Reviewed/Revised
- Placement Options and Decisions

NOTE: The Purpose of Meeting will display next to the ARC Date beside the document name on the documents display tree.

NOTE: When a purpose is selected from list above, data entry is required in specific editors based on the purpose of the meeting before the document can be locked.

**Eligibility Determination Date:** this is a *read only* field populated from the eligibility determination date entered on the Eligibility/Continued Eligibility editor, if appropriate.

### **Student Demographics Editor:**

Student Demographics			
Note: At the point the plan is gene	erated, a snapshot of	the student data is taker	n. To get a
fresh copy, click the button below	ν.		
F	Refresh Student Infor	mation	
Last Name	<u>First Name</u>	Middle Name	Suffix
	-		
Race, Ethnicity	Gender	Birthdate	
6 : White	М	04/27/1995	
Student Address			
P.O. BOX 64 SCALF, KT 40962			
School Name	School Phone	Student Number	Grade
Knox Central High School	(555)381-4931		10
Primary Disability, if currently iden	ntified		
Speech Language			

**Refresh Student Information:** Demographic data will be populated/updated with Census data

Primary Disability auto populates from the student's current, locked Conference Summary | Eligibility/Continued Eligibility editor, if applicable.

Basis for ARC Decisions I	Editor:		
Basis for the ARC Decisions DESCRIPTION OF EACH EVALUATION PA REPORT USED AS BASIS FOR THE ARC I considered.	ROCEDURE, TEST, RECORD, OR DECISIONS. The following items were		
Written Assessment Report Date:			
Student Progress in Achieving IEP Go	als		
Functional Vision/Learning Media Assessment	Vision Evaluation		
Orientation and Mobility Assessment	Braille Skills Inventory		
Intervention Data	Referral		
Developmental History	Educational History		
Vision Screening	Hearing Screening		
Health Screening	Communication Screening		
Academic Performance Screening	Cognitive Screening		
Social/Emotional Competence creening	Motor Screening		
Voice Evaluation	Augmentative Comm.		
	Assessment		
Oral Mechanism Evaluation	Fluency Evaluation		
	Assessment		
Expressive Language Assessment	Speech Sound Production	Health/Medical Evaluation or Statemer	t 🔲 Motor Abilities
3	Assessment	Physical Therapy Assessment	Occupational Therapy Assessment
Hearing Evaluation		Assistive Technology Evaluation	Perceptual Abilities Assessn
		Social/Cultural Factore	Adaptive Behavior Scale
		Behavior Rating Scales	Social Competence Assessn
			(Emotional/Behavioral)
		Discipline Referral(s)	Behavioral Data/Logs
		Functional Behavior Assessment (FB	A)
		Behavior Observations	
		Individual Family Service Plan (IFSP)	
		Cognitive/Intellectual Assessment	
		Developmental Assessment	Academic Performance Assessment
		Individual Learning Plan (ILP)	Technical Vocational
		Multi-Year Course of Study	Assessment
		Parental Input (Specify in Document Parent Concerns and Input section)	
		Other Data: (Specify Below if Any)	

**Description of each Evaluation...:** Check appropriate box for each evaluation procedure, test, record, or report used as a basis for proposed or refused action discussed

NOTE: If Written Assessment Report Date selected, date is required

A selection in this editor is required.

#### **Parent Concerns and Input Editor**

Document Parent Concerns and Input	
	*
	-

Provide a summary of parent concerns or input (this is a scroll textbox - unlimited characters)

Data entry in this editor is required.

Initial Evaluation Editor (only available on the Conference Summary Referral – Initial document)

ODTIONALA OTIONA CONCIDERED AN	
OPTIONS/ACTIONS CONSIDERED AN	D REASONS FOR THE DECISIONS:
Complete all applicable sections based	on the purpose of the meeting. Explain ake action, providing documentation for the
reasons for those decisions in the sec	tion below, in the notes section, and
through appropriate attachments.	
Suspected Disability: (Place a cheo	k for each suspected disability)
Autism	Multiple Disabilities
Deaf-Blindness	Orthopedic Impairment
Developmentally Delayed	Other Health Impairment
Emotional-Behavioral Disability	Specific Learning Disability
Functional Mental Disability	Speech or Language Impairment
Hearing Impairment	Traumatic Brain Injury
Mild Mental Disability	Visual Impairment
No Disability Suspected	
Description of Action(a)	
	Constant in Frankrik (Pranishola Frank)
An evaluation will be conducted (s	see Consent to Evaluate/Reevaluate Form).
An evaluation will not be conducte	30.
A debit and interview to an use it has income	
Additional interventions will be imp	elemented in the area(s) of (Specify)
Additional interventions will be imp	elemented in the area(s) of (Specify)
Additional interventions will be imp	elemented in the area(s) of (Specify)
Additional interventions will be imp	elemented in the area(s) of (Specify)
Additional interventions will be imp	elemented in the area(s) of (Specify)
Additional interventions will be imp	elemented in the area(s) of (Specify)
Additional interventions will be imp	elemented in the area(s) of (Specify)
Additional interventions will be imp Other: (Specify) Reason(s) for Decision: Review of referral information, inc suspected disability and the need for a	lemented in the area(s) of (Specify)
Additional interventions will be imp Other: (Specify) Reason(s) for Decision: Review of referral information, inc suspected disability and the need for a Review of referral information, inc	luding all existing data, supports a full evaluation.
Additional interventions will be imp	lemented in the area(s) of (Specify)
Additional interventions will be imp Other: (Specify) Reason(s) for Decision: Review of referral information, inc suspected disability and the need for a Review of referral information, inc suspected disability nor the need for a Additional information is required p	luding all existing data, supports a full evaluation. luding all existing data, does not support a full evaluation. rior to acting on the referral.
Additional interventions will be imp Other: (Specify) Reason(s) for Decision: Review of referral information, inc suspected disability and the need for a Review of referral information, inc suspected disability nor the need for a Additional information is required p Other: (Specify)	luding all existing data, supports a full evaluation. luding all existing data, does not support a full evaluation. rior to acting on the referral.
Additional interventions will be imp Other: (Specify) Reason(s) for Decision: Review of referral information, inc suspected disability and the need for a Review of referral information, inc suspected disability nor the need for a Additional information is required p Other: (Specify)	luding all existing data, supports a full evaluation. Iuding all existing data, does not support a full evaluation. rior to acting on the referral.
Additional interventions will be imp Other: (Specify) Reason(s) for Decision: Review of referral information, inc suspected disability and the need for a Review of referral information, inc suspected disability nor the need for a Additional information is required p Other: (Specify)	lemented in the area(s) of (Specify)

Suspected Disability: Select if the child will be initially evaluated. Check the box for each suspected disab (Check all that apply) User cannot select a Suspected Disability AND No Disability Suspected	oility
User cannot select a suspected Disability AND No Disability Suspected	
<b>Description of Action:</b> Select the appropriate description of action proposed or refused User can select only one option	
<b>Reason for Decision(s):</b> Select why the district proposed or refused to take action	
A selection in each of the three (3) sections above is required to complete and save this editor.	
If either of the 'Other: (Specify)' checkboxes are selected, data entry is required in the textbox.	
Reevaluation Plan Editor	
Reevaluation Plan	
Do Not Print	
OPTIONS/ACTIONS CONSIDERED AND REASONS FOR THE DECISIONS: Complete all applicable sections based on the purpose of the meeting. Explain why the ARC proposes or refuses to take action, providing documentation for the reasons for those decisions in the sections below, in the notes section, and through appropriate attachments.	
The ARC reviewed existing data as outline in Section I, including but not limited	
<ol> <li>Evaluations and information provided by parents;</li> </ol>	
2. Current classroom-based assessments and observations; and	
<ol> <li>Observations by teachers and related services providers.</li> </ol>	
(1) The ARC has decided that additional information (See Consent to	
Evaluate/Reevaluate Form) is needed to determine: (Check all that apply)	
If the student continues to have a disability.	
If the student continues to need special education.	
The present level of academic and functional performance and educational needs of the student.	
Any additions or modifications to the special education and related services needed to enable the student to meet the goals set out in the IEP and to participate, as appropriate, in the general curriculum.	
OR, (2) The ARC decided that	
Current data is sufficient. OR	
A formal evaluation as requested by the parent will be conducted. (See Consent to Evaluate/Reevaluate Form).	
The parents have been informed of these decisions.	
Notes	
Make appropriate selections based on Reevaluation meeting.	
<u>When</u> 'Reevaluation Plan' is the selected Purpose for the meeting, the user must select either (1) <b>OR</b> (2) <b>AN</b> click the checkbox for 'The parents have been informed of these decisions'.	D
The 'Do not Print' checkbox should be selected when the purpose of the meeting does not include 'Reevalua' Plan' <b>AND</b> the user prefers the section to not print.	ition
Notes that are entered within this editor will be printed within the <b>Summary Notes</b> section under a header la	ıbeled

2012-2013 Data Standards for Special Education Page 44

## **Eligibility/Continued Editor**

Eligibility/Continued Eligibility  Do Not Print OPTIONS/ACTIONS CONSIDERED AND REASONS FOR THE DECISIONS: Complete all applicable sections based on the purpose of the meeting. Explain why the ARC proposes or refuses to take action, providing documentation for the reasons for those decisions in the sections below, in the notes section, and through appropriate attachments.  Eligibility/Continued Eligibility: Document the ARC decision regarding the determination of the student's eligibility for special education and related services and reasons for the decision on the appropriate Eligibility Determination form(s). (Note: For Multiple Disabilities, complete a separate form for each underlying disability category.) *Date of Eligibility Determination
<ul> <li>Do Not Print</li> <li>OPTIONS/ACTIONS CONSIDERED AND REASONS FOR THE DECISIONS: Complete all applicable sections based on the purpose of the meeting. Explain why the ARC proposes or refuses to take action, providing documentation for the reasons for those decisions in the sections below, in the notes section, and through appropriate attachments.</li> <li>Eligibility/Continued Eligibility: Document the ARC decision regarding the determination of the student's eligibility for special education and related services and reasons for the decision on the appropriate Eligibility Determination form(s). (Note: For Multiple Disabilities, complete a separate form for each underlying disability category.)</li> <li>*Date of Eligibility Determination Student does not have an educational disability</li> </ul>
OPTIONS/ACTIONS CONSIDERED AND REASONS FOR THE DECISIONS: Complete all applicable sections based on the purpose of the meeting. Explain why the ARC proposes or refuses to take action, providing documentation for the reasons for those decisions in the sections below, in the notes section, and through appropriate attachments. Eligibility/Continued Eligibility: Document the ARC decision regarding the determination of the student's eligibility for special education and related services and reasons for the decision on the appropriate Eligibility Determination form(s). (Note: For Multiple Disabilities, complete a separate form for each underlying disability category.) *Date of Eligibility Determination Student does not have an educational disability
Eligibility/Continued Eligibility: Document the ARC decision regarding the determination of the student's eligibility for special education and related services and reasons for the decision on the appropriate Eligibility Determination form(s). (Note: For Multiple Disabilities, complete a separate form for each underlying disability category.) *Date of Eligibility Determination Student does not have an educational disability
determination of the student's eligibility for special education and related services and reasons for the decision on the appropriate Eligibility Determination form(s). (Note: For Multiple Disabilities, complete a separate form for each underlying disability category.) *Date of Eligibility Determination Student does not have an educational disability
*Date of Eligibility Determination Student does not have an educational disability
The sequising appoint education and related apprices
requiring special education and related services.
Primary Disability Student does not meet eligibility criteria for an
<ul> <li>additional disability.</li> </ul>
For students identified as Multiple Disabilities document the underlying disabilities below:
Laderbring Disability (A) Laderbring Disability (P)
Underlying Disability (C) Underlying Disability (D)
· · ·
Notes:
A
-

**Date of Eligibility Determination:** Enter month, day and year of the last date that eligibility for services was determined by the ARC.

- This date will auto populate to the students most recent Date of Eligibility Determination regardless of the purpose selected.
- This date will populate as a Read Only field on the ARC Header Editor.
- This date will also calculate the Reevaluation Date of the student on various reports within Infinite Campus and the *IDEA December 1 Child Count*.

Student does not have an educational disability requiring special education and related services. Check if appropriate

**Student does not meet eligibility criteria for an additional disability**. Check if a student is currently eligible for one category and is tested for a second category, but does not qualify for the second category. (EX: Student is eligible for SL and they are tested for SLD. However, they do not qualify for SLD, but remain eligible for Speech.)

Note: if this box is checked then you leave the original Primary Disability and original Date of Eligibility Determination in their respective fields.

**Primary Disability:** The Primary Disability will auto populate with the most recent P.D. regardless of the purpose of the meeting. From the drop list, select the appropriate category of disability for student. *If Multiple Disabilities selected as Primary Disability at least two Underlying Disabilities must be selected* 

• The students Primary Disability will auto populate from the students previous Conference Summary regardless of the purpose selected.

NOTE: Data elements in this area should be completed based on appropriate disability eligibility form. Once document saved and locked any subsequent KYIEP, KY Private School Plans and fields will populate with selection.

A selection from the Primary Disability drop list **OR** the checkbox of Student does not have an educational disability...MUST be made if Eligibility/Continued Eligibility is selected as Purpose of Meeting.

Code	Disability
01	Mild Mental Disability
02	Functional Mental Disability
04	Hearing Impaired
05	Speech Language
06	Visually Impaired
07	Emotional Behavior Disability
08	Orthopedically Impaired

Code	Disability
09	Other Health Impaired
10	Specific Learning Disability
11	DeafBlind
12	Multiple Disabilities
13	Autism
14	Traumatic Brain Injury
15	Developmentally Delayed

NOTE: The location of this field is the data owner of Primary Disability and will populate the IDEA December 1 Child Count

The 'Do not Print' checkbox should be selected when the purpose of the meeting does not include 'Eligibility/Continued Eligibility' **AND** the user prefers the section to not print.

Notes that are entered within this editor will be printed within the **Summary Notes** section under a header labeled as the Editor Name.

IEP Developed/Reviewed/Revised Editor		
	IEP Developed/Reviewed/Revised	
	Do not print if meeting was to review a referral only	
	OPTIONS/ACTIONS CONSIDERED AND REASONS FOR THE DECISIONS: Complete all applicable sections based on the purpose of the meeting. Explain why the ARC proposes or refuses to take action, providing documentation for the reasons for those decisions in the sections below, in the notes section, and through the appropriate attachments.	
	Individual Education Program developed/reviewed/revised	
	(A new IEP must be developed at least annually for continued eligibility).	
	An Individual Education Program has been developed, reviewed, or revised.	
	An Individual Education Program has been reviewed and remains appropriate until Annual Review.	
	An Individual Education Program has NOT been developed, reviewed, or	
	revised.	
	Notes	
	· · · · · · · · · · · · · · · · · · ·	

#### Select the appropriate checkbox as to the status of the IEP

A selection MUST be made if IEP Developed/Reviewed/Revised is selected as the Purpose of the Meeting.

The 'Do not print if meeting was to review a referral only' checkbox should be selected when the purpose of the meeting does not include 'Develop/Review/Revise the IEP' **AND** the user prefers the section to not print.

Notes that are entered within this editor will be printed within the **Summary Notes** section under a header labeled as the Editor Name.

### **Placement Options and Decisions Editor**

Placement Options and Decisions
Do Not Print
Placement Options and Decisions: Based on the review of assessment data and the completed IEP, the ARC discussed the following placement option(s):
Placement Option Considered
Full time general education environment (Participation only in the regular education environment, including classes with co-teaching)
Accepted:
Yes No
Reason Accepted/Rejected
Part-time general education and Part-time special education environment. (Participation in regular education, which may include co-teaching, and special education environments; any time the student is removed from regular education, regardless of the amount of time)
Accepted:
Yes No
Reason Accepted/Rejected
environment; no participation with non-disabled peers for any part of school day)
Accepted:
Yes No
Reason Accepted/Rejected
Consideration of Potential Harmful Effects
There are no notential harmful effects of the placement on the child or on the
quality of services needed by the child.
Potential harmful effects identified and modifications to compensate are
outlined below:
Notes

**Placement Option Considered:** Document discussion for placement options 'Accepted' (Yes) or 'Rejected' (No) and reason for accepting or rejecting the specific placement option. Select placement option based on the services described in the child's IEP and the ability to provide these options in the least restrictive environment possible with the child's non-disabled peers.

This editor should be progressed through starting with the **first** placement option:

- If 'Yes' selected, enter the reason accepted and then proceed to the Consideration of Harmful Effects.
- If 'No' selected enter the reason rejected and proceed to the **second** placement option.
- If 'Yes' selected on **second** placement option, enter the reason accepted and then proceed to the Consideration of Harmful Effects.
- If 'No' selected enter the reason rejected and proceed to the **third** placement option.
- If 'No' selected on placement option one and two, yes must be selected for **third** placement with reason accepted entered.

NOTE: Once a selection of YES and reason accepted entered, no other data entry will be accepted.

**Consideration of Potential Harmful Effects:** If determining placement, document any potentially harmful effects on the child or the quality of services.

A selection of yes for one of the placements must be made if Placement Options and Decisions was the selection for the Purpose of the Meeting.

A selection of Consideration of Potential Harmful Effects must be made if Placement Options and Decisions was the selection for the Purpose of the Meeting.

The 'Do not Print' checkbox should be selected when the purpose of the meeting does not include 'Placement Options and Decisions' **AND** the user prefers the section to not print.

Notes that are entered within this editor will be printed within the **Summary Notes** section under a header labeled as the Editor Name.

Notice of Graduation or Aging-Out Editor
Notice of Graduation or Aging Out
Do Not Print
IV. NOTICE OF GRADUATION OR AGING OUT: (for students beginning at age 16 or younger if appropriate)
The ARC anticipates the student will NOT require longer than 4 years of high school to graduate.
The ARC anticipates the student will require longer than 4 years of high school to graduate.
The ARC anticipates that the student will graduate within the next twelve (12) months.
The student has been provided with a summary of academic and functional performance including recommendations on how to assist the student in meeting his or her post secondary goal(s).
Based on the student's birth date, the student will age-out and no longer be eligible for services on:
Notes
~
Notice of Creduction or Aging Out: Reginning when student is age 16 or younger, the APC should decument
the student's graduation plan or date of reaching maximum age.
If a secont is selected the student's $21^{st}$ birthdate must be entered
The 'Do not Print' checkbox should be selected when the purpose of the meeting does not include 'Notice of Graduation or Aging Out' <b>AND</b> the user prefers the section to not print.
Notes that are entered within this editor will be printed within the <b>Summary Notes</b> section under a header labeled as the Editor Name.
Disciplinary Review Editor
Disciplinary Review           Do Not Print
Disciplinary Review (Complete Manifestation Determination Form, if applicable)
Notes
Select if a Disciplinary Review is the purpose of the meeting
The 'Do not Print' checkbox should be selected when the purpose of the meeting does not include 'Disciplinary
Review' <b>AND</b> the user prefers the section to not print.

Notes that are entered within this editor will be printed within the **Summary Notes** section under a header labeled as the Editor Name.

2012-2013 Data Standards for Special Education Page 50

Medicaid Editor	
Medicaid	
Do Not Print	
Annual written notice was provided to the parent in order to submit claim for Medicaid Reimbursement.	S
In addition to covered services on the student's IEP and/or covered evaluations outlined through evaluation planning, collateral services will be provided by qualified providers as needed.	
Student is not eligible for Medicaid.	
Notes	
	*
	-

Document the appropriate action(s) when a student is eligible for Medicaid services

The 'Do not Print' checkbox should be selected when the purpose of the meeting does not include 'Medicaid' **AND** the user prefers the section to not print.

Notes that are entered within this editor will be printed within the **Summary Notes** section under a header labeled as the Editor Name.

#### **Other Factors Editor**

Other Factors Relevant to the Action	
Identified factors relevant to the action as follows (if any) specified below.	
New Mertine	
Identified factors relevant to the action as follows:	
1	
	^
	Ŧ

Document Identified factors relevant to the action:

Select None Identified, if appropriate

Select **Identified factors relevant to the action** if appropriate. If selected, factors must be documented in the textbox

A selection in this editor is required.

Notes that are entered within this editor will be printed within the **Summary Notes** section under a header labeled as the Editor Name.

Admissions and Release Committee Members Edi	tor
User must click on Add Team Meeting New Team Meetin	
Admissions and Release Committee Members Thave been advised, in my native language, and Lunderstand the contents of this notice. I have a copy and have received an explanatio of my procedural safeguards as parent of a student with a disability of as a student with a disability. I understand that I can receive an additional copy of my procedural safeguards, a further explanation of my rights, or assistance in understanding the content of this notice by contacting the student's school or the Director of Special Education.	n r
*Names of Student Representative(s)	_
(	
Parent participated via alternate means.	
*(if age 18 or older or younger if appropriate)	
Parents did not attend meeting.	
Date	
A copy of Parent Rights, if necessary, and appropriate Due Process forms were:	
Mailed     Delivered by school personnel     Sent home with student     Emailed	
Sent by fax	
<b>Names of Student Representative(s):</b> Enter names of per <i>This is a required field</i>	- rson(s) in attendance as the representative of student.
Parents participated via alternate means: Check if app	licable
Parents did not attend meeting: Check if applicable	
<b>Date:</b> Enter date in which Parent Rights and appropriate 1	Due Process forms were distributed
Select means in which Parent Rights and appropriate Due	Process forms were distributed: at least one selection is
required.	rocess forms were distributed, at reast one selection is
Admissions and Release Committee Members Attendance	1
Editor Dole	
X	
Add New Attendee	

Enter Name and Role of each attendee present. Use the Add New Attendee to enter each attendee.

Name: Enter name of attendee

**Role:** Enter role of attendee

Obtain signatures of all committee members in attendance of the ARC meeting.

## **Summary Notes Editor**

Notes that are entered within each previous editor will be displayed under a heading of that editor within the printed Notes section of the Conference Summary. Summary Notes will print in the order the notes are entered on the specified editors followed by any notes entered on the 'Summary Notes' editor.

### **Additional Information:**

1 COPY feature is not available for use on Conference Summary documents.

**2** The Conference Summary documents are displayed under Conference Summaries/Evaluations in the documents list.

1H	KY Consent					
Campus Path: Student Information   Special Education   Documents Tab	Campus Path: Student Information   Special Education   Documents Tab					
Click New Document from the New Document Wizard						
Summary         Team Members         Documents         Contact Log           Open         Cock/Unlock         Copy         Delete         Print         New Document         Upload Document						
Check the box next to 'Create new Conference Summary Report / Evaluation / Consent:						
Check the box next to KY Consent						
Click the Create Document button						
Summary Team Members Documents Contact Log						
Create New Conference Summary Report / Evaluation / Consent: Initial Referral, Reevaluation, Eligibility, Disciplinary Review, IEP Review, Placement and Consent						
Conference Summary						
Conference Summary Referral - Initial KY Consent						
Create New Plan: Goals and Objectives, Services, Accommodations, Transition, and Other Information						
Create New Progress Report: Report measurable progress against ongoing Plan Goals						
Create New Simple Form: Notices, checklists, and supplemental forms						
Create KY Summary Report:						
DOCUM ENT SELECTED FOR CREATION: (no document selected)						
Create Document Cancel						

2012-2013 Data Standards for Special Education Page 54

#### **Consent Editor:**

NOTE: Duplicate Instructions have been added for the Consent Editor based upon if the Evaluation Type is an Initial or a Reevaluation. For initial evaluations you check the box for Consent Complete for Reevaluations you do not check the box for Consent Complete.

Initial Evaluations

Consent			
Consent Com	plete		
Evaluation Type		*Notice Date 09/03/2013	
*Date of Consent fo	on Initial Evaluation	*Date of Consent/D	enial for Services
Date of Consent fo	r Reevaluation		
Created Date 09/03/2013	Created By Easter, Nick	Modified Date 09/03/2013	Modified By Easter, Nick

Consent Complete: Check this box only for initial evaluations.

**Evaluation Type: Select Initial.** 

**Notice Date:** The notice date is the date KY Consent form was created. \*Note: This date is required and auto populates with the date the KY Consent was created.

**Date of Consent for Initial Evaluation:** This is the date the Consent to Evaluate/Reevaluate form was signed by the parents to conduct the an Initial Evaluation.

\*Note: This date is required and auto populates from the previouse KY Consent form.

\*Note: This field must be completed to lock lock the form using the **Consent Complete** check box.

**Date of Consent for Services:** This is the date the parent signs the Consent for Special Education and Related Services Form.

\*Note: Though this field is "red" the KY Consent form can be saved and locked without a date being entered.

Date of Consent for Reevaluation: This is the date the parent signs the Consent to Evaluate/Reevaluate form.

Re- Evaluatio	ns		
Consent Com	plete		
Evaluation Type Reevaluation 💌	I	*Notice Date 09/03/2013	
*Date of Consent fo	onjnitial Evaluation	*Date of Consent/D	enial for Services
Date of Consent for	Reevaluation		
Created Date 09/03/2013	Created By Easter, Nick	Modified Date 09/03/2013	Modified By Easter, Nick

Consent Complete: Leave this box unchecked for Reevaluation.

Note: if the Date of Consent for Initial Evaluation is known and is entered in the date field then you can check the box for Consent Complete

**Evaluation Type: Select Reevaluation.** 

**Notice Date:** The notice date is the date KY Consent form was created. \*Note: This date is required and auto populates with the date the KY Consent was created.

**Date of Consent for Initial Evaluation:** This is the date the Consent to Evaluate/Reevaluate form was signed by the parents to conduct the an Initial Evaluation.

\*Note: This date is required and auto populates from the previouse KY Consent form.

\*Note: This field must be completed to lock lock the form using the **Consent Complete** check box.

**Date of Consent for Services:** This is the date the parent signs the Consent for Special Education and Related Services Form.

\*Note: Though this field is "red" the KY Consent form can be saved and locked without a date being entered.

Date of Consent for Reevaluation: This is the date the parent signs the Consent to Evaluate/Reevaluate form.

Click save and continue button Save & Continue

-	Student Demographics Editor:				
	Student Demographics Note: At the point the plan is generated, a snapshot of the student data is taken. To get a fresh copy, click the button below.				
		Refresh Student Info	rmation		
	Last Name Easter	First Name Nick	Middle Name	Suffix	
	Race, Ethnicity 6 : White	Gender M	Birthdate 04/02/1996		
	Student Address P.O. Box 554 HEIDRICK,	KY 40949			
	School Name Knox Centrail High Schoo	School Phone 5/ (555)489-4560	Student Number 1952375143	Grade 11	
	Primary Disability, if curren Other Health Impaired	ntly identified			

1. Click the "Refresh Student Information" button.

Refresh Student Information: Demographic data will be populated/updated with Census data

Primary Disability auto populates from the student's current, locked Conference Summary | Eligibility/Continued Eligibility editor, if applicable.

Click save and continue button

#### **Evaluations Editor:**

The Evaluations Editor is the Evaluation Planning section (page 1) of the Consent to Evaluate/Reevaluate Form. In this editor FOR EACH EVALUATION (INITIAL OR REEVALUATION), mark 'X' for the assessment components determined to be addressed within the multidisciplinary assessment. Mark 'E' if the assessment exists within the educational records of the student and will be considered. Also information about recommendations for student needs and existing reports/assessment data that will be used will go in to the text boxes at the bottom of this editor.

Click save and continue button

EVALUATION (NITIAL OF FEE (1))	IATION) mark W for the approximate and
Jetermined to be addressed within the multidise exists within the educational records of the stu	ua i lony, mark 'A' for the assessment componen ciplinary assessment. Mark 'E' if the assessment ident and will be considered.
Health, Vision, Hearing, and Motor Abilitie	s
X E Medical / Health Evaluation	X E
□ □ Functional Vision / Learning Media	Crientation and Mobility
Assessment Braille Skills Inventory	- Hearing
Fine Motor	Gross Motor
Cccupational Therapy	Physical Therapy
Behavior Observation	Assistive Technology
Academic Performance	
XE	XE
Basic Reading     Basic Reading	Reading Comprehension
Math Reasoning	Oral Expression
Listening Comprehension	Written Expression
Performance-Based Tests	Criterion-Referenced Tests
Curriculum-Based Tests	Behavior Observations
Cother:	Specify Areas:
,	,
X E	хE
Cognitive / Intellectual Assessment	Behavior Observation
Cother:	
,	
Social and Emotional Status X E	XE
Adaptive Behavior / Self-Help	Behavior Observation
Behavior Rating Scale	Functional Behavior Assessment
Cother:	
Communication Status	ХЕ
Receptive Language	Expressive Language
Speech Sound Production	C Voice
Fluency	Oral Mechanism
Hearing     Augmentative Communication	Other:
ocational Evaluation / Transition Needs	
ХE	XE
Vocational Aptitude	Interest Inventory
C C Other:	
Other	
X E	XE
Social and Developmental History	EP Progress Data
T RTI Data	State Assessment Data
ist the recommendations for student needs (e	.g., glasses, hearing aids), any
modifications/adaptations of evaluation instrum	ents, procedures, or settings to be used for the nunication, cultural factors).
ist evisting reports/assessment data, his his	will be used as part of the profit disciplinant
assessment.	

2012-2013 Data Standards for Special Education Page 58

Parent Conse	nt Editor:	
The Parent Con	sent Editor is the Parent Conse	ent section (page 2) of the Consent to Evaluate/Reevaluate Form.
	Darant Concent	
	Parent Consent	
	Person Granting Consent	Relationship to student
	Suspected Disability	<b>T</b>
	Suspected Disability 2	
	Suspected Disability 3	
	The parent agrees for evaluation in ear indicated below :	ch of the ARC selected areas for assessment
	- Health	Vision
	Hearing	Social and Emotional Status
	General Intelligence	Academic Performance
	Communication Status	Motor Abilities
	Vocational Evaluation	Functional Vision / Learning Media
	Other (specify):	Other (specify):
	Parental Consent	
	Parent gives consent for full evalu	uation in the area(s) above.
	For reevaluation, parent acknowle	edges there is no additional data needed.
	Parent does not give consent.	
	Consent to Pecaive Services	
	Consent to Receive Services	
	Revocation / Denial of Consent	
<b>Person</b> to the fe	<b>Granting Consent:</b> Type the ollowing text box.	name of the person granting consent for evaluation/reevaluation in
Relatio	onship to Student: Select the r	relationship of the Person Granting Consent to the student.
<b>Suspec</b> For a re	ted Disability: evaluation select the appropria	ate disability from the drop down menu.
If an in	itial evaluation then select the	suspected disability from the drop down menu.
Suspec	ted Disability 2-3:	
For a re	evaluation leave these options	blank.
If an in	itial evaluation then select add	itional suspected disabilities from the drop down menu.

	Agreement of Assessment areas check boxes: Place a check box in each of the ARC selected areas for assessment that the parent has agreed to for evaluation.
	<b>Parent Consent Options:</b> Parental consent options are selected for consent for evaluation. Select only one of the following options.
	<b>Consent to Receive Services Options:</b> select one of the following options if the parent either choses to consent for their child to receive services or if the parent revokes or denies consent to receive services.
1)	Click the "Save" button
2)	To lock the document you must click on the "Documents" Tab to get to the main screen
3)	Click on the KY Consent Form so that it is highlighted
,	Summary Team Members Documents Contact Log
	☆Open 🔐 Lock/Unlock 🗈 Copy 🗙 Delete 🔿 Print 🖹 New Document ☆Upload Document
	Documents List
	⊢
	2011 KY-IEP 16+ (10/03/2011-10/02/2012)
	Conference Summaries / Evaluations / Consent (2)
	KY Consent (06/07/2013)

2012-2013 Data Standards for Special Education Page 60

1I	Private School Service Plan
Campus Path: Student Information   Special Education   Doct	ments Tab
Kentucky Administrative Regulations: 707 KAR 1:370	
• A private school child with a disability does not have the indirelated services that he/she would receive if enrolled in a public	idual right to receive all of the special education and school.
• A private school child with a disability may receive a different enrolled in public schools. These services are specified on a Se	amount of services than children with disabilities vice Plan, not an IEP.
• When a parent decides to place his child with a disability in a appropriate public education the district is not required to pay f	private school after the district offered a free and or the cost of the private education.
• Parents may file a state-level complaint if the district failed in eligibility for private school children with disabilities. Parents i issues, such as failure to provide services contained in a Service	its responsibilities to evaluate and determine ay not file state-level complaints on other IDEA Plan.
• Services provided to a private school child with a disability m	y be provided at a site determined by the district.
<b>Create New Form:</b> from the drop list, select the Private School S	ervice Plan
Service Plan Editor	_
Plan Completed	
*Meeting Date *End Date *End Date	
09/09/2011 09/08/2012	
Plan Completed: Once Service Plan is complete, selecting this c Service Plan complete and considered official and current	neckbox LOCKS the PSP and thus makes the
Meeting Date: Enter the date the Admissions and Release Comm	ittee met to develop the current Service Plan
<b>Start Date:</b> Enter the date in which the Service Plan starts and se	rvices begin.
<b>End Date:</b> Enter the date in which the Service Plan is due to be r	eviewed. This field will be auto populated, one
year minus a day from the Meeting Date entered.	

#### **Student Demographics Editor** Student Demographics Note: At the point the plan is generated, a snapshot of the student data is taken. To get a fresh copy, click the button below. Refresh Student Information Last Name First Name Middle Name Suffix Race, Ethnicity Gender Birthdate 6 : White М 04/27/1995 Student Address P.O. Box 64 SCALF, KY 40982 School Name School Phone Grade Student Number Knox Central High School (555)381-4931 10 Primary Disability, if currently identified Speech Language

Refresh Student Information: This will populate demographic data from Census

#### **Enrollment Status Editor**

Enrollment Status
Note: At the point the plan is generated, a snapshot of the student data
is taken. To get a fresh copy, click the button below.
Get Special Ed Information from Enrollment
Get Disability from Evaluation
The editable values will change the values in the PSP and it will update
the special ed status values in any enrollments that intersect the dates
of the plan. The update of the enrollment will only occur when the plan
is marked completed.
State ID
1952592106
Primary Disability
07: Emotional Behavior Disability
·····,
Special Ed Status
A: Active 👻
Special Ed Setting
6A:(age 6-21) >80% of day in general ed programs 👻
Resident District
: · · · · · · · · · · · · · · · · · · ·
District of Placement
301: Knox County
Private School Placement
Home Primary Language
1380: Spanish

**Primary Disability:** Click 'Get Disability from Evaluation' button to auto-populate the Primary Disability as *Read only* from student's Conference Summary | Eligibility/Continued Eligibility Editor. Code descriptions can be found <u>HERE</u>.

**\*Special Ed Status:** From the drop list, select the option that defines the student's status within the special education process at a specific school location and assists in the determination as to whether this student will be included in the school's December 1<sup>st</sup> Child Count.

Code	Title	Description
А	Active	Student is actively enrolled in special education
AR	Active/Referred	Student is already enrolled in special education and is being referred for another reason (e.g., student currently identified as Speech or Language Impaired and in the reevaluation process for another categorical disability area).
ER	Eligible – Parent Refused	Student eligible for special education services; however, parent refused services.
I	Inactive	Student no longer receives special education services (e.g., withdrawal, graduation, dropped out, exiting from Special Education services).
N	Not Eligible	Student was tested and determined not eligible to receive services
PR	Pre-Referral	Optional status designation to be used when school desires to track non-special education student in the intervention process
Z	Referred	Non-special education student is being referred for testing.

**\*Setting:** From the drop list, select the appropriate LRE description. LRE settings are based upon student's age as of December 1st.

Code		Description
3A1	10 hours or more in a regular early	Majority of special education and related services provided <b>within</b> the early childhood program
3A2	childhood program per week	Majority of special education and related services provided <b>in another</b> <b>location</b>
3B1	Less than 10 hours in a regular early	Majority of special education and related services provided <b>within</b> the early childhood program
3B2	childhood program per week	Majority of special education and related services provided <b>in another</b> <b>location</b>
<b>3</b> F		Residential Facility
3P	Special Education Program	Service Provider Location
38		Separate Class
<b>3</b> U	Separate School	
<b>3X</b>	Home	

	Ages 6-21
Code	Description
6J	Parentally Placed in Private School

NOTE: The only valid Setting for a student age 6-21 is 6J: Parentally Placed in Private School

**Resident District:** Auto-populates from Enrollment | State Reporting Fields; select from drop list the district in which the student resides (where they live)

District of Placement: Auto-populates district name in which the service plan is created

Private School Placement: Enter the private school in which the student receives general education

Parent/Guardian Demographics Editor
Parent/Guardian Information Note: At the point the plan is generated, a snapshot of the student data is taken. To get a fresh copy of the guardian information, click the button below.
Refresh Guardian Information
Parent/Guardian comes from the census system and the only people listed here are marked as guardians of the student's current household, or direct guardians to the student through the relationship.
<b>Refresh Guardian Information:</b> This will populate parent/guardian demographics from the student's current household/relationship
Proposed Action Editor
Proposed Action <ul> <li>Continue Services Plan</li> <li>Discontinue Services Plan</li> <li>Develop New Services Plan</li> </ul>
Proposed Action: Upon review of the service plan, select the appropriate action as decided by ARC
Goals and Objectives Editor
Goal Editor Goal Name: Annual Goal: Hit CTR- Area: Enter the Content Area for the specified goal
<b>Annual Goal:</b> Enter statement of anticipated results to be achieved in a calendar year or less as determined by the ARC

Services Editor:				
Private School Service Plan Edito	Г			
*Service				
Special Education		*		
Service Provider				
		4		
Service Position				
SPECIAL EDUCATION TEACHER		4		
Location:				
Private School				
*Start Date:			*End Date:	
09/09/2011			09/08/2012	
*Minutes per Service Frequency 3	0		*Service Frequency	3
*Service Period	veek 💌			

Service: Select from drop list Special Education

**Service Position:** Select the position of each person responsible for implementing the services from the service position drop list.

NOTE: Do not select from the Service Provider drop list. Selection will not print on the service plan and should be removed via System Administration | Special Ed | Service Providers

**Location:** Identify the setting (i.e., regular classroom, special classroom, community) in which the service(s) will be provided.

Start Date: Enter the date in which services begin

End Date: Enter the date in which services are anticipated to end

**Minutes per Service Frequency:** List the number of minutes the service will be provided per session in each Service Period. This may be an approximation of time in terms of minutes, hours, or blocks of time, but <u>may not</u> be a range of time. Service Minutes does not equal total minutes; it is a subset of total minutes of class time.

Service Frequency: List the number of times the service will be provided in a Service Period.

Service Period: Identify the Service Period as daily, weekly, monthly, or annually

Team Meeting Editor | New Team Meeting

Person Atten	ding Meeting Editor	
Parent /	Role	Name
Guardian		
X 🗆 👘		
Add New A	Attendee	

Enter Role and Name of meeting participants, if parent/ guardian select indicator

**1**J

## Campus Path: KY State Reporting

IDEA December 1 Child Count

Due to KDE December 15<sup>th</sup>

Data Element	Data Path		
District Number	System Administration>Resources>District		
	Information>State District Number		
School Number	System Administration>Resources>School>School		
	Editor>School Detail>Location Number		
SSID	Census>People>Person Identifiers>State ID		
Last Name	Census>People>Person Information>Last Name		
First Name	Census>People>Person Information>First Name		
Date of Birth	Census>People>Person Information>Birth Date		
Primary Disability	Student Information>Special Ed>Documents		
	Tab>Enrollment Status Editor>Primary Disability		
Gender	Census>People>Person Information>Gender		
Race/Ethnicity	Census>People>Person Information>Race		
English Proficiency	Student Information>General>LEP Tab>English		
	Proficiency		
Placement (LRE/FAPE)	Student Information>Special Ed>Documents		
	Tab>Enrollment Status Editor>Setting		
Age (as of December 1 <sup>st</sup> )	Census>People>Person Information>Birth Date		
IEP Begin Date	Student Information>Special Education>Documents		
	Tab>KY IEP Plan>Education Plan Editor>IEP Begin		
	Date		
IEP End Date	Student Information>Special Education>Documents		
	Tab>KY IEP Plan>Education Plan Editor>IEP End Date		
Re-evaluation due date	Student Information>Special Education>Documents		
	Tab>Conference Summary>Eligibility/Continued		
	Eligibility Editor > Eligibility Determination Date		
State Grade	Student Information>General>Enrollment>Grade		

# Campus Path: KY State Reporting

Special Education Exit Report Due to KDE July 31<sup>st</sup>

Data Element	Data Path	
District Number	System Administration>Resources>District Information>State	
	District Number	
School Number	System Administration>Resources>School>School	
	Editor>School Detail>Location Number	
SSID	Census>People>Person Identifiers>State ID	
Last Name	Census>People>Person Information>Last Name	
First Name	Census>People>Person Information>First Name	
Date of Birth	Census>People>Person Information>Birth Date	
Primary Disability	Student Information>Special Ed>Documents Tab>Enrollment	
	Status Editor>Primary Disability	
Gender	Census>People>Person Information>Gender	
Race/Ethnicity	Census>People>Person Information>Race	
English Proficiency	Student Information>General>LEP Tab>English Proficiency	
Special Education Exit Status	Student Information>Special Ed>Documents Tab>Enrollment	
	Status Editor>Special Ed Exit Status	
Age (age 14 or older as of	Census>People>Person Information>Birth Date	
December 1 <sup>st</sup> )		

 1L
 KDE Custom Discipline Reports

#### Campus Path: KY State Reporting | KDE Reports |SPED EOY Behavior Data

**Removal Report:** Report of behavior removals of Special Education students from their regular setting; this includes SSP3 (out of school suspension) and INSR (In-School Removal)

**Expulsion Report:** Report of behavior resolutions of SSP1 (Expulsion, Receiving Services) and SSP2 (Expulsion, not Receiving Services). This report includes ALL students (special education and regular education)

Due to KDE July 31<sup>st</sup>

Data Element	Data Path
District Number	System Administration>Resources>District Information>State
	District Number
School Number	System Administration>Resources>School>School
	Editor>School Detail>Location Number
State ID	Census>People>Person Identifiers>State ID
Last Name	Census>People>Person Information>Last Name
First Name	Census>People>Person Information>First Name
Birth date	Census>People>Person Information>Birth Date
Gender	Census>People>Person Information>Gender
Race/Ethnicity	Census>People>Person Information>Race
English Proficiency	Student Information>General>LEP Tab>English Proficiency
Special Ed Status	Student Information>Special Ed>Documents Tab>Enrollment
	Status Editor>Special Ed Status
Primary Disability	Student Information>Special Ed>Documents Tab>Enrollment
	Status Editor>Primary Disability
State Resolution Code=SSP1,	Student Information>General>Behavior Tab
SSP2, SSP3, INSR	
Resolution Length School Days	Calculated field based on Resolution Start and End Timestamp
Resolution Start Time Stamp	Student Information>General>Behavior Tab>Resolution Start
	Date and Time
Resolution End Time Stamp	Student Information>General>Behavior Tab>Resolution End
	Date and Time

# 1M

#### **Campus Path: Student Information | Student Locator**

#### **First Steps Referral Process:**

First Steps is Kentucky's early intervention program that provides services to families with children, age's birth to 3 who have developmental disabilities. This program receives federal funds under the Infants and Toddlers section in Part C of the Individuals with Disabilities Education Act (IDEA). The IDEA also funds programs for preschool and school age children ages 3 through 21 with disabilities under Part B of the Act.

Enroll the student at the school that they will or would attend if they qualify for services

- Student Information | Student Locator
- Enter appropriate search criteria, at minimum first name, last name and gender
- Click on Search for Student

Search for a student air	eady tracked in Campus using the	e fields provided. A min	imum amour	nt of data must	he er
enter the State ID, the St	SN, or the full legal lastName, first	Name and gender. Sele	ect a studen	t from the list o	or clic
SSN-only search, the us	ser must still do a name based se	arch before they are al	lowed to cre	eate a new pei	rson.
_ast Name doe	Name	State ID	Gender	Birth Date	%
First Name income	DOE, JANE		F		100
jane	DOE, JOHN		F	08/28/1964	67
Bender F	Dew, Jeanne Marie	1949321671	F	11/22/1991	33
Birth Date	Diaz, Juana Ibeth	1940719840	F	08/28/1994	33
Middle Name					
State ID	_				
Search					

- Student will most likely not show up in the locator, if not select 'Create New Student'
- This process will create a new State ID for the child

Identity Info			
*Last Name	*First Name	Middle Name	Suffix
Newton	Windy		×
*Gender	*Birth Date	Soc Sec Number	_
Female 💌			
Race/Ethnicity			
*Is the individua	I Hispanic/Latino?		
×			
*Is the individua	I from one or more o	f these races?	
(check all that a	pply)		
American Ir	idian or Alaska Nativ	e	
Asian			
Black or Af	rican American		
Native Haw	aiian or Other Pacifi	c Islander	
White			
*State Race/Eth	nicity		
		*	
Race/Ethnicity D	etermination		

• Enter t	the required da	ta elements		
0	Last Name			
0	First Name			
0	Gender			
0	Birth Date			
0	Race/Ethnici	ty		
😑 General Enrolime	nt Information			
Calendar		Schedule (read only)	*Grade	Class Rank Exclude
11-12 GIRDLER ELEME	ENTARY SCHOO	Main 💌	02 💙	
*Start Date	No Show	End Date	End Action	*Service Type
8/10/2011			×	N: Special Ed Services
*Start Status			End Status	
E01: First enrollment o	f the year	×		<b>*</b>
0	Calendar w	ill default to current	t school calendar	
0	Schedule: If	the school only has	s one schedule struc	sture called Main assign the students to
Ŭ	that schedule	e structure. If the sc	chool had multiple s	structures, the student's must be assigned
	to one sched	ule designated for r	reschool students.	
0	Grade: 95-I	nfant; 96-1 year old	; 97-2 year old; 98-	-3 year old; 99-4 year old, this age is the
	student's age	e as of the October	1 <sup>st</sup> .	
0	Start Date:	Enter the date the st	tudent will be evalu	ated, this date may change later as to the
	date services	begin.		
0	Start Status	: Select E01: First e	enrollment of the ye	ear
0	Enrollment	Status: Select N: S	pecial Ed Services	Only
0	Save			
• Studer	nt Information	General   Enrollmo	ent Tab   State Repo	orting Section
• Select	State Exclude	, , , , , , , , , , , , , , , , , , ,	· 1	C
	te Reporting F			
State B	Exclude			
• Studer	it Information	General   Enrollmo	ent Tab   Special Ec	lucation Section
• Enter s	student's Part (	L ID		
PartC IE	>			
• Upon	Consent from I	Parent		
• Studer	nt Information	Special Education	Documents Tab	
Compl	lete Conferenc	e Summary   Eligib	ility / Continued El	igibility Editor
1				

Elig			
	jibility/Continued Eligibili	ty	
	Do Not Print	ED AND DEACONG FOR THE DECISIONS: Complete of	
app	licable sections based on th	e purpose of the meeting. Explain why the ARC	
prop	ooses or refuses to take act	ion, providing documentation for the reasons for those	
deci	isions in the sections below	, in the notes section, and through appropriate	
atta	chments.		
Elia	ibility/Continued Eligibilit	v: Document the ARC decision regarding the	
dete	ermination of the student's el	igibility for special education and related services and	
reas	sons for the decision on the	appropriate Eligibility Determination form(s).	
(Not	te: For Multiple Disabilities, co	omplete a separate form for each underlying disability	
Cate	gory.)		
*Dat	te of Eligibility Determination	Student does not have an educational disability	
	-	requiring special education and related services.	
Prim	ary Disability		
	-	-	
For	students identified as Multip	le Disabilities document the underlying disabilities below:	
Und	erlying Disability (A)	Underlying Disability (B)	
11-1	hat in a Direct Star (O)	V Vertex bio Directific (D)	
Una	erlying Disability (C)	Underlying Disability (D)	
		•	
Note	es:		
		A	
		Ψ	
• Cha	nge Enrollment Start D	ate to reflect the date the student begins receiv	ving services, i.e., the star
	of the KYIEP		
date			
<ul><li>date</li><li>Desentation</li></ul>	elect State Exclude Op	tion	
<ul><li>date</li><li>Deserve</li></ul>	elect State Exclude Op	tion	
• Dese	elect State Exclude Op	tion	
date • Dese	elect State Exclude Op	tion late the enrollment, as of the evaluation date C	OR the start date of
date • Dest ent is four nent and e	elect State Exclude Op nd 'Not Eligible', end d end status = C01. Then	tion late the enrollment, as of the evaluation date C mark the student's Special Education Status a	OR the start date of as N: Not Eligible. This
ent is four nent and e also be de	elect State Exclude Op nd 'Not Eligible', end d end status = C01. Then ocumented on the Conf	tion late the enrollment, as of the evaluation date C mark the student's Special Education Status a ference Summary.	OR the start date of as N: Not Eligible. This
ent is four nent and e also be de	elect State Exclude Op nd 'Not Eligible', end c end status = C01. Then ocumented on the Conf	tion late the enrollment, as of the evaluation date C mark the student's Special Education Status a ference Summary.	OR the start date of as N: Not Eligible. This
• Deso • Deso ent is four nent and e also be do	elect State Exclude Op nd 'Not Eligible', end c end status = C01. Then ocumented on the Conf	tion late the enrollment, as of the evaluation date C mark the student's Special Education Status a ference Summary.	OR the start date of as N: Not Eligible. This
ent is four ment and e also be de	elect State Exclude Op nd 'Not Eligible', end c end status = C01. Then ocumented on the Conf	tion late the enrollment, as of the evaluation date C mark the student's Special Education Status a ference Summary.	OR the start date of as N: Not Eligible. This
date • Deso ent is four ment and e l also be do	elect State Exclude Op nd 'Not Eligible', end c end status = C01. Then ocumented on the Conf	tion late the enrollment, as of the evaluation date C mark the student's Special Education Status a ference Summary.	OR the start date of as N: Not Eligible. This
• Des • Des ent is four nent and e also be de	elect State Exclude Op nd 'Not Eligible', end c end status = C01. Then ocumented on the Cont	tion late the enrollment, as of the evaluation date C mark the student's Special Education Status a ference Summary.	OR the start date of as N: Not Eligible. This
date • Dese lent is four ment and e l also be de	elect State Exclude Op nd 'Not Eligible', end c end status = C01. Then ocumented on the Conf	tion late the enrollment, as of the evaluation date C mark the student's Special Education Status a ference Summary.	OR the start date of as N: Not Eligible. This
date • Deso lent is four ment and e l also be do	elect State Exclude Op nd 'Not Eligible', end c end status = C01. Then ocumented on the Conf	tion late the enrollment, as of the evaluation date C mark the student's Special Education Status a ference Summary.	OR the start date of as N: Not Eligible. This
date • Deso ent is four nent and e also be do	elect State Exclude Op nd 'Not Eligible', end c end status = C01. Then ocumented on the Cont	tion late the enrollment, as of the evaluation date C mark the student's Special Education Status a ference Summary.	OR the start date of as N: Not Eligible. This
date • Deso ent is four ient and e also be do	elect State Exclude Op and 'Not Eligible', end c end status = C01. Then ocumented on the Conf	tion late the enrollment, as of the evaluation date C mark the student's Special Education Status a ference Summary.	OR the start date of as N: Not Eligible. This
1N			Mapping Behavior Resolutions to Sta
------------------	-----------------------	--	--
Campus	s Path: System Ad	dministration   Resolution Types	
Appropr	iate local district r	esolution codes should be mapped to St	State Resolution Codes for reporting purposes
*	SSP1, Expelled wit	h Services	
*	SSP2, Expelled wit	hout Services	
*	SSP3, Out of Schoo	ol Suspension	
*	SSP5, Corporal Pu	nishment	
<mark>*</mark>	SSP7, Restraint		
<mark>.</mark> ↔	SSP8, Seclusion		
*	INSR, In-School Re	moval– any district resolution type in w	vhich student is removed from his/her normal
	educational enviro	onment. i.e., ISAP. ISS. In School Detentio	ion. Alternative Classroom. Alternative Progra
,	within the school.	etc	
NOTE: 2	012-13 Behavior R	eporting will include <b>all</b> student behavio	ior events with a resolution mapped to the
state co	de of INSR-In Scho	nol Removal	
State co			
Calenda	r = 12-13	Schools = All Schools	
Year 1	2-13 - Schoo	All Schools	
PATH: B	ehavior   Admin	Resolution Types	
	Select local resolu	tion type	
	Behavior Resolutio	on Type Editor	Alignment Start Data [
	Anger M	anagement Instruction	Discipline 08/10/2006
	BUS SU	SPENSION	Discipline 08/10/2006
	CONFER	RENCE W/PARENT	Discipline 08/10/2006 Discipline 08/10/2006
	Constru	ctive Assignment	Discipline 08/10/2006
	SSP5 Corpora	I Punishment	Discipline 08/10/2006
	SSP2 Expelled	I, Not Receiving Services	Discipline 08/10/2006
	INSR IN-HOUS	), Receiving Services SE SUSPENSION	Discipline 08/10/2006 Discipline 08/10/2006
			Disapilite contrazoro
$\succ$	Select appropriate	e State Resolution Code (mapping)	
	Behavior Resolution T	ype Detail	
	District Wide		If resolution mapping was
	Code	*Name Expalled Receiving Services	done prior to the E.1230
	*Alianment	*Start Date End Date	release, the mapping will
	Discipline -	08/10/2006	convert with the inception of
	Category	State Resolution Code (Mapping)	the new Behavior
	Minor 👻	Expelled, Receiving Services	Management Tool.
		In-School Removal	
		Expelled, Receiving Services	
		Expelled, Not Receiving Services Out of School Suspension	
		Corporal Punishment	
$\succ$	Save		

Complete the steps above for all In-School Removal resolutions in your district.



### **Clarification of Placement Codes for ages 3-5**

- 1) By March 1, annually a district will determine if its preschool program for the following school year is a *Regular Early Childhood Program* or a *Special Education Early Childhood Program*. This determination is based on the answer of these two questions:
  - a. Is the early childhood program designed for typically developing same aged peers?
  - b. Are the majority of the children ages 3 through 5 currently enrolled in the preschool program (after the January-February supplemental 3 count) children without IEPs? (*This count includes all children ages 3 through 5 including any kindergarten child who was 5 years old as of October 1 of the current school year.*)
- 2) If the district can answer yes to <u>both</u> of these questions, its preschool program is defined as a Regular Early Childhood Program until March 1 of the following school year the next time it makes its annual determination, otherwise the program is defined as a Special Education Early Childhood Program.
- 3) The district reports this Program Determination on its Annual Performance Report on June 30.
- 4) LRE Settings should be based on the Program Determination described above in effect on the date of the ARC.
  - a. For Districts that have determined their Preschool Program is a *Regular Early Childhood Program*, the LRE Settings for children ages 3 through 5 will typically be either **3A1**, **3A2**, **3B1**, or **3B2**.
  - b. For districts that have determined their Preschool Program is a *Special Education Early Childhood Program*, the LRE Settings for children ages 3 through 5 will typically be either 3S -Separate Class, 3U - Separate School or 3F - Residential Facility.

#### **EXCEPTIONS:**

If a district has determined its program is a *Regular Early Childhood Program* <u>but</u> a child is placed in a classroom for the majority of their day where <u>75% or more</u> of the children in that classroom are children <u>with</u> an IEP, the LRE Setting for this child shall be reported as a **3S** - **Separate Class**. When a district has determined its program is a *Special Education Early Childhood Program* <u>but</u> a child is placed in a classroom for the majority of their day where <u>75% or more</u> of the children in that classroom are children <u>without</u> an IEP, the LRE Setting for this child may be reported as either **3A1**, **3A2**, **3B1**, or **3B2** based on the amount of time the child attends the program per week and where the majority of special educations services are provided as described above in item 4.

NOTE: LRE Settings do not change once IEP is created, locked and saved regardless of Program Determination.

**General Instructions for Determining the Appropriate Placement** 

With the December 1, 2010 Child Count, the Individuals with Disabilities Education Act has changed the settings designated for children and youth with disabilities ages 3-5. Below is listing of the new placement options.

1. The first factor to consider is whether the child is attending a Regular Early Childhood Program as defined below:

A *Regular Early Childhood Program* is a program that is designed for typically developing children ages 3-5 and is not specifically or primarily designed for children with disabilities and includes (*at the time of the placement decision*) a majority of at least 50 percent of nondisabled children (i.e., children without an IEP). This may include Head Start; Kindergarten, Preschool classes, private kindergartens or preschools, and group child development centers or child care.

If a child is attending a Regular Early Childhood Program, s/he is to be reported in one of the boxes labeled **3A1**, **3A2**, **3B1**, or **3B2**.

Children attending a Regular Early Childhood Program are classified into two sub-categories. **3A:** Those attending a Regular Early Childhood Program at least 10 hours per week and **3B:** Those attending a Regular Early Childhood Program less than 10 hours per week.

If the child attends a Regular Early Childhood Program *at least 10 hours per week*, the child must be reported as to whether s/he is receiving the majority of their special education and related services in the Regular Early Childhood Program (3A1) or in some other location (3A2).

If the child attends a Regular Early Child Program for *less than 10 hours per week*, the child must be reported as to whether s/he is receiving the majority of their special education and related services in the Regular Early Childhood Program (**3B1**) or in some other location (**3B2**).

2. If the child is NOT attending a Regular Early Childhood Program, then it must be determined if the child is attending a *Special Education Program* (C) or receives services through some alternative option A Special Education Program is a program designed specifically or primarily for children with disabilities ages 3-5 and includes less than 50% nondisabled children. Special Education Programs include separate special education classrooms in regular school buildings; trailers or portables outside regular school buildings; child care facilities; hospital facilities on an out-patient basis; and other community based settings. Other Early Childhood Special Education Programs include Separate Schools and Residential Facilities that are designed specifically or primarily for children with disabilities ages 3-5.

If a child attends a Special Education Program in a class intended primarily for children with disabilities and does not also attend a Regular Early Childhood Program, report this child as a Special Education Program – Separate Class (38) placement.

If a child attends a Special Education Program in a day school designed specifically for children with disabilities and does not also attend a Regular Early Childhood Program, report this child as a Special Education Program – Separate School (**3U**) placement.

If a child attends a Special Education Program in a residential school or residential medical facility on an impatient basis and does not also attend a Regular Early Childhood Program, report this child as a Special Education Program – Residential Facility (**3F**) placement.

3. If a child is not attending either Regular Early Childhood Program or a Special Education Program, then you must select the category of program that best represents the specific environment in which the child receives the majority of their special education and related services. These *Other Environments* (3X/3P) include either the Home (3X) or a Service Provider Location (3P).

If a child receives their special education and related services in the principle residence of the child's family or caregivers, and does not also attend either a Regular Early Childhood Program or a Special Education Program provided in a separate class, separate school, or residential facility, report this child as a Home (**3X**) placement.

If a child receives all of their special education and related services in a Service Provider Location or some other location that is not in any other category, and does not also attend either a Regular Early Childhood Program or a Special Education Program and also did not receive special education and related services in the home, report this child as a Service Provider Location (**3P**) placement. A Service Provider Location would include services provided in a private clinician's offices, clinician's offices located in school buildings and hospital facilities on an outpatient basis. This includes students who come to the school for speech services only and do not meet the criteria for attending either a Regular Early Childhood Program or a Special Education Program.

# **1P**

Document Services for Trimester Schedule

#### **Campus Path:**

Examples for Documenting Trimester Scheduling

	Anti	cipated Freque					
Special Education	Service Minutes (per Service Frequency)	Service Frequency (Daily, Weekly, Monthly, Annually)	Service Frequency (Number of times provided per Service Period)	Start Date	End Date	Service Provider (by Position)	Location (e.g., Regular Classroom, Resource Room, Separate Class)
	72.0 minutes	1.0 times per	day	8/4/2011	8/3/2012	Special Education Teacher	Resource English Class 2 of 3 trimesters
	72.0 minutes	1.0 times per	day	8/4/2010	8/3/2011	Special Education Teacher	Regular Math Class Co-Teaching 2 of 3 trimesters

Reference the Collaborative Teaching Practices for Exceptional Children Question and Answer Document.

1Q		Addendum to the IEP Process
Campus Path: Student Information   Speci	ial Ed   Documents Ta	ab
The copy process should <b>ONLY</b> be used whe IEP at an annual review meeting users are dir Form' drop list under the Documents tab.	en making an addendur rected to select the age	n to the current IEP. When developing a new appropriate KY IEP from the 'Create New
Step 1: Highlight the current IEP		
E 2011-2012 (2) E	112)	
Step 2: Click 'Copy'		
Open         Copy         Cope         Print         Create New For           Documents List         □         □         2011-2012 (2)           □         □         □         □         □           □         □         □         □         □           □         □         □         □         □           □         □         □         □         □           □         □         □         □         □         □           □         □         □         □         □         □           □         □         □         □         □         □	orm 2012)	
Step 3: Select from the drop list the plan in w	which you want to copy	data into.
*New Plan Type	2011 KY-IEP 16+	
*Start Date		
*End Date	2011 KY-IEP 14 2011 KY-IEP 16+	
	2011 KY-IEP <14 Private School Service Plan	
Step 4: Enter the Start (End date should not	change) of the new IEI	P
*Start Date	10/13/2011	
*End Date	09/05/2012	
<b>Step 5:</b> Select the appropriate Special Ed Set the services from the copied IEP. Even if the list in order for them to copy to the new IEP. Verify the start and end dates of the services your new IEP.	rvice and/or Related Se services did not chang selected, the dates show	ervices. For reference, on the left hand side is ge, you must select the service from the drop uld be the same as the start and end date of
Normal Service		
*Service 1: Special Education	Normal Service - Special B	Education 😽
Service Provider:	×	
Service Position: SPECIAL EDUCATION TEACHER	SPECIAL EDUCATION TEA	CHER 💌
*Start Date:09/06/2011	10/13/2011	
*End Date:09/05/2012	09/05/2012	
Step 6: Click Copy to create the new IEP	Сору	

Step 7: Select OK to proceed
WARNING: The previous plan's locking state will be left as it was. Services on the previous plan will be ended. Do you want to proceed?
OK Cancel
After copying, the original plan end date and service end dates will: 1) end one day before the new plan starts.
This will create an 'unlocked' copy of the selected IEP Plans (2) 2011 KY-IEP 16+ (10/13/2011-09/05/2012) (Copied 1) 2011 KY-IEP 16+ (09/06/2011-10/12/2011) (Copied Original)
Step 8: Highlight the 'unlocked' copy of the IEP
່ອ 🧰 2011-2012 (3)
2011 KY-EP 16+ (10/13/2011-09/05/2012) (Copied 1)
Step 9: Click 'Open'
谷 Open 🖹 Copy 🗙 Delete 🗁 Print Create New Form
Documents List
E Blans (2)
2011 KY-IEP 16+ (10/13/2011-09/05/2012) (Copied 1)
This will open the copied IEP into the editor format
Step 10: Education Plan Editor:
Update the 'Meeting Date' to the date the ARC meet to determine a change to the new IEP. NOTE: 'End Date' should remain the date that was copied based on the old IEP (this will have to be manually changed back by the user if the meeting date is updated) Education Plan Plan Completed
*Meeting Date *Start Date *End Date 10/13/2011 # 10/13/2011 # 9/05/2012 # Type
Step 11: Click Save and Continue
Save & Continue
Step 12: Review the remaining editors to make the changes that precipitated the need for this addendum. To advance through the editors, click the Save and Continue button, as shown above. Step 13: Return to the Education Plan Editor, as pictured in Step 10, and mark the 'Plan Completed' Function Step 14: Save the document Save
NOTE: There is no longer a need to unlock the 'original' IEP to modify dates.

## **Campus Path:**

- General | Enrollment Tab | Special Education section
- General | Transportation Tab
- Special Education | Documents Tab
- Special Education | Team Members Tab

The purpose of this document is to detail the procedures that should be followed when 1) a student is released from special education services when the ARC has determined the child no longer meets the eligibility requirements or the parent/child revokes consent for services OR 2) the student moves out of your district.

## Student released from services (no longer eligible or consent revoked) and student remains in your district

- ➢ General | Enrollment Tab | Special Education section
  - Select the Special Ed Exit Reason
    - Enter the Special Ed Exit Date
    - Change the Special Ed Status to either Inactive or Eligible, Parents Refused, whichever is appropriate
- General | Transportation Tab
  - End date the Transportation of T5: Special Transported, if applicable
- Special Education | Documents Tab:
  - Unlock student's current IEP
  - Education Plan Editor Change the IEP End Date to the date services ended
  - Enrollment Status Editor Change the student Special Ed Status to Inactive or Eligible, Parents Refused, whichever is appropriate
  - Special Ed Service Editor Change End Date for each service to the date services ended
  - Related Services Editor Change End Date for each service to the date services ended
  - Lock IEP and save
- Special Education | Team Members Tab
  - End date each Team Member listed for student to the date services ended

## Student moves from the district or otherwise withdraws

- General | Enrollment Tab | Special Education section
  - Select the Special Ed Exit Reason
  - Enter the Special Ed Exit Date
  - Change the Special Ed Status to either Inactive or Eligible, Parents Refused, whichever is appropriate
- General | Transportation Tab
  - End date the Transportation of T5: Special Transported, if applicable.
- Special Education | Team Members Tab
  - End date each Team Member listed for student to the date services ended

*NOTE:* When a student moves from the district or otherwise withdraws, the IEP should **NOT** be unlocked and end dated marked as *Inactive* on the **IEP** | **Enrollment Status** editor. This should NOT be done as it will cause a student who enrolls in another district and/or returns to your district not to have a current IEP on record.

18			Transfer	of Stu	dent Spec	cial Education	Records
Campus Path: Student Infor	mation   Studen	nt Locator					
PURPOSE: To provide instru using Infinite Campus.	ction on transfer	ring student spe	cial educati	on reco	ords from	one district to	another
		Definitions					
Former District	District in which district	ch student is tra	nsferring fr	om; stu	idents pre	viously enrolle	d
New District	District in which	ch student is tra	nsferring to	; distri	ct student	is enrolling	
New District requests a studen 1. Student Information   2. Click Search	nt's records tran. Student Locator	<i>sfer</i>   Enter last name	e, first name	e and g	ender		
Last Name Ne	wton Na	me	State ID	Gender	Birth Date	%	
Gender M Birth Date Middle Name SSN # State ID	Search>						
3. Select appropriate stud enrollment in the state	dent, if you hoven	r over student's	name, you	will se	e the stude	ent's most rece	nt
<ul> <li>4. Enter required fields <ul> <li>a. Last Name w</li> <li>b. First Name w</li> <li>c. Gender will p</li> <li>d. Birth Date w</li> <li>e. Race/Ethnici</li> <li>f. Calendar will</li> <li>g. Schedule: Sel</li> <li>h. Grade: Selecci</li> <li>i. Start Date: E</li> <li>j. Start Status:</li> <li>k. Service Type</li> </ul> </li> </ul>	ill populate from vill populate from populate from stu ill populate from <b>ty</b> : Select student l default to Schoo lect appropriate s t student's current inter date student Select R21: Tran : Select appropriate	a student's previ a student's previous student's previous student's previous t's race from dre ol Year and Sch ochedule at grade enrolls in your asfer from a KY ate Service Typ	ous enrollm ous enrollm enrollment ous enrollm op list ool selected school (firs school out e from drop	nent nent 1 1 side of 0 list	f attendan district	ice)	
5. Save, Student Records	s Transfer, will sl	how former dist	rict enrollm	ent inf	ormation		
6. Click Submit Request							

							-		
Request a Re This is a Re	cords Release	ing the student	information the reque	sting district/user a	nd the releasin	a district/user			
						y			
Student:			Enrollment Type:	Primary					
Last Name	Newton	First Name	Test2		Middle Name				
Gender	М	Birthdate	04/16/1995		SSN				
Grade	10	School	09-10 LYNN CAMP H	HIGH SCHOOL	Start Date	09/15/2009			
Requesting	)istrict & Ilser								
District	301 Knox County	Name	System Administrate	r	Username	admin			
Request Date	09/15/2009	Work Phone	System Administrate		Email	aunin			
Comments	05/13/2005	WORK PHONE			Linai				
						~			
						<b>V</b>			
			Submit Request	1					
atus will	then annear o	n screen							
atus will	unen appear of								
Status:	Waiting for for	mer distri	ct to release re	cords.					
he new di	strict's Proces	Inhov o	nd the studen	'a Daganda '	T	ah will ha			- 4
ne new un		s moor a	ind the studen	l s Records	I ransier t	ad will do	th display a	a waiting st	atus until i
ormer dist	rict responds.	During th	nis time, the ne	ew district w	ill not kn	ow what o	th display a listrict the s	a waiting st	atus until v viously
ormer disti tended.	rict responds.	During th	nis time, the no	ew district w	/ill not kn	low what o	th display a listrict the s	a waiting st student prev	viously
ormer distr tended.	rict responds.	During th	his time, the no	ew district w	vill not kn	ow what o	th display a listrict the s	a waiting st student prev	viously
ormer districtended.	strict responds.	During the store of the store o	ecords reques	ew district w	vill not kn	ow what o	th display a listrict the s	a waiting st student prev	viously
ormer distr tended. former Dis rocess Inb	rict responds. strict respond ox will displa	During the state of the state o	ecords reques	t s Records ew district w t records	vill not kn	ow what o	th display a listrict the s	a waiting st student prev	viously
ormer districtended. former Districtendes Inb process Inb	strict responds. strict respond ox will displa	During the state of the state o	nis time, the no ecords reques est to release r	t s Records ew district w t records	vill not kn	ow what o	th display a listrict the s	a waiting st student prev	viously
ormer distritended. ormer Districtended. cocess Inb Process Inb X I D Pr	strict responds. strict respond ox will displa ox	During the store of the store o	ecords requested as the reference of the student of	t s Records ew district w t records	ransfer t	ow what o	th display a listrict the s	a waiting st student prev	atus until viously
rmer distritended. <i>former Districtended</i> . <i>forcess Inb</i> Process Inb X ! D Pr X ! B Pr	strict responds. strict respond tox will displa ox rocess ecords Transfer	During the store of the store o	ing the student is time, the no ecords reques est to release to or you to release:	t s Records	vill not kn	Poste	th display a listrict the s d Date Due Dat	a waiting st student prev	viously
ormer distritended. ormer Districtended. orcess Inb Process Inb X ! D Pr X ! B Re 1. Sel	strict responds. strict respond ox will displa ox rocess ecords Transfer ect the link	S index a During the During the Store of the	ind the studen nis time, the ne ecords reques est to release to for you to release:	t s Records	vill not kn	Poste	th display a listrict the s d Date Due Dat 2009	a waiting st student prev	viously
ormer distritended. ormer Districtended. ormer Districtended. process Inb Process Inb X ! D Pr X ! P Re 1. Sel	strict responds. strict respond tox will displa tox rocess ecords Transfer ect the link ds Transfer Boaz, Kaeleb #	During the store of the store o	nis time, the no ecords reques est to release r	t s Records	vill not kn	Poste	th display a listrict the s d Date Due Dat	a waiting st student prev	viously
ormer distritended. ormer Districtended. ormer Districtended. process Inb Process Inb X ! D Pr X ! B Re 1. Sel Recorr Stude	strict responds. strict respond tox will displa tox rocess ecords Transfer ect the link ds Transfer Boaz, Kaeleb # ant: lame Boaz Frai	s inbox a During the During the Stop a Request f	nis time, the no ecords reques est to release r or you to release:	t s Records	vill not kn	Poste	th display a listrict the s d Date Due Dat 2009	a waiting st student prev	viously
rmer distritended. ormer Districtended. orcess Inb Process Inb × ! □ Pr × ! □ Pr × ! □ Recor Stude Lasth Gender	strict responds. strict responds. strict respond ox will displa ox occess ecords Transfer ect the link ds Transfer Boaz, Kaeleb # writ: lame Boaz First er M Birth	Step  Enrollment 1  Name Kaeleb  U221/1922	ind the studen his time, the ne ecords reques est to release r or you to release:	t cecords	vill not kn	Poste	th display a listrict the s d Date Due Dat	a waiting st student prev	viously
ormer distritended. ormer Distritended. occess Inb Process Inb X ! D Pr X ! P Ref 1. Sel Record Grade	strict responds. strict respond tox will displa tox will displa tox tocess ecords Transfer ect the link ds Transfer Boaz, Kaeleb # ant and boaz First to Sch	Step Request f Step Request f Name Kaseb 12/21/1992 001	Internet time, the new principal structure, the new predited structure, the new prediction structure,	Michael 09/10/2009 Edit (08/04/2009-06/03/2010	) 09-10 Warren Centra	Poste	th display a listrict the s d Date Due Dat 2009	a waiting st student prev	viously
rmer distritended. ormer Districtended. orocess Inb Process Inb X ! D Pr X ! P Re 1. Sel Recor Stude Grade	strict responds. strict responds. strict respond tox will displa tox will displa tox rocess ecords Transfer ect the link ds Transfer Boaz, Kaeleb # ent: anne Boaz First er Boaz First er Boaz Sch sch sch sch sch	Step  Chate Control  Control  Chate Control  Chate Control  Contro	Ind the studen his time, the ne ecords reques est to release f or you to release:	Michael Michael Michael Michael Michael Michael	) 09-10 Warren Centra	Poste	th display a listrict the s d Date Due Dat	a waiting st student prev	viously
rmer distri tended. pormer Dis rocess Inb Process Inb X ! Pr X ! PR 1. Sel I. Sel Recor Stude Grade	strict responds. strict responds. strict responds ox will displa ox rocess ecords Transfer ect the link ds Transfer Boaz, Kaeleb # ant: ane Boaz First er M Birth esting District & User t 301 Knox County Nam	s induced a constraint of the	ist time, the new student is tince, the new student is time, the new student is time, the new st	Michael Michael Michael admin	) 09-10 Warren Centra	Poste	th display a listrict the s d Date Due Dat	a waiting st student prev	atus until viously
rmer distri tended. process Inb Process Inb X I P Pr X I P Re 1. Sel Reque Grade Reque Comm	strict responds. strict responds. strict respond ox will displa ox rocess ecords Transfer ect the link ds Transfer Boaz, Kaeleb # ent: lame Boaz First e 10 Sch esting District & User t 301 Knox County Nam st Date 0910/2009 Wor ents	e System Admir System Admir	type: Primary  Type: Primary  Type: Primary  Indide Name SN  CAMP HIGH SCHOOL Start Date Overlap  National Start Date Email	Michael 09/10/2009 Edit (08/04/2009-06/03/2010 admin	) 09-10 Warren Centra	Poste	th display a listrict the s d Date Due Dat 2009	a waiting st student prev	atus until viously
rmer distritended. ormer Districtended. ormer Districtended. occess Inb Process Inb X I D Pr X I B Pr X I B Record Stude Grade Grade Reque Common None.	strict responds. strict responds. strict respond tox will displa tox will displa tox rocess ecords Transfer ect the link ds Transfer Boaz, Kaeleb # tit lame Boaz First r M 0 Sch esting District & User t 301 Knox County Name st Date 09/10/2009 Wor ents	s inbox a During the During the During the Store of the received and the Store of t	ist time, the new statements time, the new statements the statement of the new statement of t	Michael 09/10/2009 Edit (08/04/2009-06/03/2010 admin	) 09-10 Warren Centra	Poste	th display a listrict the s d Date Due Dat 2009	a waiting st student prev	viously
rmer distritended. ormer Disconses Inb Process Inb Pro	strict responds. strict responds. strict responds ox will displa ox ox cocess ecords Transfer ect the link ds Transfer Boaz, Kaeleb # ent: lame Boaz First er M Birk esting District & User t 301 Knox County Nam sto Date 09/10/2009 Wor ents sing District & User t 571 Waren County Nam	s inbox a During the During the During the Stote the ready a Request of Step Request of Request of Request of Control (1992) (19	Internet of the statement is time, the new ecords request est to release in or you to release: Type: Primary Middle Name SSN CAMP HIGH SCHOOL Start Date Overlap Instrator Username Email	Michael OB/10/2009 Edit (08/04/2009-06/03/2010 admin	) 09-10 Warren Centra	Poste	th display a listrict the s d Date Due Dat	a waiting st student prev	viously
armer distritended. armer Distritended. armer Districtended. armer Districtended. armer Districtended. armer Districtended. armer Districtended. Process Inb × ! □ Pr × ! □ Pr Stude Comm Noree Reque Comm Noree Referent Comm	strict responds. strict responds. strict responds. strict responds ox will displa ox oc oc strict respond ox oc oc oc oc strict auser t anne Boaz First ext 301 Knox County Nam st Date 0010/2009 Wor ents sting District & User t 571 Warren County Nam se Date 0010/2009 Wor ents	e System Admir k Phone	Internet stateminis time, the nericonstant for the stateminis time, the nericonstant stateminis time, the nericonstant stateministrator release:	Michael Oy10/2009 Edit (08/04/2009-06/03/2010 admin	) 09-10 Warren Centra	Poste	th display a listrict the s d Date Due Dat 2009	a waiting st student prev	viously
ormer distritended. ormer Distritended. ormer Distriction process Inb Process I	strict responds. strict responds. strict respond tox will displa tox will displa tox tocess ecords Transfer ect the link ds Transfer Boaz, Kaeleb # ent: lame Boaz First er M Birth t 301 Knox County Name sting District & User t 301 Knox County Name t 501 Vioren County Name t a Date 09/10/2009 Wor ents	e System Admir sy a Requir Step Request f Request f 12/21/1992 09-10 LYNKG e System Admir k Phone	ist time, the normalized of the statement in the statement is the normalized of the statement is the statement of the stateme	Michael 09/10/2009 Edit (08/04/2009-06/03/2010 admin	) 09-10 Warren Centra	Poste	th display a listrict the s d Date Due Dat 2009	a waiting st student prev	viously
rocess Inb rocess Inb recen Reque Comm Nore. Reque Comm	strict responds. strict responds. strict responds. strict respond ox will displa ox rocess ecords Transfer ect the link ds Transfer Boaz, Kaeleb # ant: tame Boaz First r M Birlt esting District & User t 301 Knox County Nam sto Date 09/10/2009 Wor ents stop District & User t 571 Waren County Nam se Date 09/10/2009 Wor ents	e System Admir k Phone	ist time, the nericonstant of the student in the student in the student in the nericonstant of the student in the student of t	Michael Og/10/2009 Edit (08/04/2009-06/03/2010 admin	) 08-10 Warren Centra	Poste	th display a listrict the s d Date Due Dat 2009	a waiting st student prev	viously
remer distritended. ormer Distritended. ormer Distritended. orcess Inb Process Inb X I D Pr X I P Refea 1. Sel Reque Grade Reque Comm None Relea Distric Distric Relea Distric	strict responds. strict responds. strict respond ox will displa ox rocess ecords Transfer ect the link ds Transfer Boaz, Kaeleb # ent: lame Boaz First er M Birth is 10 Sch esting District & User t 301 Knox County Nam se Date 09/10/2009 Wor ents	s indoor a During the	Inder the statuent his time, the ne ecords reques est to release to or you to release: Nype: Primary Middle Name SSN CAMP HIGH SCHOOL Start Date Overlap Natrator Username Email Statuant Statuant Statuant Username Email Statuant	Michael O9/10/2009 Edit (08/04/2009-06/03/2010 admin admin t Ignore Request	) 09-10 Warren Centra	Poste	th display a listrict the s d Date Due Dat 2009	e	viously
ormer distritended. ormer Districtended. orocess Inb Process Inb P	strict responds. strict responds. strict respond tox will displa tox will displa tox rocess ecords Transfer ect the link ds Transfer Boaz, Kaeleb # the boaz First ect the link ds Transfer Boaz, Kaeleb # the boaz First the bo	e System Admir Refease Rec Cator only	ist time, the normality of the statement is time, the normality of the statement of the sta	Michael OB/10/2009 Edit (08/04/2009-06/03/2010 admin admin t Ignore Request student's emi	) 09-10 Warren Centra	n his/her	th display a listrict the s d Date Due Dat 2009	a waiting st student prev	been ende
OTE: The verlaps ca	strict responds. strict responds. strict responds. strict respond ox will displa ox rocess ecords Transfer ect the link ds Transfer Boaz, Kaeleb # ent: lame Boaz First et 10 Sch esting District & User t 301 Knox County Name st Date 09/10/2009 Wor ents e Overlap india an be resolved	state       Signature         During the problem       Signature         Step       Request from the problem         Name       Enrollment         Name       Enrollment         Name       Enrollment         Name       Enrollment         Value       System Admit         Release Ref       Cator only         Release Ref       Cator only         by select       System Admit	Internation Internatio Internation Internation Internation Internation Internation Intern	Michael Og/10/2009 Edit (08/04/2009-06/03/2010 admin admin admin t Ignore Request student's em nk. User wil	) 09-10 Warren Centra ) 09-10 Warren Centra	Poste	th display a listrict the s d Date Due Dat 2009	a waiting st student prev	been ende lment tab.

Windows Internet Explorer         Several reports will now be generated and sent, please be patient while this occurs         Image: Colspan="2">Image: Colspan="2" Image: Colspan="2" I
Image: Several reports will now be generated and sent, please be patient while this occur.   Image: Several reports will now be generated and sent, please be patient while this occur.   Image: Several reports will now be generated and sent, please be patient while this occur.   Image: Several reports will now be generated and sent, please be patient while this occur.   Image: Several reports will now be generated and sent, please be patient while this occur.   Image: Several reports will now be generated and sent, please be patient while this occur.   Image: Several reports will now be generated and sent, please be patient while this occur.   Image: Several reports will now be generated and sent, please be patient while this occur.   Image: Several reports will now be generated and sent, please be patient while this occur.   Image: Several reports will now be generated and sent, please be patient while this occur.   Image: Several reports will now be generated and sent, please be patient while this occur.   Image: Several reports will now be generated be reported by the patient of the patient
<ul> <li>3. Click OK</li> <li>Dece Process is complete, the available information that will transfer with the student will appear</li> <li>Status: Records released to requesting district. Process Complete.</li> <li>Transcript <ul> <li>FP</li> <li>Census Contact Summary</li> <li>Special Ed Evaluation</li> <li>Special Ed Documents</li> <li>Special Ed Documents</li> <li>Special Ed Documents</li> <li>Schedule</li> <li>PLP Documents</li> <li>Attendance Period Detail</li> <li>Assessment Summary</li> <li>Behavior Summary</li> <li>Heath Condition Summary</li> <li>Heath Screening Summary</li> </ul> </li> <li>Note: The former district cannot preview or control which records are sent in the transfer. In addition, after a ecord is requested or released, it cannot be canceled.</li> <li>Note: The former district cannot process Inbox 'Waiting'</li> </ul>
3. Click OK         Date Process is complete, the available information that will transfer with the student will appear         Status: Records released to requesting district. Process Complete.         Transcript       □         □       Transcript         □       □         □       Transcript         □       □ <t< td=""></t<>
Since Process is complete, the available information that will transfer with the student will appear Status: Records released to requesting district. Process Complete. Transfer Documents Transcript Census Contact Summary Special Ed Evaluation Special Ed Documents Schedule Attendance Period Detail Assessment Summary Behavior Summary Health Condition Summary Health Condition Summary Health Condition Summary Health Condition Summary NOTE: The former district cannot preview or control which records are sent in the transfer. In addition, after a ecord is requested or released, it cannot be canceled. New District receives released records from former district New District will receive notice in Process Inbox 'Waiting'
Transcript       Image: Provide released to requesting district. Process complete.         Transcript       Image: Provide released to requesting district. Process complete.         Census Contact Summary       Special Ed Evaluation         Enrolment History       Special Ed Documents         Schedule       Image: Provide released networks         Attendance Period Detail       Image: Provide released networks         Assessment Summary       Image: Provide released networks         Health Condition Summary       Health Screening Summary         Health Innunization Summary       Health Innunization Summary         NOTE: The former district cannot preview or control which records are sent in the transfer. In addition, after a record is requested or released, it cannot be canceled.         New District receives released records from former district         New District will receive notice in Process Inbox 'Waiting'
Image: Proceeding of the second se
<ul> <li>Transcript</li> <li>Census Contact Summary</li> <li>Special Ed Evaluation</li> <li>Special Ed Documents</li> <li>Schedule</li> <li>PLP</li> <li>Attendance Period Detail</li> <li>Assessment Summary</li> <li>Behavior Summary</li> <li>Health Condition Summary</li> <li>Health Screening Summary</li> <li>Health Screening Summary</li> <li>Health Immunization Summary</li> <li>Health Immunization Summary</li> <li>NOTE: The former district cannot preview or control which records are sent in the transfer. In addition, after a record is requested or released, it cannot be canceled.</li> <li>New District receives released records from former district</li> <li>New District will receive notice in Process Inbox 'Waiting'</li> </ul>
Census Contact Summary Special Ed Evaluation Enrollment History Special Ed Documents Schedule PHP Attendance Period Detail Assessment Summary Behavior Summary Health Condition Summary Health Condition Summary Health Screening Summary Health Immunization Summary NOTE: The former district cannot preview or control which records are sent in the transfer. In addition, after a record is requested or released, it cannot be canceled. New District receives released records from former district New District will receive notice in Process Inbox 'Waiting'
<ul> <li>Enrollment History</li> <li>Special Ed Documents</li> <li>Schedule</li> <li>PLP Documents</li> <li>Attendance Period Detail</li> <li>Assessment Summary</li> <li>Behavior Summary</li> <li>Health Condition Summary</li> <li>Health Screening Summary</li> <li>Health Screening Summary</li> <li>Health Immunization Summary</li> <li>NOTE: The former district cannot preview or control which records are sent in the transfer. In addition, after a record is requested or released, it cannot be canceled.</li> <li>New District receives released records from former district</li> <li>New District will receive notice in Process Inbox 'Waiting'</li> </ul>
Attendance Period Detail Assessment Summary Behavior Summary Health Condition Summary Health Screening Summary Health Immunization Summary NOTE: The former district cannot preview or control which records are sent in the transfer. In addition, after a record is requested or released, it cannot be canceled. New District receives released records from former district New District will receive notice in Process Inbox 'Waiting'
Attendance Period Detail Assessment Summary Behavior Summary Health Condition Summary Health Screening Summary Health Immunization Summary NOTE: The former district cannot preview or control which records are sent in the transfer. In addition, after a record is requested or released, it cannot be canceled. New District receives released records from former district New District will receive notice in Process Inbox 'Waiting'
<ul> <li>Assessment Summary</li> <li>Behavior Summary</li> <li>Health Condition Summary</li> <li>Health Screening Summary</li> <li>Health Screening Summary</li> <li>Health Immunization Summary</li> </ul> NOTE: The former district cannot preview or control which records are sent in the transfer. In addition, after a record is requested or released, it cannot be canceled. New District receives released records from former district New District will receive notice in Process Inbox 'Waiting'
<ul> <li>Behavior Summary</li> <li>Health Condition Summary</li> <li>Health Screening Summary</li> <li>Health Immunization Summary</li> <li>NOTE: The former district cannot preview or control which records are sent in the transfer. In addition, after a record is requested or released, it cannot be canceled.</li> <li>New District receives released records from former district</li> <li>New District will receive notice in Process Inbox 'Waiting'</li> </ul>
<ul> <li>Health Condition Summary</li> <li>Health Screening Summary</li> <li>Health Immunization Summary</li> <li>NOTE: The former district cannot preview or control which records are sent in the transfer. In addition, after a record is requested or released, it cannot be canceled.</li> <li>New District receives released records from former district</li> <li>New District will receive notice in Process Inbox 'Waiting'</li> </ul>
Worker Screening Summary Health Immunization Summary NOTE: The former district cannot preview or control which records are sent in the transfer. In addition, after a record is requested or released, it cannot be canceled. New District receives released records from former district New District will receive notice in Process Inbox 'Waiting'
<b>NOTE:</b> The former district cannot preview or control which records are sent in the transfer. In addition, after a record is requested or released, it cannot be canceled. <i>New District receives released records from former district</i> New District will receive notice in Process Inbox 'Waiting'
NOTE: The former district cannot preview or control which records are sent in the transfer. In addition, after a record is requested or released, it cannot be canceled. <i>New District receives released records from former district</i> New District will receive notice in Process Inbox 'Waiting'
record is requested or released, it cannot be canceled. <i>New District receives released records from former district</i> New District will receive notice in Process Inbox 'Waiting'
New District will receive notice in Process Inbox 'Waiting'
Records transfers can be accessed in three areas of IC:
Process Inbox
Student Information   General   Student Records Transfer
• System Administration   Data Outlines   Student Records Transfer NOTE: User group tool rights must be given to allow access to any of these areas.
New District Process Inbox
Process Inbox
X I Process Step Posted Date Due Date
X Bracords Transfer Waiting: Newton, Test2 2120359583 09/15/2009
1. Select the link
Fransfer Documents are PDF documents available for download, saving and/or printing.
Data Imports are wizards that can be ran to transfer data directly from the former district database to the new listrict database

	Status: Records rele	eased.	
Transfer Documents         Transcript         Census Contact Summary         Enrollment History         Schedule         Attendance Period Detail         Assessment Summary         Behavior Summary         Health Condition Summary         Health Screening Summary         Health Immunization Summary	IEP     Special Ed Evaluation     Special Ed Documents     PLP     PLP Documents	Data imports Transcript Import Wizar Enrollment History Impor 권 Assessment Import Wiz Timmunization Import Wiz Thealth Condition Import Wizard EP Import Wizard Special Ed Evaluation Im Special Ed Documents PLP Import Wizard 구LP Documenta Import	d t Wizard ard Wizard Import Wizard Wizard
NOTE: If an item has bee contain this item in the fo NOTE: Be aware that run	n crossed out such a rmer district. ning import wizards	as <del>PLP Import Wizar</del> s multiple times for a	above, then the student's record did not student can result in duplicate records.
Data imports relevant to	) Special Education	1:	
Enrollment History Import W	/izard This import w	vizard will allow uses database	r to select any previous enrollments for student
	Enro	ollment History Field	ds
Calendar Name	End Sta	tus	
District Name	Grade		Start Date
End Comments Ser		Туре	Start Status
End Date Start		omments	
B KY State Reporting Import \	Wizard This import	wizard will import stu	ident data elements from former district found
on the Enrollment Tab  St	ate Reporting Section	on and Special Ed Se	ction into the new district database.
State Evolude	KY State Repo	orting Fields (releva)	nt to SPED)
Resident District	Primary	Disability	Part C ID
Home Language	Second	ary Disability	Special Ed Exit Status
Economic Indicator	Setting	ing Disubility	Special Ed Exit Reason
Using this wizard the rece Education section of the F Receiving districts can als Enrolment Special Ed St A: Active Primary Disa 13: Autism Setting 6C: (age 6-2 Date Eligible b	eiving district can ch Enrolments. so remove the SpEd Special Ed Elements atus bility 1) <40% of the day general ed pro ut Refused Spec	ange the special edu Exit Status and SpEc	cation status to "Active" in the Special d Exit Date using this wizard as well.
Dart? ID			
NOTE: If former district	marked student's Sp	ecial Ed Status to Ina	active before releasing records, this will need to
be changed to Active in n	ew district database	student record.	$\mathbf{c}$

Special Ed Evaluation Import Wizard
This import wizard will import the student's most recent 'locked' Conference Summary from the former district
to the new district database. When complete, the Conference Summary will be available as an editor in the
student record, Special Ed   Documents Tab.
Import as PDF only
Do not Select Import as PDF Special Ed Evaluation Import
Conference Summary 04/15/2012
Conference Summary -
Date
Back
1) Select the Locked indicator, if the Conference Summary needs to be imported as a locked evaluation
2) Click Next 2) Click OK on dialog how
5) Click OK oli dialog box
Windows Internet Explorer
The Special Ed evaluation record has been imported into the database.
<ul> <li>4) Verify in student record that the Conference Summary is now available as an editor based document; also, mark Evaluation Complete if Locked was not selected in previous screen.</li> <li>2011-2012 (33)</li> <li>Plans (1)</li> <li>Conference Summaries / Evaluations(1)</li> <li>Conference Summary (04/15/2012) IEP</li> </ul>
NOTE: If 'Import as PDF only' is selected, the document will be imported as a PDF, not as an editor based document.
Special Ed Documents Import Wizard This import wizard will import any special education FDF documents (non
editor based) attached to the student's record from the former district to the new district database. When
complete, the documents will be available as PDFs in the student record, Special Ed   Documents Tab.
will only be available here to import as a PDF document.
Do not import the following document.
Name: Archive
Mild Mental Disability Eligib
Do not import the following document.
Name: Archive
Test V
1) Select any documents that do not need to be imported by selecting the 'Do not import the following

document' indicator

- 2) Deselect Archive indicator if the document does not need to be archived when imported.
- 3) Save
- 4) Click 'OK' on dialog box

Windo	ows Internet Explorer 🛛 🗙	
1	The Special Ed Document record has been imported into the database.	
	OK	
5) V	erify in student record that requested docu	nents are now available in student record.
-	Uploaded Forms (5)	
	🔼 KY-IEP 14	
	🔀 Mild Mental Disability Eligibi	
_	KY-IEP 14 Progress Report	

NOTE: These documents will open outside the IC system into Adobe; therefore, no changes can be made to the document; user will have the ability to save to desktop or print.

This import wizard will import the student's most recent 'locked' KY IEP from the former district to the new district database. When complete, the KY IEP will be available as an editor in the student record, Special Ed | Documents Tab.

C	Import as PDF only		
IEP Plan Import		Do not select	Import as PDF only
*Plan Type: 2009 KY-IEP	16+ 09/14/2009 - 09/13/2010	)	
2009 KY-IEP 16+	×		
Start Date	End Date		
09/14/2009	09/13/2010	Locked	
IEP Services Import			
Do not import the foll	owing service.		
*Service: Special Educa	tion Instruction		
	*		
Service Provider:			
	*		
Service Position: Speech	Therapist	Display on Print	
	*		
Do not import the foll	owing service.		
*Service: Interpreter Se	ervices		
	*		
Service Provider:			
	*		
Service Position: Speech	Therapist	Display on Print	
	×	<ul> <li>Image: A start of the start of</li></ul>	
	Back Next		

- 1) Listed to import will be IEPs with Services and/or Related Services that are locked and attached to the student's former district record
- 2) Select the Locked indicator, if the KY IEP needs to be imported as a locked plan
- 3) Each **Service** must be mapped to a service within your district by selecting the appropriate from the drop list

4)	Each <b>Position</b> can be mapped to a provider or position within you district by selecting the appropriate from the drop list					
5)	Click Next, IEP will be imported					
6)	Select OK					
	Windows Internet Explorer 🛛 🔀					
	The IEP plan record has been imported into the database.					
_						
7)	Verify in student record that the KY IEP is now available as an editor based document          Image: Contract of the term of the term of the term of the term of term o					
8)	Mark Plan Complete in the Education Plan editor if Locked was not selected in previous screen.					