

Process for Completion of IEPs

Prior Written Notice and Consent - ESC 99

Attachment

The following guidelines address how to complete the ESC 99 with clear, accurate and complete information that allows the parent(s) to make an informed decision regarding consent.

The first section is found immediately below the student's name:

On _____(date of the meeting)_____, we met to review the evaluation/assessment data on your child, including any evaluations or information you provided, current classroom-based assessments and observations, and teacher or other staff observations to determine, with your input:

- Whether your child was eligible for special education.
(should be checked ONLY for initial or re-evaluation)
- Special education and related services needed by your child.
(should always be checked as this is what is discussed/decided at the meeting)
- The appropriate educational placement to provide special education and related services identified in your child's Individual Education Program (IEP).
(should always be checked as this is what is discussed/decided at the meeting)
- Any additions, changes or modifications to the special education and related services or educational placement that are needed to enable your child to meet the measurable annual goals set in the IEP and to participate, as appropriate, in the general curriculum.
(should always be checked as this is what is discussed/decided at the meeting)

To the maximum extent appropriate, your child is to be educated with other children in the general education classroom. Your child shall be removed from the general educational environment only when the nature or severity of his/her needs are such that education in general education classes, with support services, cannot be achieved satisfactorily. If services are not to be provided in the general education classroom, the reasons for that are given below, along with the results of our meeting.

Section A. **This section should only be completed if it is an initial evaluation or a re-evaluation, in which case the psychologist will be completing this form.**

A. **IDENTIFICATION/ELIGIBILITY (Parental Consent Not Required)**

YOUR CHILD IS ELIGIBLE FOR SPECIAL EDUCATION

Your child meets the criteria as a child with an exceptionality, (Specify Exceptionality) _____,

and

Special education services are necessary to enable your child to receive educational benefits in accordance with his/her abilities or capabilities.

YOUR CHILD IS NOT ELIGIBLE FOR SPECIAL EDUCATION

Your child does not meet the criteria as a child with an exceptionality,

or

Special education services are not necessary to enable your child to receive educational benefits in accordance with his/her abilities or capabilities.

- B SPECIAL EDUCATION & RELATED SERVICES (Parental Consent Required)** As explained below, an Individualized Education Program (IEP) proposing appropriate Special Education and related services was written for your child.

Section B will always be checked unless it is an Exit IEP.

- C EDUCATIONAL PLACEMENT (Parental Consent Required)** As explained below, an Individualized Education Program (IEP) proposing an appropriate instructional environment for delivering special education and related services was written for your child.

Section C will always be checked with an explanation of the proposed placement written in the box. For example: Special education services in a special education classroom in a regular education building.

D. CHANGE IN SERVICES

- 1 **CHANGE IN SERVICES (Parental Consent Not Required)** As explained below, we are proposing a change (not a material change) of a special education service, a related service, or a supplementary aid or service specified on your child's IEP.

Section D1 will only be checked if there is a minor change in services proposed. An explanation of the change must be provided.

For example: Speech services will increase from 20 minutes to 25 minutes two days per week.

OR

- 2 **MATERIAL CHANGE IN SERVICES (Parental Consent Required)** As explained below, we are proposing a change that results in a decrease or increase of 25% or more of the duration or frequency of a special education service, a related service, or a supplementary aid or a service specified on your child's IEP.

Section D2 will only be checked and an explanation provided if there is a major change in the duration or frequency of a service. For example: Special education services for math will be increased from 2 days per week to 5 days per week.

E. CHANGE IN PLACEMENT

- 1 **CHANGE IN PLACEMENT (Parental Consent Not Required)** As explained below, we are proposing a change (not a substantial change) in placement from a less restrictive environment to a more restrictive environment, or from a more restrictive environment to a less restrictive environment.

Section E1 will only be checked and an explanation provided if a minor change from special education pullout services to inclusion support in general education classes, or vice versa, is proposed. For example: Homework completion assistance (10 minutes at the end of the school day) will change from the special education classroom to the general education classroom with special education support.

OR

- 2 **SUBSTANTIAL CHANGE IN PLACEMENT (Parental Consent Required)** As explained below, we are proposing a change in placement that results in the movement of more than 25% of your child's school day from a less restrictive environment to a more restrictive environment, or from a more restrictive environment to a less restrictive environment.

Section E2 will only be checked and an explanation provided if a substantial change in placement is proposed. For example: Math and English classes will be changed from 80 minutes each daily in a general education class with special education support to a special room setting for 80 minutes each daily.

- F. THE COOPERATIVE [LEA] REFUSES TO INITIATE OR CHANGE THE IDENTIFICATION,**

EVALUATION, EDUCATIONAL PLACEMENT, OR PROVISION OF SPECIAL EDUCATION AND RELATED SERVICES AS EXPLAINED BELOW. (Parental Consent Not Required)

This box should NEVER be checked unless you have discussed the situation with a Cooperative Director, or Assistant Director.

1) A. A DESCRIPTION OF THE ACTION PROPOSED OR REFUSED:

This is the statement that is most critical on the ESC 99 and should exactly match the Special Education Services, Related Services and the Anticipated Services Chart. It should be written in the following format:

(Student) should receive special education services in a special education classroom for (subject(s)) and in a general education classroom for (subject(s)) for the same class period as his/her general education peers, for the duration of the IEP.

(Student) should receive (related service) for (minutes) per (day/week/month) in a (general/special) education classroom for the duration of the IEP.

If the student takes a class that is not offered in regular education such as learning strategies or study skills, state the number of class periods for that service (ie: Study skills for one class period 3 days per week.). If the student receives services for only a portion of a class period, the minutes must be specified.

The easiest way to complete this section is to copy and paste from the Special and Related services sections on the IEP directly to the ESC 99.

2) EXPLANATION OF WHY THE ACTION IS PROPOSED OR REFUSED:

Examples: She continues to qualify for, and require these services to make adequate gains in her education. The Team agrees that these services best address his educational needs. The services outlined target the educational need demonstrated. The services proposed will allow the student to continue current educational progress.

3) OPTIONS CONSIDERED AND WHY THE OPTIONS WERE REJECTED:

Examples: Less special education service was rejected as not enough support to promote success. More time spent in the resource room was rejected as too restrictive. Dismiss from services rejected as not providing necessary educational support. Additional para support instead of pullout rejected as not intensive enough to meet his needs.

4) DESCRIPTION OF THE DATA USED AS A BASIS FOR THE PROPOSED OR REFUSED ACTION

(Including each evaluation procedure, assessment, record, or report used as a basis for the proposed or refused action):

Examples: Progress Reports, Previous cognitive and/or academic assessment, related services reports, teacher assessments (formal/informal), grades, administrative reports, behavioral records, record review, social/emotional assessments, student performance, parent input, teacher observation, etc.

5) OTHER FACTORS RELEVANT TO THE PROPOSAL OR REFUSAL (E.G. LRE, harmful effects):

This section requires a statement of the possible harmful effects of the program proposed (academic, social/emotional, etc.) and why/how they can be overcome. For example: The possible harmful effects of missing academic instruction in the general education classroom will be outweighed by the potential for additional academic growth.

