

Synergy SE[®] National Documents Guide



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This edition applies to Synergy SE[™] software and all subsequent releases and modifications until indicated with new editions or revisions.

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ABOUT THIS MANUAL

Edupoint Educational Systems develops software with multiple release dates for the software and related documentation. The documentation is being released in multiple volumes to meet this commitment.

The table below lists the release date, software version, documentation volume number, and the content included in each volume of documentation to date.

Software and Document History

Date	Volume	Edition	Revision	Content
August 2012	1	1	1	Initial release of this document. This document with this title is new. The content was formerly a part of the Synergy SE User Guide. It includes new screens and functionality from the November 2011 release.

CONVENTIONS USED IN THIS MANUAL

Bold Text	Bold Text - Indicates a button or menu or other text on the screen to click, or text to type.
	Tip – Suggests advanced techniques or alternative ways of approaching the subject.
	Note – Provides additional information or expands on the topic at hand.
1	Reference – Refers to another source of information, such as another manual or website
CAUTION!	Caution – Warns of potential problems. Take special care when reading these sections.

BEFORE YOU BEGIN

Before installing any of the Edupoint family of software products, please be sure to rescreen the system requirements and make sure the district's computer hardware and software meet the minimum requirements. If there are any questions about the system requirements, please contact an Edupoint representative at (877) 899-9111.



Caution: The Edupoint family of software does not support the use of pop-up blockers or third-party toolbars in the browser used to access Synergy SE. Please disable any pop-up blockers (also known as pop-up ad blockers) and extra toolbars in the browser before logging into any Edupoint product.

At any point, if there are any technical difficulties, please contact the Edupoint technical support team at support@edupoint.com or by phone at 1-877-899-9111 option 1.

Chapter One: MANAGING SYNERGY SE DOCUMENTS

In this chapter, the following topics are covered:

- Documents Overview
- ► Ad Hoc Documents Overview
- ► Historical Documents Creating and Viewing
- Process Documents Creating, Editing and Viewing

SE DOCUMENT OVERVIEW

There are three main groups of documents for the SE student: Ad Hoc, Historical, and Process documents.

• Ad Hoc

Synergy SE Ad Hoc documents are special education documents created for a specific purpose. They are not necessarily used in every special education student's documentation. An example of an Ad Hoc document might be a More Restrictive Placement document or a Notice of Refusal of Evaluation document.

Ad Hoc documents are found on the SE Student, Ad Hoc Documents tab. They can be accessed directly from there by clicking the Edit link. To access them on the Portfolio screen, click the Edit link under the Ad Hoc Docs column.

• Historical

Synergy SE Historical documents are the documents that have been completed and finalized in Synergy SE. This area contains attached documents, also.

Historical documents are found on the SE Student, Historical Documents tab. They can be accessed directly from there by clicking the View link. To access them on the Portfolio screen, click the View link under the Historical Docs column.

Process

Synergy SE Process documents are the required documents that pertain to the various special education processes such as an initial evaluation or an annual review. An example of a Process document would be the IEP.

Process documents are found on the SE Student, Process Docs tab. They can be accessed by clicking on the specific document icon in the Doc column. To access them on the Portfolio screen, click the specific document icon under the Process Docs heading.



Note: For a list of Ad Hoc and Process documents see: <u>Ad Hoc Documents</u> and/or <u>Process Documents</u>. This list may not be a complete list, as your district may have additional or similar documents.

NAVIGATION

NAVIGATE TO THE SE STUDENT SCREEN:

1. Open the Synergy SE Navigation Tree by clicking on the Tree button.



2. Expand the **Synergy SE** folder by clicking on the name Synergy SE or ▶ pointing next to the word. Once clicked, the triangle will turn green **v** and point downward.



3. Under the Synergy SE folder, click on the name **Student** or pointing right next to it.



- 4. Click on the SE Student screen.
- 5. Select from one of the tabs described above.
- 6. Select the document by clicking on the appropriate link.

NAVIGATE TO THE PORTFOLIO SCREEN:

1. Open the Synergy SE Navigation Tree by clicking on the Tree button.



2. Expand the Synergy SE folder by clicking on the name **Synergy SE** or ▶ pointing next to the word. Once clicked, the triangle will turn green ▼ and point downward.



3. Under the Synergy SE folder, click on the name **Portfolio** or click pointing right next to it.



4. Click on the **Portfolio** screen. Process documents are represented by colored icons that signify their status of completion



Figure 1-7 Process Docs Icon Color Legend

5. Click on the document icon or link to open it in edit mode. The Historical documents are view only.

EDITING DOCUMENTS

UNDERSTANDING SE DOCUMENT PROPERTIES

SE Document properties differ in their ability to be edited and saved. This is intentional for several reasons. By law, certain documents may not be changed once the multidisciplinary education team has agreed on the contents. They may be amended and duplicated but the original document needs to stay intact.

However, unintentional errors can occur when composing documents. Synergy SE helps to ensure accuracy by validating and finalizing documents. Validating a document means the document is being checked for errors. If errors are found, the document may be edited again and then validated again. This process can be done over and over. If the document is validated and no errors are found, it may be finalized or it may be saved for further edits. Once a document is finalized, it is complete and no longer an editable document.



Figure 1-8 SE Document Properties

MULTIPLE USERS IN A DOCUMENT

Two or more users can work in the same document concurrently while saving their data; however, those users will not be able to edit the same field at the same time.

For example, if both users are in the Referral document and editing the **Reason for Referral textbox**, the first user who clicks <u>Save</u> will have their data saved.

The second user will receive the following warning message upon clicking Save :

Microsoft Internet Explorer 🛛 🛛 🔀							
♪	Another user has already changed the same data you just tried to change. Please re-enter your changes.						
	ОК						

Figure 1-9 Multiple Users Message



Note: This warning message is defined locally and may be worded differently by your system administrators.

The second user will need to copy their data to another location (i.e. Word, Notepad) momentarily, and **Refresh** the screen (click) to allow the other user's entry to appear. Then the user can copy and paste their original data to that field and click <u>Save</u>.

DELETING A DOCUMENT

An existing document can be removed by using the Delete feature. Access to the Delete button is governed by the security rights and may not be available to all users.

Menu	Save	Undo	Delete	Print Preview	Validate	Finalize
∀Ref	ferra	I				

Figure 1-10 Delete Button

To delete a document:

1. Click the **Delete** button located at the top of the document. If the Delete button is grayed out (not clickable), click <u>Save</u> or <u>undo</u>. A message will display confirming the deletion of the document.

Windows	Internet Explorer						
2	Data deletion cannot be undone.						
Are you sure you want to delete all data for this StudentDocument?							
	OK Cancel						

Figure 1-11 Data Deletion Warning

2. To continue with the deletion, click **OK**. To cancel the deletion, click **Cancel**. The document will close and the system will return to the previous screen.

PRINTING A DOCUMENT

Printable versions of documents are available at any time during the document editing process. A document does not need to be validated or finalized prior to viewing or printing the document.



Note: In order to generate printable Synergy SE documents, Adobe Acrobat Reader must be installed on the user's computer.

To obtain a printable version of a document:

1. Click the **Print Preview** button in the Action bar of the document. If the Print Preview button is grayed out (not clickable), click **Save** or **Undo**.



Figure 1-12 Print Preview Button

A message displays informing the user to wait. The printable document opens in Acrobat Reader.



VALIDATING A DOCUMENT

Before a document can be finalized, validation must occur. This process compares data entered in the document against rules established by the district to find omissions, data conflicts or invalid selections. If errors are found, a window opens that contains a list of the errors.

To validate a document:

Menu Save Undo Delete Print Preview	Validate	Finalize
∀Referral		

Figure 1-14 Validate Button

2. Click the **Validate** button in the Action Bar of the document. If the Validate button is grayed out (un-clickable) Click Save or Under.

If validation errors exist, the Revelation Document Errors screen displays, detailing the errors.

ſ	2 validation errors were found						
	Document Errors				() ()		
	Line View	Tab	Grid/Tree	Control	Error Message		
	Prior Written Notice	Prior Written Notice			A response to 'Explanation of why the district proposes or refuses to take the action' is required.		
	2 Prior Written Notice	Prior Written Notice			Explanation of why the district proposes or refuses to take the action' is required.		

Figure 1-15 Revelation Document Errors Screen

3. Click anywhere on the line of the **Document Error**. The line highlights green. The document displays with the specific validation error highlighted in pink.

Explanation of why the district proposes or refuses to take the action:	
	V

Figure 1-16 Document Error

- 4. Make the correction in the highlighted field and click <u>Save</u>.
- 5. Proceed to the next validation error on the list by clicking anywhere in the row of that error.
- 6. Follow step 3 and 4 until all validation errors have been addressed.
- 7. Close the Validation Document Errors window.



Figure 1-17 Close Window

8. If desired, click on the **Validation** button again to re-check the validation status. A message box displays stating that no validation errors were found.



Figure 1-18 No Validation Errors Found

FINALIZING A DOCUMENT

Caution: Finalizing a document prepares *most* documents for moving to the historical document file, after the process move. However, there are documents, that when finalized, begin the process move procedure OR exit the student from special education. These documents include the IEP as well as certain Prior Written Notices. See *Documents with Unique Functionality* for more detail. The IEP is the main "trigger" document that moves all created documents including the IEP itself, to Historical Documents. See <u>Process Documents – Finalizing the IEP</u> for detailed information.

When a document is complete and has been validated, it will need to be finalized. This action will prepare the document to move to the student's historical document file when the process change occurs.

Once a document is finalized, it will no longer be editable. The document will open as a read-only PDF document (Acrobat Reader is required). The icon representing the document will turn from yellow to green.

To Finalize a Document:



Note: The validation process runs automatically when a document is finalized. If the document is found to have validation errors, the user must follow the steps required in the <u>Validating a Document</u> process. Once the validation errors are corrected the document will finalize properly.

1. Click the **Finalize** button in the Action Bar of the document. If the Finalize button is grayed out (un-clickable) click <u>Save</u> or <u>Undo</u>.

Menu▼	Save	Undo	Delete	Print Preview	Validate	Finalize
∀Re	ferra					

Figure 1-19 Finalize Button

A printable (but no longer editable) document displays. The finalized document displays a green icon. When clicked, the document will open only as read-only.

CREATING MULTIPLE DOCUMENTS

Documents such as Meeting Requests and Parent Permission can have additional versions created after the original document has been finalized. For example, if a Meeting Request was created and sent to the parent but later the meeting had to be cancelled due to a no show or some other reason, a new meeting request can be created. The original request document will be saved along with the new request document. This will provide a history of the meetings that were attempted to be set up.



This example will show how to create multiple IEP Meeting Request documents using the IEP Meeting Request. The original meeting request has been created but the meeting was cancelled due to the parent not showing up.



Figure 1-20 Finalize Button

1. If the original meeting request has not been finalized, do so now.

The meeting request icon displays green, indicating that it has been finalized.



Figure 1-21 Finalized Document Icon

2. Click on the **green icon** to access the new meeting request template. The **DocumentViewList** screen opens.

The DocumentViewList screen contains a Create button as well as a list of previously finalized Meeting Requests. This list provides information on the original Meeting Request documents including when the document was created and finalized as well as who created and finalized the document. The PDF icon is the link to view the finalized original document.

♥DocumentViewList					(«				
Student Name: Abbott, Billy C. Gender: Male Grade: 12									
Documents									
Draft Document (
Create									
Finalized Document(s)									
Line Document Name	Created On	Created By	Finalized On	Finalized By	PDF				
1 IEP Meeting Request	08/06/2012	Admin User	08/13/2012	Admin User					

Figure 1-22 Meeting Request Document View List

3. Click the **Create** button. A new Meeting Request template displays. This document will represent the new meeting that has been rescheduled. Once this document is finalized, it displays in the finalized Document list along with the original document.

All multiple documents will move along with the process documents to the student's Historical Documents during the normal process move procedure.

AD HOC DOCUMENTS

Synergy SE Ad Hoc documents are special education documents created for a specific purpose. They are not necessarily used in every special education student's documentation. An example of an Ad Hoc document might be a More Restrictive Placement document or a Notice of Refusal of Evaluation document. Ad Hoc documents contain editable as well as print only documents.

Note: For the purpose of illustration the following screen shots contain an abbreviated list of available Ad Hoc documents. For a list of Ad Hoc and Process documents see <u>Ad Hoc Documents</u> and/or <u>Process Documents</u>. These lists may not be complete, as your district may have additional or similar documents added.

The Ad Hoc Documents tab contains the student's demographic information in the top section.

• Existing Documents

This section includes all Ad Hoc documents that have been created for the student, including Print Only documents.

• Document Creation

This section includes the list of all Ad Hoc documents available for creation. (Please see note above for list.)

• Create

This link will create a new Ad Hoc Document and make it available to edit.

• Edit

This link will open a previously created document and make it available to edit.

• View

This link will open a *finalized* Ad Hoc document. These documents are printable but read-only.

VSE STUDENT					(**	
Student Name: Abbott, Billy C. Gender: Male Grade: 12 Primary disability: AUTISM School: Hope High School						
Demographics Parents	Team Ad Hoc Docume	Historical Documents	Process Docs	Timeline	Student Con	tact Log
Last Name	First Name	Middle Name	Suffix Student	ID Gend	er Grad	e
Abbott	Billy	C	905483	Male		~
Existing Documents						<u></u>
X Line Document Date	X Line Document Date Document ID Document Name Act		Action			
1	GENAZ 31	Conference Summary				Edit
2 06/06/2012	GENAZ 49	Print Only - IEP Signatu	re Page			<u>View</u>
Document Creation						Ó
Line Document ID Document Name			Action			
GENAZ 29 Amendment			Create			
2 GENAZ 30 Cla	GENAZ 30 Classroom Observation				Create	
3 GENAZ 31 Conference Summary			Create			
4 GENAZ 32 Consultation Request			Create			

Figure 1-23 Student SE Screen Ad Hoc Documents Tab

The following example demonstrates how to create an Ad Hoc document using the Consultation Request (GENAZ 32), however, other documents could be used (excluding Print Only).

- 1. Locate GENAZ 32 Consultation Request in the Document Creation grid.
- 2. Click on the **Create** link in the Action column for this document. A new Consultation Request Document opens.

Docu	Document Creation					
Line	Document ID	Document Name	Action			
1	GENAZ 29	Amendment	Create			
2	GENAZ 30	Classroom Observation	Create			
3	GENAZ 31	Conference Summary	Create			
4	GENAZ 32	Consultation Request	Create			

Figure 1-24 Student SE Screen Ad Hoc Documents Tab Document Creation

3. Edit and enter data as appropriate.

Menu 🗸 Save Undo Delete Print Preview Validate Finalize Status: Ready 🥹 🏄						
Consultation Request						
Student Name: Abbott, Billy C. Document: GENAZ 32 Description: Consultation Request						
Request for Consultation Parent Permission						
Document Name						
Consultation Request						
Document Date						
03/05/2012						
Request for Consultation						
Date of Request Best Time to Observe						
03/05/2012 📴 Mornings						
School/Room Number						
Hope High School, Room 18	Hope High School, Room 18					
Person Requesting Consultation						
Mrs. Phelps						
Position of Person Requesting Consultation Telephone Date Rece						
Classroom Teacher 555-1234 03/05/2012						

Figure 1-25 Consultation Request Screen Save Button

4. Click <u>Save</u> to save changes and **Close** the document.

The Ad Hoc Document window displays the Consultation Request document in the Existing Documents section of the screen.

VSE STUDENT										
Student Name: Abbott, Billy C. Gender: Male Grade: 12 Primary disability: AUTISM School: Hope High School										
Demographics	Parents Team	Ad Hoc Docume	ents	Historical Documents	Proces	ss Docs Tir	neline	Stude	nt Conta	act Log
Last Name	Fir	st Name		Middle Name	Suffix	Student ID	Gende	er	Grade	•
Abbott	Bi	lly		С		905483	Male	~	12	~
Existing Docume	ents									9
X Line Docum	ent Date	Document ID	Docur	ment Name						Action
1 03/0	05/2012	GENAZ 32	Cons	ultation Request						Edit
2 06/0	06/2012	GENAZ 49	Print	Only - IEP Signatu	re Pag	e			1	View

Figure 1-26 Student SE Screen Ad Hoc Documents Tab Existing Documents

At this point, the Consultation Request document is available for updates as additional data becomes available or the document can be finalized. Once the document is finalized, the Action column link will change from <u>Edit</u> to <u>View</u>. The document displays in read-only mode (PDF).

CREATING MULTIPLE AD HOC DOCUMENTS

The following example demonstrates how to create multiple Ad Hoc documents using the Consultation Request (GENAZ 32), however other documents could be used (excluding Print Only).

Docu	Document Creation					
Line	Document ID	Document Name	Action			
1	GENAZ 29	Amendment	Create			
2	GENAZ 30	Classroom Observation	Create			
3	GENAZ 31	Conference Summary	Create			
4	GENAZ 32	Consultation Request	Create			

Figure 1-27 Student SE Screen Ad Hoc Documents Tab Create Link

- 1. Locate GENAZ 32 Consultation Request in the Document Creation grid.
- 2. Click on the **Create** link in the Action column for this document. A new Consultation Request Document opens.
- 3. Edit and enter data as appropriate.
- 4. Click <u>Save</u> to save changes and **Close** the document.



Figure 1-28 Student SE Screen Ad Hoc Documents Tab Save Button

The new Consultation Request document displays in the Existing Documents section.

VSE STUDENT										
Student Name: Abbott, Billy C. Gender: Male Grade: 12 Primary disability: AUTISM School: Hope High School										
Demographics	Parents Te	am Ad Hoc Docum	ents	Historical Documents	Proce	ss Docs	Timeline	Stude	nt Cont	act Log
Last Name		First Name		Middle Name	Suffix	Student	ID Gend	ler	Grade	
Abbott		Billy		С		905483	Male	~	12	~
Existing Docum	nents									9
X Line Docu	ment Date	Document ID	Docur	nent Name						Action
1 03	3/05/2012	GENAZ 32	Const	ultation Request						Edit
2 03	/05/2012	GENAZ 32	Cons	ultation Request						Edit
3 06	6/06/2012	GENAZ 49	Print	Only - IEP Signatu	ire Pag	e				View

Figure 1-29 Student SE Screen Ad Hoc Documents Tab Multiple Ad Hoc Documents

At this point, the second Consultation Request document is available for updates as additional data becomes available or the document can be finalized, just like the first. Once the document is finalized, the Action column link will change from <u>Edit</u> to <u>View</u>. The document displays in read-only mode (PDF).



PRINT ONLY AD HOC DOCUMENTS

Print-only Ad Hoc documents open as read-only (PDF) documents. They are not editable; however they include the individual demographic data of each student. The date that appears on the document is the date when the print-only document was initially created or opened. Print-only documents are labeled Print Only in the Document Name column. View Print-Only Ad Hoc Document:

1. In the Document Creation section, click the **Create** link in the Action column. The document displays in read-only (PDF) which is printable.

Docu	Document Creation 📀					
Line	Document ID	Document Name	Action			
1	GENAZ 24	Transfer Process	Create			
2	GENAZ 29	Amendment	Create			
3	GENAZ 30	Classroom Observation	Create			
4	GENAZ 31	Conference Summary	Create			
5	GENAZ 32	Consultation Request	Create			
6	GENAZ 33	Consultation Request - PreSchool	Create			
7	GENAZ 34	Functional Behavior Assessment Plan	Create			
8	GENAZ 37	Manifestation Determination and Review Documentation	Create			
9	GENAZ 38	Meeting Request	Create			
10	GENAZ 39	More Restrictive Placement Referral	Create			
11	GENAZ 40	Prior Written Notice	Create			
12	GENAZ 41E	Notice of Refusal of Evaluation	Create			
13	GENAZ 41F	Notice of Refusal of FAPE	Create			
14	GENAZ 42	Request for Bilingual Transcription	Create			
15	GENAZ 43	Summary of Performance	<u>Create</u>			
16	GENAZ 44	Transportation Request	Create			
17	GENAZ 45	Print Only - Alternate Assessment Eligibility Criteria Form	<u>Create</u>			
18	GENAZ 46	Print Only - APE Instruction Letter - Print	Create			
19	GENAZ 47	Print Only - Eye Exam Report	<u>Create</u>			
20	GENAZ 48	Print Only - IEP Attendance Form	Create			
21	GENAZ 49	Print Only - IEP Signature Page	<u>Create</u>			
22	GENAZ 50	Print Only - Information Processing Worksheet for SLD	Create			

Figure 1-31 Create Print Only Document

The Print Only Document displays in the Existing Document section with View as the Action link.

VSE STUDENT								
Student Name: Abbott, Billy C. Gender: Male Grade: 12 Primary disability: AUTISM School: Hope High School								
Demographics	Parents Team	Ad Hoc Docume	nts Historical Documents	Proces	s Docs T	imeline	Student Con	tact Log
Last Name	Fir	st Name	Middle Name	Suffix	Student ID	Gend	er Grad	e
Abbott	Bi	lly	C		905483	Male	¥ 12	~
Existing Docume	ents							
X Line Docum	nent Date	Document ID	Document Name					Action
1 03/	05/2012	GENAZ 32	Consultation Request					Edit
2 03/	05/2012	GENAZ 32	Consultation Request					Edit
3 03/0	05/2012	GENAZ 49	Print Only - IEP Signatu	ure Page	•			<u>View</u>

Figure 1-32 Print Only Doc in Existing Docs

DELETING AD HOC DOCUMENTS

Note: The ability to delete a document is based on a user's security level set up by individual district administration.

To delete an Ad Hoc document:

1. Check the box on line of document to delete.

2. Click save at the top of the screen. The document is permanently deleted.

VSE STUDENT					
Student Name: Abbott, Billy C. Gender: Male Grade: 12 Primary disability: AUTISM School: Hope High School					
Demographics Parents Team Ad	Hoc Documents Historical Documents	Process Docs Timeline Stu	dent Contact Log		
Last Name First Name Billy	me Middle Name C	Suffix Student ID Gender 905483 Male	Grade Grade		
Existing Documents			Q		
X Line Document Date Docum	nent ID Document Name		Action		
✓ 1 03/05/2012 GENA	Z 31 Conference Summary		Edit		
2 03/05/2012 GEN/	AZ 32 Consultation Request		Edit		
3 06/06/2012 GENA	AZ 49 Print Only - IEP Signatu	re Page	View		

Figure 1-33 Delete Column in Ad Hoc Documents

MOVING AD HOC DOCUMENTS TO HISTORICAL DOCUMENTS

Finalized Ad Hoc Documents will be moved to the student's Historical Documents whenever a Process Rollover is conducted. There are a few exceptions to this rule.

Print Only Ad Hoc documents are not saved to the student's Historical Documents file. Once a Print Only Ad Hoc document is generated, it resides in the Ad Hoc, Existing Documents list until a Process Rollover is conducted. At that point, all Print Only Ad Hoc documents are permanently removed from the system.

Certain Ad Hoc documents, such as the Consultation Request, are not required to be finalized at the time of a Process Rollover. The system allows the user to follow through with the Process Rollover and leave the Consultation Request in edit mode. The Consultation Request will continue to reside in Ad Hoc until finalized. The finalized version of this document will move to Historical Documents during the next Process Rollover.

Ad Hoc documents such as the Prior Written Notice and Meeting Request are required to be finalized prior to any Process Rollover. At that point they will be moved to Historical Documents with the student's current process documents.



Note: Each school district's system administrator has the ability to set Ad Hoc documents up "Outside the Process", which means they are not required to be finalized in order to conduct a Process Rollover. They move to Historical Documents during the next Process Rollover **only** if finalized.



Chapter Two: AD HOC DOCUMENTS

In this chapter, the following topics are covered:

- ► What SE Ad Hoc Documents are available
- ► How to create, save, validate and finalize specific documents

AD HOC DOCUMENTS

GENAZ 30	Classroom Observation
GENAZ 31	Conference Summary
GENAZ 32	Consultation Request
GENAZ 33	Consultation Request PreSchool
GENAZ 34	Functional Behavior Assessment Plan
GENAZ 37	Manifestation Determination and Review Documentation
GENAZ 38	Meeting Request
GENAZ 39	More Restrictive Placement Referral
GENAZ 40	Prior Written Notice
GENAZ 41E	Notice of Refusal of Evaluation
GENAZ 41F	Notice of Refusal of FAPE
GENAZ 42	Request for Bilingual Transcription
GENAZ 43	Summary of Performance
GENAZ 44	Transportation Request
GENAZ 45	Print Only Alternate Assessment Eligibility Criteria Form
GENAZ 46	Print Only APE Instruction Letter Print
GENAZ 47	Print Only Eye Exam Report
GENAZ 48	Print Only IEP Attendance Form
GENAZ 49	Print Only IEP Signature Page
GENAZ 50	Print Only Information Processing Worksheet for SLD
GENAZ 51	Print Only Medical Verification For Other Health Impaired (OHI)
GENAZ 52	Print Only Medical Verification For Orthopedically Impaired (OI)
GENAZ 53	Print Only Medical Verification For Traumatic Brain Injury (TBI)

GENAZ 54	Print Only Photo Release
GENAZ 55	Print Only Reevaluation Agreement
GENAZ 70	Print Only MET Review
GENAZ 71	Print Only Special Ed Signature Checklist
GENAZ 72	Print Only Special Activity Request
GENAZ 73	Print Only Transportation Monitor Request
GENAZ 74	Print Only Internet and Media Opt Out Form English
GENAZ 75	Print Only Internet and Media Opt Out Form Spanish
GENAZ 99	Behavior Intervention Plan
GENAZ 100	Notice of Graduation
GENAZ 500	ESY Letter
GENAZ 501	TAP Letter
GENAZ 502	TAP Parent Notice
GENAZ 503	ESY Eligibility Profile
GENAZ 504	Notice of Section 504 Student Eligibility Form
GENAZ 505	ESY Addendum
GENAZ 700	Health Aide Prepayment Review Form

GENAZ 30 – CLASSROOM OBSERVATION

The Classroom Observation contains one tab:

Classroom Observation

♥ClassroomObservation				
Student Name: Tacho, Katherine A. Document: GENAZ 30	Description: Classroom Observation			
Classroom Observation				
Document Alias				
Classroom Observation				
Document Date				
Name and Job Title of Observer				
Date of Observation				
Beginning and Ending Time of Observation				
Location of Observation				
Activity Observed				
Description of Physical Environment				
Number of students and adults in classroom				
In the sections below, choices are Yes, No or Not Observ	/ed			
All "No" answers require explanation.				
Appearance	G			
Learning Behaviors	G			
Social and Compliance Behaviors	G			
Observation Notes 🕎 🛇				
	.tt.			

Figure 2-1 Classroom Observation

To create a Classroom Observation document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Enter Name and Job Title of Observer in the textboxes provided
- 3. Enter **Date of Observation** (MMDDYY) or click IP and select date.
- 4. Enter **Beginning and Ending Time of Observation** (HHMM 0800 for 8:00 AM, 0120 for 1:20 PM, etc.).
- 5. Enter data in textboxes provided.
- Appearance, Learning Behaviors and Social and Compliance Behaviors sections are composed of Yes / No / Not Observed drop downs. If No is selected, enter explanation in textbox provided.

7. Click O on the title bar to view, if necessary.

Title Bar		0
	Figure 2-2 Dropdown Access	

- 8. An **Observation Notes textbox** is available, if needed. Click 🐨 to spell check. Click 📀 for additional space.
- 9. Click <u>Save</u> at top of the screen when finished.

The document can be printed, validated and finalized.

GENAZ 31 – CONFERENCE SUMMARY

The Conference Summary contains two tabs:

- Conference Summary
- Recommendations

Conference Summary	(«
Student Name: Tacho, Katherine A. Document: GENAZ 31 Description: Conference	ummary
Conference Summary Recommendations	
Document Name	
Conference Summary	
Document Date	
Conference Summary	Q
TAT/CST MET IEP FBA/BIP Manifest Dertermination Other	
Dresent	ii.
Disample	
Discussion	v
Other Information	٩

Figure 2-3 Conference Summary

To create a Conference Summary document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Check the Conference Summary type.
- 3. An **Other** checkbox is available with a textbox for explanation, if needed. Click 🕎 to spell check. Click 💟 for additional space.



Figure 2-4 Dropdown Access

- 4. Click \bigcirc on the title bar to view, if necessary.
- 5. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.

Par	rent(s)/Guardians(s)				(Q)
Lin	e Parent Name	Relation Type	Educational Rights	Contact Allowed	Participant
	1 Kelly, Louise	Mother	Yes	Yes	2
	2 Wilkinson, Samuel	Step-Father	Yes	Yes	
:	3 Smith, Brian	Father	No	No	

Figure 2-5 Parent(s)Guardian(s) Check Parent

 On the Parent(s)/Guardians(s) section, check Participant, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Staff				
ĸ	Line	Staff Name	Role	
1	1	<u>Green, Tom</u> ←	Case Carrier 👻	
	2	User, Admin +	Teacher Specialist 👻	

Figure 2-6 Staff Section Change/Add

Change current staff names:

- 1. Click next to the Staff Name to change. The Find: Staff screen displays.
- 2. Enter all or part of staff Last Name, First Name.
- 3. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.

Find Close Select Clear Selection				
Find: Staff				
Find Criteria		6		
Last Name	First Name	Middle Name		
Smith	С			
Search Results				
Find Result		6		
Line Last Name	First Name	Middle Name		
1 Smith	Christine			
2 Smith	Jk			

Figure 2-7 Find: Staff Screen

- 5. Click again or click set. Find: Staff screen closes and staff name displays.
- 6. Click the **Role** dropdown and select the staff role.

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.

Staf	Staff			Orient./Mobility Specialist	
$ \mathbf{X} $	Line	Staff Name	Role	Other	
	1	Green, Tom	Case Carrier 🗸	Physical Therapist	
	2	User, Admin +	Teacher Specialist 🗸 🗸	Ps y chologist	
	3	Smith, John +	~	Reader	
_				- · · · ·	

Figure 2-8 Staff Section Select Role

3. If needed, check a on the line of the staff name to remove. The row is removed.

The Other Specialists section will allow for participant names that are not available in the Staff directory.

- 1. Click the **Add** button on the Other Specialists bar. A new row will be added.
- 2. Enter the Name and Role of the specialist.

Other Specialists	Add 🔇
X Line Name	Role
🔲 1 Linda Harris	Social Worker

- Figure 2-9 Conference Summary Other Specialists
- 3. If needed, check 🔲 on the line of the staff name to remove. The row is removed.
- 4. Enter **Topics Discussed** and **Other Information** in the textboxes box provided. Use [™] to spellcheck. Use [♥] for more space.

RECOMMENDATIONS TAB

To add a recommendation:

1. Click the **Add** button under the Recommendations Made section. A new row displays.

Recommendations I	lade	Q
		Add 🔇
X Line Serial No.	Description	

Figure 2-10 Conference Summary Recommendations

- 2. Enter the **Serial Number** for the recommendation.
- 3. Describe recommendation in the textbox provided. Use 🖤 to spellcheck. Use 🛇 for more space.

To add a follow-up conference schedule:

Follow-Up Conference Schedule		
Date	Time	
Location		

Figure 2-11 Conference Summary Follow-Up

- 1. Enter Follow-Up Conference **Date** (MMDDYY) or click IP and select date.
- 2. Enter Follow-Up Conference Time (HHMM 0800 for 8:00 AM, 0120 for 1:20 PM, etc.).
- 3. Enter Follow-Up Conference Location.

The document can be printed, validated and finalized.

GENAZ 32 – CONSULTATION REQUEST

The Consultation Request contains two tabs:

- Request for Consultation
- Parent Permission

	~
Student Name: Tacho, Katherine A. Document: GENAZ 32 Description: Consultation Request	
Request for Consultation Parent Permission	
Document Name	
Consultation Request	
Document Date	
Request for Consultation	0
Date of Request Best Time to Observe	
School/Room Number	
Person Requesting Consultation	
Position of Person Requesting Consultation Telephone Date Received	
	6
Reason for Requesting a Consultation (specific educational concerns) 🕎 🛇	
Parent Permission for Appraisal and Handling	
Date	
This portion to be completed by staff member receiving request for consultation	0

Figure 2-12 Consultation Request Screen

To create a Consultation Request document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Enter **Date of Request** (MMDDYY) or click 🗊 and select date.
- 3. Enter Best Time to Observe, School/Room Number, Person Requesting Consultation, Position of Person Requesting Consultation and Telephone number.
- 4. Enter **Date Received** (MMDDYY) or click and select date. This is the date the consultant received the request.
- 5. Describe the **Reason for Requesting Consultation.** Use 🖤 to spellcheck. Use 🛇 for more space.
- 6. Check Parent Permission for Appraisal and Handling if it has been given.
- 7. Enter **Date of Parent Permission** (MMDDYY) or click Pand select date.
- 8. Click <u>Save</u> if finished or proceed below.
- 9. Click O on the title bar to view the next section, if necessary.

This portion to be completed by staff member receiving request

This portion to be completed by staff member receiving requ	lest for consultation	Q
Observation/Consultation Date Time Spent on Consultation	1	
Location/Setting		
Observation/Consultation Data 🕎 🛇		
Summary of Suggestions Made or Demonstrated 🕎 📀 🚽		
	.4	
Consultant		
Position		
Copies		
Teacher		
Service Provider		
Regional Director		

Figure 2-13 Consultation Request Screen Consultation Observations

- 10. Enter **Observation/Consultation Date** (MMDDYY) or click 🗊 and select date.
- 11. Enter Time Spent on Consultation and Location/Setting.
- 12. Describe Observation/Consultation Data and Summary of Suggestions Made or Demonstrated. Use [™] to spellcheck. Use [©] for more space.
- 13. Enter your name in **Consultant**.
- 14. Enter you Position title.
- 15. Check **Copies** distributed.
- 16. Check **Other** and specify whom in the textbox if copy will be distributed to someone else.

PARENT PERMISSION TAB

Add Referring Teacher

1. Click - next to **Referring Teacher.** The Find: Staff screen displays.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria				۵	
Last Name	First Na	ame	Middle Name		
Sm					
Search Results					
Find Result					
Line Last Name	F	First Name		Middle Name	
1 Smith	С	Christine			
2 Smith	JI	k			

Figure 2-14 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click find or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click set. Find: Staff screen closes and referring teacher name displays.

The following assessments/methods may be utilized to appraise skill levels	Add 🕻
X Line Description	

Figure 2-15 Consultation Request Screen Assessments/Methods

- 1. Click the **Add** button on The following assessments/methods may be utilized to appraise skill levels grid:. A new line displays.
- 2. Enter the **Description** of the assessment or method. Use 🖾 to spellcheck. Use 🛇 for more space.
- 3. If needed, check 🗍 on the line of assessment/method description to remove.
- 4. List any Medical Concerns, Special Handling Considerations and Service Provider and

List any Medical Concerns/Precautions/Medications 🕎 📀	_
Special Handling Considerations 🗒 🏈	
	ы
Service Provider and Position 🕎 🥥	
	.11
Parent Signature Date	

Figure 2-16 Consultation Request Screen Concerns and Special Handling

Positions. Use 🖾 to spellcheck. Use 🛇 for more space.

- 5. Enter **Parent Signature Date** (MMDDYY) or click 🗐 and select date.
- 6. Click Save .

The document can be printed, validated and finalized.

GENAZ 33 – CONSULTATION REQUEST – PRESCHOOL

The Consultation Request - Preschool contains two tabs:

- Reason for Request
- Background

Consultation Request - PreSchool
Student Name: Tacho, Katherine A. Document: GENAZ 33 Description: Consultation Request - Pre School
Reason for Request Background
Document Name Document Date
Consultation Request - PreSchool
Student's Current Identification What Direct Services does the Student Receive?
Preschool Moderate Delay Preschool Severe Delay VI Occupational Therapy Physical Therapy
Preschool Speech/Language Delay HI Speech/Language
Other
Referred By
Reason for Referral (Identify deficient skills. Please be specific and write in full sentences to describe problem areas/weaknesses.) 🕎 🧿
Student Strengths (Please describe areas of relative strength and positive attributes.) 🕎 🛇
.4

Figure 2-17 Consultation Request Preschool Screen

To create a Consultation Request - Preschool document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Check Student's Current Identification, if applicable.
- 3. Check the appropriate area under What Direct Services does the Student Receive.
- 4. Enter any Other service or identification that may apply.
- 5. In **Referred By**, enter the name of the referring person.
- 6. Describe the **Reason for Referral** and **Student Strengths**. Use 🕎 to spellcheck. Use 🗇 for more space.

Overa	verall Skills Please mark each statement Yes or No and add any relevant comments. Respond to each statement as it pertains to grade level expectations.						
Com	munication						
Line	e Yesilo						
1	Attends/listens in a group setting	~					
2	Appears to understand questions, and/or stories	~					
3	Uses correct sentence structure and grammar in oral communication	~					
4	Expresses ideas in a clear and organized fashion	~					
5	Can hold a conversation with a peer	~					
6	Can hold a conversation with an adult	~					
7	Uses appropriate social communication (eye contact, etc)	~					
8	Has articulation difficulties (does not use correct speech sounds)	~					
9	Speech is generally unintelligible	~					
10	Stutters	~					
11	Speaks with stereotyped/echolalic language	~					
12	Uses sentences of 4 or more words	~					
13	Uses at least 100 + recognizable words on regular basis	~					
14	Can follow 1-step direction	~					
15	Can follow 2-step related direction	~					
16	Can follow 2-step unrelated direction	~					
Other							

Figure 2-18 Consultation Request Preschool Screen Overall Skills

 Select Yes or No in each of the Overall Skills group boxes: Communication, Adaptive, Motor, and Personal/Social. An Other textbox is available in each section for additional skills.

BACKGROUND TAB

The student's attendance history imports from Synergy SIS. This history will only display attendance from the current school district.

Atte	ndance History						0
						Ade	d 🔇
X	Line Year	Grade	School Location	Absences	Significant Information		
	1 2009	12 💙	Hope High School	3	1 de la companya de l	*	

Figure 2-19 Consultation Request Preschool Screen Background Tab Attendance History

1. Significant Information may be added. Use 🖤 to spellcheck. Use 📀 for more space.

If additional school years need to be added:

At	ter	ıdan	ce History	1							6
										Add]0
×	<[Line	Year	Grade		School Location	Absences	Significant Information			
Г	1	1	2009	12	~	Hope High School	3	100			1
Г	1	2		1	~			♥ ◇	2		

Figure 2-20 Consultation Request Preschool Screen Background Tab New Attendance History

- 2. Click the **Add** button to display a new row.
- 3. Enter the school Year, Grade, School Location and Absences in the spaces provided. Significant Information can also be added to this row.
- 4. If needed, check on line of record to delete. The row will be removed.

Cultural Factors	
There is no evidence of lack of instruction in reading and r	math (including excessive absences and/or frequent moves).
The following cultural factors (race, limited English proficiency,	, or socio-economic status have contributed to the student's learning difficulties.
Please describe any cultural factors which may affect students	
Performance in Special and General Education 🕎 🥥	

Figure 2-21 Consultation Request Preschool Screen Background Tab Cultural Factors

- 1. Check the **Cultural Factors** statements that apply.
- 2. Describe any cultural factors which may affect student's achievement and behavior.
- 3. Describe Performance in Special and General Education. Click 🕎 to spell check. Click 🔮 for additional space.

Vision and Hearing results for the student will import from Synergy SIS, however, existing results can be edited or new results can be added to the Health view.

- 1. Click the Add button on the Vision Results bar. A new row displays.
- 2. Enter the **Screen Date** (MMDDYY) or click **and** select date.
- 3. Click the drop-downs box and select **Right Eye**, Left Eye and **Both Eyes** results.
- 4. Click the Add button on the Hearing Results bar. A new row displays.
- 5. Enter the **Screen Date** (MMDDYY) or click **P** and select date.

Med	Medical						0		
Vis	rision Results						Add		
\sim	Line Screen Date				Results				
\sim	Line Screen Date		Right Eye		Left Eye		Both Eyes		
	1 05/12/2010		20/30	*	20/40	*	20/30	~	
Hea	aring Results								Add
X	Line Screen Date		Right Result		Left Res	ult			
	1 05/12/2010	P	P	*	Р		*		

Figure 2-22 Consultation Request Preschool Screen Background Tab Medical

- 6. Click the drop-downs box and select **Right**, and **Left Results**.
- 7. If needed, check i on line of record to delete. The row will be removed.
- 8. Add any **Heath Issues** and **Medications** in the textboxes provided. Use 🖤 to spellcheck. Use 🛇 for more space.

Health Issues 🕎 🤡	Medications

Figure 2-23 Consultation Request Preschool Screen Background Tab Health Issues

9. Click Save

The document can be printed, validated and finalized.
GENAZ 34 – FUNCTIONAL BEHAVIOR ASSESSMENT PLAN

The Functional Behavior Assessment Plan works in conjunction with the GENAZ 99 -Behavior Intervention Plan.

/	
4	

Note: The Target Behavior listed in the Specifics tab will import into the GENAZ 99 – Behavior Intervention Plan (BIP).

The Functional Behavior Assessment Plan contains two tabs:

- Team Members
- Specifics

VFunctional Behavior Assessment Plan					(K	
Student Name: Tacho, Katherine A. Docum	nent: GENAZ 34	Description: Function	onal Behavior A	ssessment Plan		
Team Members Specifics						
Document Name						
Functional Behavior Assessment Plan	Functional Behavior Assessment Plan					
Document Date						
Team members who participated in developing	Team members who participated in developing the FBA plan:					
Student						
Parents						- 📀
Line Parent Name	Relation	Туре		Part	icipant	
Tacho, Ernest	Father			[
² Tacho, Rachel	Mother			[
Staff					Add	
X Line Staff Name	R	ole 🔶		Job Title		
Andrews, Mark +	Case Carriei	×				
2 User, Admin ←	Case Carrier	*				
Other specialists					Add	
X Line Name	R	ole 🔶		Job Title		₿

Figure 2-24 Functional Behavior Assessment Plan

To create a Functional Behavior Assessment Plan document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Check **Student** to include the student's name, with a signature line, as a participant in the Functional Behavior Assessment Plan. If the checkbox is left blank the name will not be included as a participant.
- 3. On the Parents section, check **Participant**, to include each parent name, with a signature line, as a participant in the Functional Behavior Assessment Plan. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Chapter Two

Change current staff names:

Staf	F				Add 🔇
×	Line	Staff Name	Role 😂	Job Title	¢
	1	Andrews, Mark +	Case Carriel 💌	Teacher	
	2	<u>User, Admin</u> 🖛	Administrato 🔽	Hope HS Principal	

Figure 2-25 Functional Behavior Assessment Plan Staff Section Change/Add

- 1. Click + next to the Staff Name to change. The Find: Staff screen displays.
- 2. Enter all or part of staff Last Name, First Name.
- 3. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.

Find Close Select Clear Selection						
Find: Staff						
Find Criteria	Find Criteria					
Last Name	First Name	Middle Name				
Smith	С					
Search Results						
Find Result			٨			
Line Last Name	First Name	Mi	ddle Name			
1 Smith	Christine					
2 Smith	Jk					

Figure 2-26 Find: Staff Screen

- 5. Click again or click set. Find: Staff screen closes and staff name displays.
- 6. Click the **Role** drop-down and select the staff role.
- 7. Enter the staff member's **Job Title**.

Add staff names:

- 1. Click **Add** on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.

Sta	ff		Orient./Mobility Specialist		
×	Line	Staff Name	Role	Other	
	1	Green, Tom	Case Carrier 🗸 🗸	Physical Therapist	
	2	User, Admin ←	Teacher Specialist 🗸	Ps y chologist	
	3	Smith, John +	~	Reader	
				Only and Newson	

Figure 2-27 Functional Behavior Assessment Plan Staff Section Select Role

3. If needed, check is on the line of the staff name to remove. The row is removed.

The Other Specialists section will allow for participant names that are not available in the Staff directory.

- 1. Click the Add button on the Other Specialists bar. A new row will be added.
- 2. Enter the Name, Role and Job Title of the specialist.

Oth	Other specialists Add					0
×	Line	e Name	₽	Role	🖨 🛛 Job Title	\bigtriangledown
	1	Dr. Arthur Rand		Family Advocate	Private Psychologist	

Figure 2-28 Functional Behavior Assessment Plan Other Specialists

3. If needed, check 🔲 on the line of the name to remove. The row is removed.

SPECIFICS TAB

- 1. Click the drop-down under the words, **A Functional Behavior Assessment is needed because:**, and select the appropriate reason from the list. The selection will populate the box below. This text may be edited. Use [™] to spellcheck. Use [◊] for more space.
- 2. Enter Referring behavior(s) (written in observable, measureable terms). Use 🖾 to spellcheck. Use ◊ for more space.
- 3. Click the drop-down under the words, **Precipitating conditions:**, and select the appropriate reason from the list. The selection will populate the box below. This text may be edited. Use 🕎 to spellcheck. Use 🛇 for more space.



Figure 2-29 Functional Behavior Assessment Plan Specifics Tab

- 4. Repeat the above instructions for Baseline data included: and Frequency of behavior:.
- 5. Click the **Intensity of behavior**: drop-down and select the appropriate level of the behavior.
- 6. Enter the **Student Strengths**. Use 🕎 to spellcheck. Use 📀 for more space
- 7. Click the Environment(s) in which referring behavior(s) are LEAST likely to occur (i.e. location, person(s), and time of day) drop-down and select from the list. The selection will populate the box below. This text may be edited. Use I to spellcheck. Use of for more space.
- 8. Enter any additional **Comments.** Use 🖤 to spellcheck. Use 📀 for more space.
- 9. Enter **Target** behavior (a desired behavior to be increased) written in observable/measurable terms. Use [™] to spellcheck. Use [◇] for more space.

10. Under the Results of FBA, select either:



Figure 2-30 Functional Behavior Assessment PlanResults of FBA

A Behavior Intervention Plan (BIP) will be developed to proactively address behavior analyzed in this Functional Behavioral Assessment. This plan will describe what staff will do to support alternative behavior.

OR

The IEP team has determined that a Behavior Intervention Plan (BIP) is not necessary as a result of this assessment.

- 11. Enter the **Rationale** for the decision. Use 🕎 to spellcheck. Use 🛇 for more space.
- 12. Click Save

GENAZ 37 – MANIFESTATION DETERMINATION AND REVIEW

The Manifestation Determination and Review contains one tab:

• Manifestation Determination

VManifestation Determination and Review Document								
Student Name: Tacho, Katherine A. Documen	t: GENAZ 37 Description: Manif	estation Determination an	d Review Documentation					
Manifestation Determination								
Document Alias								
Manifestation Determination and Review Docum								
Document Date								
Part 1. Background Information			Q					
(Must be completed within 10 school days of a violation of a code of student conduct.)	any decisions to change the	e placement of a spec	ial education student due to					
Location								
Time								
Special Education Placement(s) 🕎 🍳								
		11.						
Date of Current IEP								
Reevaluation Due Date								
Date this incident of misconduct occured	P							
Total number of suspension days this school year prior to this incident								
Number of suspension days being considered for this incident of misconduct								

Figure 2-31 Manifestation Determination and Review

To create a Manifestation Determination and Review document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Enter the **Location** of the Manifestation Determination and Review.
- 3. Enter the Time (HHMM 0800 for 8:00 AM, 0120 for 1:20 PM, etc.)
- 4. Enter the student's **Special Education Placement(s)**. Use 🖾 to spellcheck. Use 🛇 for more space.
- 5. Enter the **Date of Current IEP, Reevaluation Due Date** and **Date** this incident of misconduct occurred (MMDDYY) or click and select date.
- 6. Enter **Total number of suspension days this school year prior to this incident** and Number of suspension days being considered for this incident of misconduct.

Susp	spension Criteria						
Line	Description	Selection					
1	Illegal drugs/controlled substances were inviolved in the incident.	No	~				
	A weapon/dangerous instrument was involved in this incident		~				
	Serious bodily injury as defined in federal law was inflicted upon another person at school or at a school function.	No	~				
4	4 Student transportation was involved in this incident.						
	Figure 2-32 Manifestation Determination and Review Suspension Criteria						

- 7. Using the **Yes/No** drop downs, select the appropriate response for **Suspension Criteria**.
- 8. Check **Student** to include the student's name, with a signature line, as a participant in the Functional Behavior Assessment Plan. If the checkbox is left blank the name will not be included as a participant.

9. On the Parents section, check **Participant**, to include each parent name, with a signature line, as a participant in the Functional Behavior Assessment Plan. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Change current staff names:

St	Staff				
>	Line Staff Name	Role 🖨	Job Title	₽	
	Andrews, Mark +	Case Carriel 💌	Teacher		
E	2 <u>User, Admin</u> ←	Administrato 🔽	Hope HS Principal		

Figure 2-33 Manifestation Determination and Review Staff Section Change/Add

- 1. Click next to the Staff Name to change. The Find: Staff screen displays.
- 2. Enter all or part of staff Last Name, First Name.
- 3. Click **Find** or press **ENTER**. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click <u>seet</u>. Find: Staff screen closes and staff name displays.

Find Close Select Clear Selection						
Find: Staff	Find: Staff					
Find Criteria						
Last Name	First Name	Middle Name				
Smith	С					
Search Results						
Find Result			0			
Line Last Name	First Name	h	Middle Name			
1 Smith	Christine					
2 Smith	Jk					

Figure 2-34 Find: Staff Screen

- 6. Click the **Role** drop-down and select the staff role.
- 7. Enter the staff member's **Job Title**.

Add staff names:

- 1. Click **Add** on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.

Sta	ff		Orient./Mobility Specialist		
\mathbf{x}	Line	Staff Name	Role	Other	
		Green, Tom	Case Carrier 💌	Physical Therapist	
		User, Admin +	Teacher Specialist 🗸 🗸	Psychologist	
		Smith, John +	~	Reader	
				Calcal Numa	

Figure 2-35 Manifestation Determination and Review Staff Section Select Role

3. If needed, check 🔲 on the line of the staff name to remove. The row is removed.

The Other Specialists section will allow for participant names that are not available in the Staff directory.

1. Click the **Add** button on the Other Specialists bar. A new row will be added.

2. Enter the **Name**, **Role** and **Job Title** of the specialist.

Othe	r spe	cialists			Add 🔇
×	Line	Name	₽	Role 🖨	Job Title 🛛 🍦
	1	Dr. Arthur Rand		Family Advocate	Private Psychologist

Figure 2-36 Manifestation Determination and Review Other Specialists

3. If needed, check 🔲 on the line of the name to remove. The row is removed.



Figure 2-37 Manifestation Determination and Review Nature of Offense

Part 3. The Team Members Reviewed and Considered the Following Relevant	Information					
check all that apply						
Current evaluation & diagnostic results						
Observation of the student Current IEP & placement						
Triennial psychoeducational reevaluation Attendance records						
Disciplinary results						
Information provided by parents						
Other Information		Add 🔇				
X Line Other Informatio	n					
The conduct subject to disciplinary action is a manifestation of the studen	t's disability. 👻					

Figure 2-38 Manifestation Determination and Review Part 3

- 5. Check all reviewed and considered relevant information that applies.
- 6. Click **Add** on the Other Information bar to list additional items that were reviewed and considered. A new line is added. Additional lines may be added by clicking **Add** again.
- 7. Select the appropriate **conduct subject to disciplinary action** statement from the drop down selection.

Part 4. The Team Members' Conclusions		6
Conclusions		G
Line Descripion 🔶	Selection	4
A reevaluation is necessary.		~
2 It is necessary to review the current behavior plan for this student.		~
The IEP team determined this incident of misconduct is not a manifestation of the student?s disability.		~
Conduct was caused by or had a direct and substantial relationship to the student?s disability.		~
5 Conduct was a direct result of the district?s failure to implement the IEP.		~
6 The student will be returned to the placement from which the student was removed.		~
The Parent and District agree to a change of placement as part of the behavioral intervention plan.		~
8 An IEP meeting is needed.		~
⁹ Student will be placed in an interim alternative educational setting determined by the IEP team.		~
10 It is necessary to conduct a Functional Behavioral Assessment.		~
Comments 🕎 📀		
A		
		_
Procedural Safeguards		6
Parents of a student and the student have protection under procedural safeguards in accordance with Federal the school psychologist or call the Special Education office if you want a copy of the procedural safeguards.	Law. Contact	t
Procedural Safeguards provided to parent(s)		
Proc Safeguard Initials (initials)		

Figure 2-39 Manifestation Determination and Review Part 4

- 8. Using the Yes/No drop downs, answer each question in the Conclusions group box.
- 9. Add any additional **Comments**. Use 🕎 to spellcheck. Use 🛇 for more space.
- 10. Initial in the **Procedural Safeguards** textbox to indicate that procedural safeguards were provided to parent.

GENAZ 38 – MEETING REQUEST

The Meeting Request contains two tabs:

- Meeting Participants
- Parent Rights

✓Meeting Request						(«
Student Name: Abernathy, Donna A. Docume	nt: GENA	AZ 38 Description: Meeting Re	quest			
Meeting Participants Parent Rights						
Document Name						
Meeting Request						
Document Date						
Meeting Participants						9
Dear Parents/Guardians:						
THIS IS MY NEW MEETING MESSAGE.						
If you would like to review the records prior State to the meeting, please contact	aff Nam	•				
The purpose of the meeting:						
To discuss the data gathered in the evalua regarding eligibility To develop an IEP To review and revise your child's IEP	ition for	special education service	s of your ch	ild and make	e a determi	nation
Other:						
The following are invited to attend and participat	e in the	meeting:				
C Student						
Parents						_
Line Parent Name		Relation Type		Educational Rights	Contact Allowed	Participant
1 Abernathy, Joan		Mother		Yes	Yes	
2 Abernathy, Philip		Father		No	No	
Staff						Add
K Line Staff Name			Role			¢
□ 1 User. Admin ←	Case C	Carrier S	1			

Figure 2-40 Ad Hoc Meeting Request

MEETING PARTICIPANTS TAB

To create a Meeting Request document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Click on ← next to **Staff Name** (see above) to enter the contact name for the parent. The Find: Staff screen displays.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria				6	
Last Name	First N	Vame	Middle Name		
Smith	С				
Search Results					
Find Result				6	
Line Last Name		First Name		Middle Name	
1 Smith		Christine			
2 Smith		Jk			

Figure 2-41 Find: Staff Screen

- 3. Enter all or part of staff Last Name, First Name.
- 4. Click find or press ENTER. Search Results displays a list of matching criteria.
- 5. Click line of staff name. Line highlights.
- 6. Click again or click <u>sect</u>. Find: Staff screen closes and staff name displays.
- 7. Check The Purpose of the meeting or check Other and enter another purpose.



Figure 2-42 Meeting Request Check Purpose

1. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.

Pare	ent(s)/Guardians(s)				Q
Line	Parent Name	Relation Type	Educational Rights	Contact Allowed	Participant
1	Kelly, Louise	Mother	Yes	Yes	
2	Wilkinson, Samuel	Step-Father	Yes	Yes	
3	Smith, Brian	Father	No	No	

Figure 2-43 Meeting Request Parent(s)Guardian(s) Check Parent

2. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

S	aff		Add
>	Line Staff Name	Role	
Γ	Green. Tom	Case Carrier	
Γ	2 User. Admin 🔶	Teacher Specialist 👻	

Figure 2-44 Meeting Request Staff Section Change/Add

Change current staff names:

1. Click • next to the Staff Name to change. The Find: Staff screen displays.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria				6	
Last Name	First N	Vame	Middle Name		
Smith	С				
Search Results					
Find Result				6	
Line Last Name		First Name		Middle Name	
1 Smith		Christine			
2 Smith		Jk			

Figure 2-45 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click **Find** or press **ENTER**. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.

5. Click again or click <u>seet</u>. Find: Staff screen closes and staff name displays.

Staff				Orient./Mobility Specialist	
×	Line	Staff Name	Role	Other	
		Green, Tom	Case Carrier 👻	Physical Therapist	
	2	<u>User, Admin</u> ←	Teacher Specialist 👻	P ày chologist	
	3	Smith, John +	~	Reader	
				Calcard Numa	

Figure 2-46 Meeting Request Staff Section Select Role

6. Click the **Role** dropdown and select the staff role.

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check 🔲 on the line of the staff name to remove. The row is removed.

The Other Specialists section will allow for participant names that are not available in the Staff directory.

- 1. Click the Add button on the Other Specialists bar. A new row will be added.
- 2. Enter the Name and Role of the specialist.

X Line Name Rote I Linda Harris Social Worker	Other Specialists	Add 🔇
Linda Harris Social Worker	X Line Name	Role
	Linda Harris	Social Worker

Figure 2-47 Meeting Request Other Specialists

- 3. If needed, check 🔲 on the line of the staff name to remove. The row is removed.
- 4. Enter Meeting Information in the textboxes provided.

We would like to schedule a meeting with ye	ou at:				
Location, Building, Room					
Hope High School, Room 302					
Meeting Date 08/26/2010	Meeting Time 3:30 PM				
This meeting was confirmed by phone on	This meeting was confirmed by				
07/21/2010	Sally Secretary				
Comments 🕎 🔇					
If you need to change the date and/or time of the meeting, please call					
Sally Secretary					
at					
800-555-1234					
Interpreter Needed					
Procedural Safeguards Enclosed					

Figure 2-48 Meeting Request Information

5. Click Save

PARENT RIGHTS TAB

The Parent Rights tab is for the parent to manually update when they receive the printed hard copy of the completed Meeting Request. This area is editable and can be completed for the parent or left blank for the parent to complete.

Editable Version:

Parent Rights
A parent has the Right to participate in all meetings regarding Identification, Evaluation, Placement, and Free Appropriate Education (FAPE) for their child. A parent has the Right to advance notice (approximately 10 days) for for scheduled meetings on their child.
Please check the following, if applicable:
I do not require a 10 day advance notice for the proposed meeting.
I plan to attend this meeting.
I do not plan to attend the proposed meeting, but am requesting an alternate meeting time.
□ I do not plan to participate. Please meet and inform me of the outcome.
Phone conference is requested.
□ I need a copy of the Release of Student Records form and plan to bring
to the meeting
whose position is
I grant my consent for the individual(s) listed in the Other Specialists section of this document to attend this meeting.

Figure 2-49 Parents Rights Tab View

Printable Version (This is what the parent will see).

Parent Rights	
A parent has the Right to participate in all meetings regarding Identification, E child. A parent has the Right to advance notice (approximately 10 days) for so	valuation, Placement, and Free Appropriate Education (FAPE) for their child.
Please check the following, if applicable:	
I do not require a 10 day advance notice for the proposed meeting.	
✓ I plan to attend this meeting.	
I do not plan to attend at the proposed time, but am requesting an alternat	e meeting time.
I do not plan to participate. Please meet and inform me of the outcome.	
Phone conference is requested.	
I need a copy of the Release of Student Records form and plan to bring	to the meeting,
whose position is	
Parent Signature:	Date:

Figure 2-50 Parents Rights Printable View

GENAZ 39 – MORE RESTRICTIVE PLACEMENT REFERRAL

The More Restrictive Placement Referral contains four tabs:

- Demographics
- Background
- Behavior
- Attachments

ReferralRestrictivePlace	ment					~
Student Name: Aaron, Harold N. Documen	nt: GENAZ 39	Descriptio	n: More Restrictive Placement Referral			
Demographics Background Behavior Att	tachments					
Document Name				Do	ocument	Date
More Restrictive Placement Referral						7
Student Is Participant						
Parent Participants						٥
Line Parent Name		Relation Ty		Educationa Rights	I Contact Allowed	Participant
1 Daugherty, Diane		Mother		Yes	Yes	
2 Daugherty, Howard		Step-Fath	er	Yes	Yes	
3 Mucha, Victor		Father		No	No	
Staff Participants					A	dd 🕥
X Line Staff Name			Role			¢
1 Griess, Brian ←	Case Carr	ier	*			
Other Participants					A	dd 🕥
K Line Name		♦	Job Title			¢

Figure 2-51 More Restrictive Placement Referral

To create a More Restrictive Placement Referral document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

DEMOGRAPHICS TAB

2. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.

Pare	Parent Participants 🤅				4
Lin	e Parent Name	Relation Type	Educational Rights	Contact Allowed	Participant
	Daugherty, Diane	Mother	Yes	Yes	
1	2 Daugherty, Howard	Step-Father	Yes	Yes	
	Mucha, Victor	Father	No	No	

Figure 2-53 More Restrictive Placement Referral Parent Participants

3. On the Parent Participant section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

Sta	'f Part	icipants			Add	0
×	Line	Staff Name		Role		\bigcirc
	1	<u>Griess, Brian</u> ←	Case Carrier	×		

Figure 2-52 More Restrictive Placement Referral Staff Participants

The Staff Participants section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff names displaying will be included as participants, however changes may be made including additional staff names added.

Change current staff names:

Copyright© 2012 Edupoint Educational Systems, LLC

1. Click + next to the Staff Name to change. The Find: Staff screen displays.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria			۵		
Last Name	First Name	Middle Name			
Smith	С				
Search Results					
Find Result			۵		
Line Last Name	First Name		Middle Name		
1 Smith	Christine				
2 Smith	Jk				

Figure 2-54 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click **Find** or press **ENTER**. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click <u>sect</u>. Find: Staff screen closes and staff name displays.

Staff Participants	District Representative	Add 🔇
X Line Staff Name	Driver	¢
□ 1 <u>User, Admin</u> ←	Early Interv. Trans. Specialist	
2 Aderson, Gordon +	Full Inclusion Specialist	
□ 3 Blasdell W., Wendy ←	General Ed Teacher	
4 Wilson, Rob +	Individual To Interpret Educational Implications of Test Results	
	Interpreter	

Figure 2-55 More Restrictive PlacementReferral Staff Participation Select Role

6. Click the **Role** dropdown and select the staff role.

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check 🔲 on the line of the staff name to remove. The row is removed.

The Other Participants section will allow for participant names that are not available in the Staff directory.

- 1. Click the Add button. A new row will be added.
- 2. Enter the participant's Name and Job Title.
- 3. If needed, check a on the line of the record to remove. The row is removed.

BACKGROUND TAB

∀ReferralRestrictivePlacement			
Student Name: . Document: GENAZ 39	Description: More Restrictive Placement Referral		
Demographics Background Behavior Attachments			
Document Name			
More Restrictive Placement Referral			
Document Date			
1. Reason for Referral to more Restrictive Placement	٥		
Reason for Referral 🕎 🛇			
	h		
2. Attendance	۵		
Is student attending school now?	How many unexcused absences have there been this school year?		
How many days has the student attended this school year?	How many days has the student been suspended this IEP year?		
How many excused absences have there been this school year?	How many days has the student been sent home?		
3. Placement	<u></u>		
How long has he/she been in a Special Education Progr	am?		
months			
How many periods per day does the student spend in a Education class?	Special What is the date of the most recent MET?		
What types of additional services (OT, CD, etc.) does th	is student's IEP provide?		
4. Family/Home	٩		
Have parents exhibited control of student?	Does the student have other behavior problems in the home?		
Are parents capable of controlling student?	If divorced, how many interactions does the non-custodial parent have?		
Have all parental figures supported the Special			
	Has there been a recent change in the student's environment (i.e., death of family member or fiend, divorce, new sibling, etc.)?		

Figure 2-56 More Restrictive Placement Referral Background Tab

1. Describe the **Reason for Referral**. Use 🕎 to spellcheck. Use 📀 for more space.

Attendance

- 2. Using the Yes/No drop down indicate if the student is attending school now.
- 3. Answer the attendance questions using a number format in the fields provided.

Placement

- 4. Specify how long the student has been in a Special Education Program and how many periods spent in a special education class using number format.
- 5. Enter the **date of the most recent MET** (MMDDYY) or click and select date.
- 6. List the types of additional services indicated on the student's IEP.

Family/Home

- 7. Using the **Yes/No** drop down list, answer the questions regarding the student's family and home.
- 8. Enter a numerical amount regarding the amount of **non-custodial interactions**.

BEHAVIOR TAB

∀ReferralRestrictivePlacement			
Student Name: Tackett, Heather S. Document: GENAZ 39 Description	tion: More Restrictive Placement Referral		
Demographics Background Behavior Attachments			
Document Name	Document Date		
More Restrictive Placement Referral			
5. Behavior	•		
Is student in control of inappropriate behaviors?	Is student aware of his/her problems and their source?		
How long has the student been exposed to a continuum of consistently applied consequences?			
List positive consequences 🕎 🛇	List negative consequences 🕎 🥥		
a.	h.		
Is student disoriented?	Is there a history of drug/alcohol involvement?		
Have behaviors regressed over a period of time?	Does the student have problems in all classes and areas at school?		
6. Community			
Has this student had problems with the law?	Does the student have any friends?		
Does the student have other problems in the community?			
7. Interactions	Q		
List the people the student trusts and talks with. 🕎 🛇	How does the student function within his/her peer group? 🕎 🛇		
	A		
How does the student deal with authority figures? 🕎 🔾			
a.			
8. Medical	Q		
Does this student have any medical problems? 🕎 🛇	List any medications this student takes regularly. 🕎 🥥		
	a		
9 Educational Performance			
What academic, social, or leisure thime skills does this student display that are average or above?	What specific school behaviors are addressed on the Behavioral Intervention Plan? List: 🕎 🥥		
A.			
10. Functional Behavioral Assessment (FBA) & Behavioral Intervent	ion Plan (BIP)		
When was the FBA completed?	How long has the behavioral intervention plan been attempted?		
Is everyone who is intervening with this student following though with their portion of the behavioral plan?	What specifically are the types of interventions that are needed for this student that cannot be implemented at present campus? List: 🕎 👁		
Does the IEP reflect these special behavioral and instructional needs with goals and objective?	4		

Figure 2-57 More Restrictive Placement Referral Behavior Tab

- 1. Using the **Yes/No** drop down lists, answer the questions regarding the student's behavior.
- 2. Enter the amount of time the student has been exposed to a **continuum of consistently applied consequences?**
- 4. Using the **Yes/No** drop down lists, answer the questions regarding the student's **Behavior**.
- 5. Using the **Yes/No** drop down lists, answer the questions regarding the student's **Community Relations**.
- 6. In the textboxes provided answer the questions regarding the student's **Interaction** with others. Use [™] to spellcheck. Use [◇] for more space.
- 7. In the textboxes provided, answer the questions regarding the student's **Medical** issues. Use [™] to spellcheck. Use [♥] for more space.
- 8. In the textboxes provided, answer the questions regarding the student's **Educational Performance**. Use 🐨 to spellcheck. Use 🛇 for more space.
- 9. Enter the date the **FBA** was **completed** (MMDDYY) or click and select date.
- 10. List how long the behavioral intervention plan (BIP) has been attempted.
- 11. Using the Yes/No drop down list, answer whether everyone is following through with their portion of the behavior plan, and if the IEP reflects these special behavioral and instructional needs with goals and objectives.
- 12. List the types of interventions that are needed for this student that cannot be implemented at the present campus. Use 🖾 to spellcheck. Use 🛇 for more space.

✓ReferralRestrictivePlacement	(«
Student Name: Tackett, Heather S. Document: GENAZ 39 Description: More Restrictive Placement Referral	
Demographics Background Behavior Attachments	
Document Name	
More Restrictive Placement Referral	
Document Date	
Attachments	
The consult form from the appropriate Demonstration Teacher	
A copy of the student's IEP	
A copy of the Functional Behavioral Assessment	
A copy of the Behaviore Intervention Plan	
A copy of the "Student Behavior Counts" from the ED program for the past year if this student has been pl	aced in Mesa
in the ED Program	
A copy of the student's Regular Ed and/or Special Ed report cards for the past year	

ATTACHMENTS TAB

Figure 2-58 More Restrictive Placement Referral AttachmentsTab

- 1. Use the checkboxes to select the appropriate copies that will accompany this document.
- 2. Click Save

GENAZ 40 – PRIOR WRITTEN NOTICE

The (Ad Hoc) Prior Written Notice is a generic notice available for when a prior written notice is needed outside of process documents.

The Prior Written Notice contains one tab:

• Prior Written Notice

♥Prior Written Notice	«
Student Name: Tacho, Katherine A. Document: GENAZ 40 Description: Prior Written Notice	
Prior Written Notice	
Document Name	
Prior Written Notice	
Document Date	
Type of Action	
Selected Action: Identification	
Change Action To: Identification Evaluation Educational Placement Provision of FAPE Other	
Description of Actions Proposed or Refused	
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Identification	
·	
	.41

Figure 2-59 Ad Hoc Prior Written Notice

To create a Prior Written Notice document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Next to the **Change Action To:** are a series of buttons. If the **Selected Action** is not the purpose of this Prior Written Notice, click one of the buttons to change the type.



Based on the **Selected Action**, the appropriate library stems will be available in the drop-down list under DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT.

3. Click the drop-down and select one of the options. Text may be added to the autopopulated statement or enter data directly into textbox. Use ♥ to spellcheck. Use ♥ for more space. There are four standard **Statements** available. Since this is a generic Prior Written Notice document, there are no library stems to select from.

Statements	
Explanation of why the district proposes or refuses to take the action:	
19 🛇	
	^
	-
Description of each evaluation procedure, assessment, record or report used as a basis for the	proposed or refused action:
19 S	
	<u>^</u>
	-
Description of other options considered and why those options were rejected:	
	^
	•
Description of the factors relevant to the actions proposed or refused are:	
	*
	-

Figure 2-61 Prior Written Notice Library Stem

4. Enter data directly into textboxes. Use 🕎 to spellcheck. Use 🛇 for more space.

Implementation of Decision		
This decision is proposed to be implemented on:		
Parents of a student and the student have protection under procedural safeguards in accordance with Federal Law. Contact the school psychologist or call the Special Education office if you want a copy of the procedural safeguards.		
Procedural Safeguards provided to parent(s)		
(initials)		
This document was prepared by: 🖕		
Case Manager		
Andrews, Mark		
Case Manager Phone		

Figure 2-62 Prior Written Notice Implementation of Decision

- 5. Enter the date that **This decision is proposed to be implemented on:** (MMDDYY) or click and select date.
- 6. Enter (initials) if Procedural Safeguards have been provided to parent(s).

7. Click + next to **This document was prepared by:**. The Find: Staff screen displays.

Find Close Select	Clear Selection		
Find: Staff			
Find Criteria			۵
Last Name	First Name	Middle Name	
Smith	С		
Search Results			
Find Result			0
Line Last Name	First Name	Mide	dle Name
1 Smith	Christine		
2 Smith	Jk		

Figure 2-63 Find: Staff Screen

- 8. Enter all or part of staff Last Name, First Name.
- 9. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 10. Click line of staff name. Line highlights.
- 11. Click again or click set. Find: Staff screen closes and staff name displays in gray box.

12. Click Save

GENAZ 41E – NOTICE OF REFUSAL OF EVALUATION

The Notice of Refusal of Evaluation contains one tab:



Note: The Notice of Refusal of Evaluation has been created from the Synergy SE Prior Written Notice template. The wording of examples may differ, as each district has the ability to create Prior Written Notices to meet their individual district needs

• Prior Written Notice

VPrior Written Notice	<
Student Name: Abbott, Billy C. Document: GENAZ 41E Description: Notice of Refusal of Evaluation	
Prior Written Notice	
Document Name	
Notice of Refusal of Evaluation	
Document Date	
Description of Actions Proposed or Refused	٥
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: EVALUATION	
The District suspects that the student has an educational disability. Evaluation to determine whether or not this student is eligible for and requires Special Education services will not be conducted due to parent refusal to grant consent for the evaluation. The District remains ready, willing and able to provide the necessary evaluation in the future if the parent grant consent.	s

To create a Notice of Refusal of Evaluation document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

The **Statements** section contains areas where descriptions and explanations for actions taken are entered. Drop down key-word stems may be available, based on individual district decisions. If no stems are available text can be added directly to the textboxes.

Statements		6
Explanation of why the district proposes or refuses to take the action:		
✓		
ERI (D		
	.4	
Description of each evaluation procedure, assessment, record or report used as a basis for the proposed or	refused	action:
v		
	.đ	
Description of other options considered and why those options were rejected:		
v		
	.4	

Figure 2-65 Prior Written Notice Refusal of Evaluation Statements

2. Click the drop-down and select one of the options. Text may be added to the autopopulated statement enter data directly into textbox. Use 🖤 to spellcheck. Use 🛇 for more space.

Explanation of why the district prop	poses or refuses to take the action:
~	
Parent has right to refuse evaluation	
	<u> </u>



Figure 2-67 Library Stem Auto-Populated

Implementation of Decision
This decision is proposed to be implemented on:
Parents of a student and the student have protection under procedural safeguards in accordance with Federal Law. Contact the school psychologist or call the Special Education office if you want a copy of the procedural safeguards.
Procedural Safeguards provided to parent(s)
(initials)
This document was prepared by: 🖕
Case Manager
Andrews, Mark
Case Manager Phone

Figure 2-68 Prior Written Notice Implementation of Decision

- 3. Enter the date that **This decision is proposed to be implemented on:** (MMDDYY) or click and select date.
- 4. Enter (initials) if Procedural Safeguards have been provided to parent(s).
- 5. Click + next to This document was prepared by:. The Find: Staff screen displays.
- 6. Enter all or part of staff Last Name, First Name.

7. Click **Find** or press **ENTER**. Search Results displays a list of matching criteria.

Find Close Select Clear Selection			
Find: Staff			
Find Criteria		Ç	
Last Name	First Name	Middle Name	
Smith	С		
Search Results			
Find Result		(
Line Last Name	First Name	Middle Name	
1 Smith	Christine		
2 Smith	Jk		

Figure 2-69 Find: Staff Screen

- 8. Click line of staff name. Line highlights.
- 9. Click again or click staff. Find: Staff screen closes and staff name displays in gray box.
- 10. Click Save

GENAZ 41F – NOTICE OF REFUSAL OF FAPE

The Notice of Refusal of FAPE contains one tab:

• Prior Written Notice

Note: The Notice of Refusal Refusal of FAPE has been created from the Synergy SE Prior Written Notice template. Wording examples may differ, as each district has the ability to create Prior Written Notices to meet their individual district needs.

VPrior Written Notice
Student Name: Alejandrez, Willie JR Document: GENAZ 41F Description: Notice of Refusal of FAPE
Prior Written Notice
Document Name
Notice of Refusal of FAPE
Document Date
Description of Actions Proposed or Refused
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: FAPE
An evaluation conducted by the District resulted in the finding that student is eligible for and requires Special Education services. Placement will not be made due to parent refusal to grant consent for provision of any Special Education services. The District remains ready, willing and able to develop and implement an IEP that will provide a Free and Appropriate Public Education for the student if the parent will grant consent.

Figure 2-70 Notice of Refusal of FAPE Screen

To create a Notice of Refusal of FAPE document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

The **Statements** section contains descriptions and explanations for actions taken. Drop down key-word stems may be available, based on individual district decisions.

Statements	9
Explanation of why the district proposes or refuses to take the action:	
·	
Description of each evaluation procedure, assessment, record or report used as a basis for the proposed or re action:	efused
·	
	.4
Description of other options considered and why those options were rejected:	
v	
	.41
Description of the factors relevant to the actions proposed or refused are:	
· · · · · · · · · · · · · · · · · · ·	
	.4

Figure 2-71 Notice of Refusal of FAPE Screen Statements

2. Click the drop-down and select one of the options. Text may be added to the autopopulated statement enter data directly into textbox. Use ♥ to spellcheck. Use ♥ for more space.

Explanation of why the district prop	oses or refuses to take the action:
~	
Parent has right to refuse evaluation	
	<u>×</u>

Figure 2-72 Notice of Refusal of FAPE Screen Library Stem Auto-Populated

3. Enter the date that **This decision is proposed to be implemented on:** (MMDDYY) or click and select date.



Figure 2-73 Notice of Refusal of FAPE Screen Library Stem Drop-Down

4. Enter (initials) if Procedural Safeguards have been provided to parent(s).

Implementation of Decision
This decision is proposed to be implemented on:
Parents of a student and the student have protection under procedural safeguards in accordance with Federal Law. Contact the school psychologist or call the Special Education office if you want a copy of the procedural safeguards.
Procedural Safeguards provided to parent(s)
(initials)
This document was prepared by: 🖕
Case Manager
Andrews, Mark
Case Manager Phone

Figure 2-74 Notice of Refusal of FAPE Screen Implementation of Decision

5. Click + next to This document was prepared by:. The Find: Staff screen displays.

Find Close Select Clear Selection			
Find: Staff			
Find Criteria		G	
Last Name	First Name	Middle Name	
Smith	С		
Search Results			
Find Result		6	
Line Last Name	First Name	Middle Name	
1 Smith	Christine		
2 Smith	Jk		



- 6. Enter all or part of staff Last Name, First Name.
- 7. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 8. Click line of staff name. Line highlights.
- 9. Click again or click seet. Find: Staff screen closes and staff name displays in gray box.
 10. Click save.

GENAZ 42 – REQUEST FOR BILINGUAL TRANSCRIPTION

The Request for Bilingual Transcription contains one tab:

Documents Enclosed

	ranscription	~
Student Name: Alejandrez, Willie JR	Document: GENAZ 42 Description: Request for Bilingual Trans	cription
Documents Enclosed		
Document Name		
Request for Bilingual Transcription		
Document Date		
IEP Dated		
MET Report		
CD/MET Report		
Notice(s)		
Meeting Request		
Consultations		
Other		
Forms		
Time sensitive material needed by:		
Enclosed documents that don't need	d translation: 1.)	
	2.)	
Special Instructions		
	h.	
Send copies to:		Q
Name	Location	
Name	Location	

Figure 2-76 Request for Bilingual Transcription Screen

To create a Request for Bilingual Transcription document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Check which documents are enclosed.
- 3. If **IEP** is enclosed, enter the date of the document (MMDDYY) or click IP and select date.
- 4. If **Time sensitive material needed by** is selected enter the due date (MMDDYY) or click and select date.
- 5. If **Forms** or **documents that don't need translation** are included describe them in the textbox provided.
- 6. Enter any Special Instructions.
- 7. Specify **Names** and **Locations** of persons receiving copies of this document in textboxes provided.

GENAZ 43 – SUMMARY OF PERFORMANCE

The Summary of Performance contains one tab:

• Summary of Performance

VSummaryOfPerformance («			
tudent Name: Alejandrez, Willie JR Document: GENAZ 43 Description: Summary of Performance			
Summary Of Performance			
ocument Alias			
Summary of Performance			
ocument Date			
The most recent assessment reports are attached to assist in post secondary planning.			
Case Manager Initials			
Date of Graduation/Exit			
Nost Recent IEP Date			
Disability			
Current School			
Person Completing Summary			

Figure 2-77 Summary of Performance Screen

To create a Summary of Performance document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

In the Summary of Performance section:

- 2. Enter the Case Manager Initials.
- 3. Enter the **Date of Graduation/Exit** and **Most Recent IEP Date** (MMDDYY) or click 🗊 and select date.
- 4. Enter the student's **Disability** and **Current School**.
- 5. Enter the name of the Person Completing Summary.

The **Post Secondary Goal(s)** and **Summary of Performance** sections are comprised of text fields. Each field has the 🕎 spellcheck and 🛇 for more space.

- 6. Add Post Secondary Goals including **Training**, **Education**, **Employment** and **Independent Living Skills**, where appropriate, in areas provided.
- 7. Summarize the student's Academic Achievement, Functional Performance, Test and Classroom Accommodations in areas provided.

The final section is for recommendations to assist the student in meeting their postsecondary goals.

Recommendations to Assist the student in Meeting Postsecondary Goals Show Detail					
Line	Title Code	¢			
1	Training				
2	Education				
3	Employment				

Figure 2-78 Summary of Performance Screen Recommendations

To add a goal:

8. Click the line number of the area desired. Then click **Show Detail**.

Double click the line number of the desired area.

The detailed view displays on the right side of the screen.

9. Click the **Add** button. A new line is added below.

Recommendations to Assist the student in Meeting Postsecondary Goals Hide Detail				0			
Line Title Code 🖨						Add	0
1 Training	X	Line Recommendations		Individuals/Agencies	Time Frame		
2 Education		I					
3 Employment		1					
Independent Living Skills, where appropriate			.:				

Figure 2-79 Summary of Performance Screen Detailed View

- 10. Enter the Recommendations, Individuals/Agencies and Time Frame in the textboxes provided.
- 11. Move to the next **Title Code** row to continue adding information, if desired.
- 12. If needed, check and on line of record to delete. The row will be removed.
- 13. Click Save .

GENAZ 44 – TRANSPORTATION REQUEST

The Transportation Request contains four tabs:

- Transportation Info
- Special Conditions
- Agreements
- Bus Plans

Student Name: Tackett, Heather S. Document: GENAZ 44 Description: Transportation Request			
Student Name: Tackett, Heather S. Document: GENAZ 44 Description: Transportation Request			
Transportation Info Special Conditions Agreements Bus Plans			
Document Name			
Transportation Request			
Today's Date			
Request	٩		
Request Ospecial Education Superintendency 504 Medical (Temp.)			
Request Type	٢		
Transportation Request Type			
Requesting Case Manager Starting Date Case Manager Phone ReadOnly User			
Transportation Info	٢		
Receiving School Program			
Days of the Week Receiving Teacher + Teacher Phone +			
Monday Tuesday Wednesday Thursday Friday			
Pick Up	۵		
*Pick Up Address (AM) Contact Person			
Phone			
Drop Off			
*Drop Off Address (PM) Contact Person	Ť		
*Drop Off Address (PM) Contact Person			
*Drop Off Address (PM) Contact Person Phone			
*Drop Off Address (PM) Contact Person Phone Starting Time Dismissal Time To and From School Daily			
*Drop Off Address (PM) Contact Person Phone Starting Time Dismissal Time To and From School Daily			
*Drop Off Address (PM) Contact Person Phone Starting Time Dismissal Time To and From School Daily	0		
*Drop Off Address (PM) Contact Person Phone Starting Time Dismissal Time To and From School Daily Mid-day Shuttle To (School) by (Starting Time)			
*Drop Off Address (PM) Contact Person Phone Starting Time Dismissal Time To and From School Daily Mid-day Shuttle To (School) by (Starting Time) Return To (Home/School) by			

Figure 2-80 Transportation Request Screen Transportation Info Tab

To create a Transportation Request document:

TRANSPORTATION INFO TAB

- 1. Enter the **Today's Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Specify the **Request** and **Request Type** by clicking in one of the radio buttons provided:

Add **Requesting Case Manager**. The **Case Manager Phone** will import in with the Case Manager's name.

- 1. Click next to text: Requesting Case Manager:. The Find: Staff screen displays.
- 2. Enter all or part of staff Last Name, First Name.
- 3. Click **Find** or press **ENTER**. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click set. Find: Staff screen closes and staff name displays in gray box.
- 6. Enter the **Starting Date** (MMDDYY) or click P and select date.
- 7. Enter the **Receiving School** and **Program** in the textboxes provided.
- 8. Select all of the **Days of the Week** that this transportation request applies to.

Add Receiving Teacher. The Teacher Phone will import in with the Receiving Teacher's name.

- 1. Click next to text: **Receiving Teacher:.** The Find: Staff screen displays.
- 2. Enter all or part of staff Last Name, First Name.
- 3. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click seet. Find: Staff screen closes and staff name displays in gray box.
- 6. Enter the Pick Up Address (AM) along with a **Contact Person**'s name and **Phone**.
- 7. Repeat this for **Drop Off** fields.
- 8. Specify the **Starting Time and Dismissal Time** of the school. It is only necessary to enter numerals. Synergy SE formats the field once entered, i.e. 900 formats as 9:00 AM.
- 9. Indicate if the student requires transportation **To and From School Daily** using the checkbox.
- 10. If a mid-day shuttle is required, complete the information in the textboxes provided.
- 11. Click Save .

SPECIAL CONDITIONS TAB

✓Transportation Request			
Student Name: Tackett, Hea	ther S. Document: GENAZ 44 Description: Transpo	ortation Request	
Transportation Info Special Co	onditions Agreements Bus Plans		
Document Name			
Transportation Request			
Today's Date			
Special Conditions			Q
Transportation to and from the curb in front of pick up address due to disability/medical condition	Student has independent skills. Transportati address.	on to and from	the curb in front of pickup
Special Handling	Student requires supervision. It is the responsibility of the parent to assist the child to and from the school vehicle. Justification is required (see space below). Alternate drop required.		
	Alternate Drop Address		Name/Relationship
	Phone Number		
	Must be within one mile of pick-up/drop addr service. Required for special handling.	ess for special	handling and wheelchair
Wheelchair	Indicate size and style of wheelchair below. Parents to assist student to and from school vehicle. If student does not require supervision, please note below. Alternate drop required.		
Safety Vest/Reverse	Ex. Small Small Medium Large	e 🔲 Ex. Large	Justification required.
Justification Comments			
	A		
Behavior Concerns			
	al.		
Accomodations			
Visually Impaired He	aring Impaired		
Evolain Accorrectations (day			
Explain Accomodations (00)	g, cane etc.) 🕑 🖌		
	411		
Medical or Special Health Care	e Considerations		G
	.al		
Seizures (Severity & Type)			G

Figure 2-81 Transportation Request Screen Special Conditions Tab

1. If needed, check one of the special conditions. An explanation of the condition is to the right.

If Special Handling is selected:

- 2. Enter a Justification Comment.
- 3. Enter an **Alternate Drop Address**, the responsible person's **Name/Relationship** to the student, and that person's **Phone Number**.

If Wheelchair is selected:

4. Check size and complete **Alternate Drop** information. If student does not require supervision, note that in **Justification Comments**.

If Reverse Seat Belt or Safety Vest/Reverse is selected:

- 5. Enter Justification Comments.
- 6. Enter any special conditions in the Behavior Concerns, Accommodations, Medical or Special Health Care Considerations and Seizures text boxes.

AGREEMENTS TAB

The Parent Agreement section displays the agreement that the parent will sign.

✓Transportation Request	~
Student Name: Tackett, Heather S. Document: GENAZ 44 Description: Transportation Request	
Transportation Info Special Conditions Agreements Bus Plans	
Document Name	
Transportation Request	
Today's Date	
	Q
Parent Agreement	
I agree to cooperate and will support and enforce the rules and regulations regarding proper conduct of my child while he/s is riding on a school vehicle.	she
I will have my child ready for the bus ten minutes early Call or as early as possible as routine times do vary. that student will not require transportation for the student will not require transport the student will not transport the	e, on
Moving/Change Of Address: Contact Transportation at at at at and allow 10 school days after form reaches Transportation for changes to be made. A change of address may require a	
change of school.	
For Transportation Only	٢
Route # A.M. Route # Noon Route # P.M. Starting Date Pickup A.M. Drop - P/U Noon	
Drop P.M.	
*Must be within 3 miles of home address	

Figure 2-82 Transportation Request Screen Agreements Tab

- 1. Enter two district contact phone number choices, which the parent should call should their child not need transportation due to absence.
- 2. Enter the district contact phone number that the parent should call to notify transportation of a change of address.

(Transportation Department enters Route Numbers, Starting Dates and Pickup Times in the textboxes provided.)

BUS PLANS TAB

✓Transportation Request			
Student Name: Tackett, Heather S. Document:	GENAZ 44 Description: Transportation Request		
Transportation Info Special Conditions Agreement	Bus Plans		
Document Name			
Transportation Request			
Today's Date			
For all Bus Plans:	Q		
Emergency Contact Name:			
Phone Home#:			
Cell#:			
Work#:			
Other#:			
Office/Location	Fax Number		
Anaphylaxis			
Anaphylaxis			
Student is allergic to: 🕎 🛇			
Signs that may be present:	Other		
Itching and Swelling of Lips Swelling of	Tongue or Mouth		
Tightness of Throat Hacking Co	ugh or Wheezing		
Hives Itching			
Nausea or Vomiting			
Location Of EpiPen: 🕎 🛇			

Figure 2-83 Transportation Request Screen Bus Plans Tab Part 1

- 1. For all Bus Plans: enter the emergency information for student.
- 2. Check if the student is subject to Anaphylaxis.
- 3. List any allergies the student has in the text box.
- 4. Use the checklist to specify signs of allergic reaction.
- 5. Check Other to provide additional information and enter it in the textbox below the checklist.
- 6. Fill in the Location of EpiPen, if needed.

Asthma	6
Asthma	
Notify Parent for: 🕎 🛇	
	.11
Central Line	G
Central Line	
Diabetes	G
Diabetes	
Gastrostomy	G
Gastrostomy	
Seizures	G
C Seizures	
Tracheal	G
Tracheal	
Special Instructions: 🕎 🎱	
]	ii.

Figure 2-84 Transportation Request Screen Bus Plans Tab Part 2

- 7. Check the box if the student has Asthma.
- 8. If so, enter data in the Notify Parent for: textbox.
- 9. If the student has the following, check the appropriate box or boxes: **Central Line**, **Diabetes**, **Gastrostomy**, **Seizures** or **Tracheal**.
- 10. If Tracheal is selected, list any Special Instructions.

When printed, the transportation request will automatically add Bus Plans for possible problems along with actions to take for each checkbox selected. An example is displayed below.



Figure 2-85 Bus Plans Example
PRINT ONLY DOCUMENTS

The following are print-only documents. Click <u>Create</u> on line of desired document. The document will generate a pdf that has the student's demographic information inserted.

GENAZ 45	Print Only Alternate Assessment Eligibility Criteria Form
GENAZ 46	Print Only APE Instruction Letter Print
GENAZ 47	Print Only Eye Exam Report
GENAZ 48	Print Only IEP Attendance Form
GENAZ 49	Print Only IEP Signature Page
GENAZ 50	Print Only Information Processing Worksheet for SLD
GENAZ 51	Print Only Medical Verification For Other Health Impaired (OHI)
GENAZ 52	Print Only Medical Verification For Orthopedically Impaired (OI)
GENAZ 53	Print Only Medical Verification For Traumatic Brain Injury (TBI)
GENAZ 54	Print Only Photo Release
GENAZ 55	Print Only Reevaluation Agreement
GENAZ 70	Print Only MET Review
GENAZ 71	Print Only Special Ed Signature Checklist
GENAZ 72	Print Only Special Activity Request
GENAZ 73	Print Only Transportation Monitor Request
GENAZ 74	Print Only Internet and Media Opt Out Form English
GENAZ 75	Print Only Internet and Media Opt Out Form Spanish

GENAZ 99 – BEHAVIOR INTERVENTION PLAN

The Behavior Intervention Plan works in conjunction with the Functional Behavior Assessment – GENAZ 34. Target Behavior as listed in the FBA is imported into the Behavior Intervention Plan.

The Behavior Intervention Plan contains two tabs:

- Team Members
- Method

Behavior Intervention	on Plan						(44
Student Name: Tacho, Katherine	A. Document: GE	ENAZ 99 Descript	ion: Behavior In	tervention I	Plan		
Team Members Method							
Document Name							
Behavior Intervention Plan							
Document Date							
An individual behavior plan is a clea behavior assessment and describe separate plan may be required for a and allows the student to fulfill the (Note: Behavioral consequences sl guidelines regarding the use of ave	arly stated worki is the goals and each targeted be function of the n nould protect the rsives.)	ing document v methods inten ehavior. A succ negative behavio e health and se	which incorpor ded to modify essful behavio or through the If-esteem of t	ates infor a studen or plan elin developm he studen	mation from a func I's negative behavio ninates the negative ient of new, positive t and be consisten	tional or. A ve behavio e behavio it with loc	or rs. :al
Team members who participated in	developing the F	FBA plan:					6
Student							
Parents							6
Line Parent Name		Relation Type			Particip	pant	
1 Tacho, Ernest		Father					
² Tacho, Rachel		Mother					
Staff						Add	6
X Line Staff Name		Role		Ş	Job Title		Ş
□ 1 <u>User, Admin</u> ←	Case Carrier		*				
2 Andrews, Mark +	Case Carrier		*				
Other specialists						Add	6
X Line Name	$\stackrel{\triangle}{\bigtriangledown}$	Role	$\stackrel{\triangle}{\bigtriangledown}$		Job Title		Ş
I. Target Behavior 🕎 🛇				Re	fresh Target Behavior		

Figure 2-86 Behavior Intervention Plan Screen

To create a Behavior Intervention Plan document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

TEAM MEMBERS TAB

The team members who participated will pull from the student's current Team List, however participant changes can be made directly to this document.

- 2. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.
- 3. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the

student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Γ	Staff			
	X Line Staff Name	Role		
	□ 1 Green. Tom ←	Case Carrier		
	□ 2 User, Admin ←	Teacher Specialist		

Figure 2-87 Behavior Intervention Plan Screen Staff Section Change/Add

Change current staff names:

Find Close Select Clear Selection						
Find: Staff						
Find Criteria					۵	
Last Name	First Na	me	Middle Name			
Smith	С					
Search Results						
Find Result	Find Result					
Line Last Name	Fi	irst Name		Middle Name		
1 Smith	CI	hristine				
2 Smith	Jk	(

Figure 2-88 Find: Staff Screen

- 1. Click next to the **Staff Name** to change. The Find: Staff screen displays.
- 2. Enter all or part of staff Last Name, First Name.
- 3. Click **Find** or press **ENTER**. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click <u>sect</u>. Find: Staff screen closes and staff name displays.

Sta	ff		Orient./Mobility Specialist			
×	Line	Staff Name	Role	Other		
	1	Green, Tom	Case Carrier 🗸 🗸	Physical Therapist		
	2	<u>User, Admin</u> ←	Teacher Specialist	Ps y chologist		
	3	Smith, John ←		Reader		
	Cabaal Nursa					

Figure 2-89 Behavior Intervention Plan Screen Staff Section Select Role

6. Click the **Role** dropdown and select the staff role.

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check is on the line of the staff name to remove. The row is removed.

The Other Specialists section will allow for participant names that are not available in the Staff directory.

- 4. Click the Add button on the Other Specialists bar. A new row will be added.
- 5. Enter the Name, Role and Job Title of the specialist.
- 6. If needed, check is on the line of the staff name to remove. The row is removed. Use to spellcheck. Use of for more space.

The Target Behavior is auto-populated from the Functional Behavioral Assessment document. However, users may enter additional information by typing in the box. Users may check to ensure

that the most current data has been imported from the FBA by clicking Refresh Target Behavior



Caution: Clicking the Refresh buttons will overwrite information previously entered into the textbox. Make sure to Refresh prior to adding any current data.

METHOD TAB

- 1. To add Environmental Strategies/Supports click the Add button. A new row will be added.
- 2. Select a **Strategy/Support** along with the **Frequency** from the drop down boxes.
- 3. Enter the **Person Responsible** for implementing the Strategy/Support.

II. Environmental Strategies/Supports (considerations but not exclusive nor exhaustive)					
×	Line	Strategy/Support	Frequency 🔶	Person Responsible	. 🔶
	1	*	~		

Figure 2-90 Behavior Intervention Plan Screen Part 2

- 4. To add Instructional Strategies click the **Add** button. A new row will be added.
- 5. Select the **Strategy** and **Frequency** from the drop down boxes.
- 6. Type in the **Person Responsible** for implementing the Strategy.

III	III. Instructional Strategies (considerations but not exclusive nor exhaustive)					Add	۵	
>	🤇 Line	Strategy	≙	Frequency	₽	Person Responsible		\bigtriangledown
	1		~	۷				

Figure 2-91 Behavior Intervention Plan Screen Part 3

7. Enter the **Identified Positive Reinforcers** and desired **Replacement Behaviors**. Use with to spellcheck. Use of for more space.

IV. Identified Positive Reinforcers (based upon administration of a positive reinforce	survey, parent input, student input, etc.) 🕎 🥥
V. Replacement Behavior (What the student should do in place of the problem beh	avior to meet his/her need(s) [gain, avoid, protest] in an acceptable way.) 🕎 🛇

Figure 2-92 Behavior Intervention Plan Screen Parts 4 and 5

- 8. To add Positive Reinforcement Procedures, click the Add button.
- 9. After adding the row, continue to fill out the desired **Tier**, **When Student Does**, **Frequency**, what the **Student Will Earn** and **Person Responsible** information.

VL Positive Reinforcement Procedures and Tiered Implementation Plan					Add	6			
×	Line	Tier 🔶 When Student Does		Frequency	🔷 Student v	rill Earn	Person Responsible		
		1			🖤 🎱				
					~				

Figure 2-94 Behavior Intervention Plan Part 6

- 10. In the Materials section, click **Add.** A new row displays.
- 11. Enter Tier, Materials Needed and Person Responsible in the row created.

VII.	VII. Materials Add				
×	Line	Tier	Haterials Needed	Person Responsible for Obtaining/Creating 🔤	
	1		型 🛇		

Figure 2-93 Behavior Intervention Plan Screen Part 7

12. Complete the fields **Response Cost/Negative Consequence** and **Monitoring** with the indicated data.



Figure 2-95 Behavior Intervention Plan Screen Parts 8 and 9

13. Click when next to the **Person to manage BIP and collect data.** The Find: Staff screen displays.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria			٩		
Last Name	First Name	Middle Name			
Smith	С				
Search Results					
Find Result			۵		
Line Last Name	First Name	Mid	ddle Name		
1 Smith	Christine				
2 Smith	Jk				

Figure 2-96 Find: Staff Screen

- 14. Enter all or part of staff Last Name, First Name.
- 15. Click **Find** or press **ENTER**. Search Results displays a list of matching criteria.
- 16. Click line of staff name. Line highlights.
- 17. Click again or click set. Find: Staff screen closes and staff name displays.
- 18. Click Save .

GENAZ 100 – NOTICE OF GRADUATION

The Notice of Graduation is a document with a unique function. This notice will exit the graduating student from Synergy SE. The Notice of Graduation is an optional document and not all districts will see this document.

The Notice of Graduation is moved to Historical Docs and the student will be removed from any Synergy SE process when this document is finalized.

(See: Documents With Unique Functionality)



Note: The Notice of Graduation has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Graduation contains one tab:

• Prior Written Notice

VPrior Written Notice	
Student Name: Saadat, Jodi Document: GENAZ 100 Description: Notice of	Graduation
Prior Written Notice	
Document Name	Document Date
Notice of Graduation	09/19/2012
Decision	٥
Current Decision:	Change Decision To "Notice of Graduation"
Description of Actions Proposed or Refused	0
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTR	RICT: Notice of Graduation
Statements	0
Explanation of why the district proposes or refuses to take the action:	
	i.
Description of each evaluation procedure, assessment, record or report	t used as a basis for the proprosed or refused action:
	h.
Description of other options considered and why those options were rej	ected:
	i.
Description of the factors relevant to the actions proposed or refused a	re:
	h
Implementation of Decision	0
This decision is proposed to be implemented on:	
Parents of a student and the student have protection under procedural si school psychologist or call the Special Education office if you want a co Procedural Safeguards provided to parent(s) (initials)	ifeguards in accordance with Federal Law. Contact the py of the procedural safeguards.
This document was prepared by:	
Admin User	
Case Manager Case Manager Phone	

Figure 2-97 Notice of Graduation Screen

To create a Notice of Graduation document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Click the Change Decision to "Notice of Graduation" button.

Decision					
Current Decision:	Change Decision To "Notice of Graduation"				

Figure 2-98 Notice of Graduation Screen Change Decision Button

3. The Statements section contains four statements with response boxes. Keyword dropdowns may be available for auto input of responses. If none are visible, enter responses manually. Use to spellcheck. Use ♥ for more space.



Figure 2-99 Notice of Graduation Screen Statements Section With Keyword Drop-down

Statements		
Explanation of why the district proposes or refuses to take the action:		
×		
	.4	

Figure 2-101 Notice of Graduation Screen Statements Section Without Keyword Drop-down

4. Enter date that decision will be implemented (MMDDYY) or click P and select date.



Figure 2-100 Notice of Graduation Screen Implementation of Decision

- 5. Enter (initials) to signify that the Procedural Safeguards were provided to parent.
- Click on the
 next to the words This document was prepared by:. The Find: Staff screen opens.

Find Close Select Clear Selection			
Find: Staff			
Find Criteria			٨
Last Name	First Name	Middle Name	
Smith	С		
Search Results			
Find Result			٩
Line Last Name	First Name		Middle Name
1 Smith	Christine		
2 Smith	Jk		

Figure 2-102 Find: Staff Screen

- 7. Enter all or part of Staff Last Name, First Name.
- 8. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 9. Click line of staff name. Line highlights.
- 10. Click again or click <u>seet</u>. Find: Staff screen closes and staff name displays.

- 11. Click Save
- 12. Click Finalize.

If the student's draft IEP has not been removed, this window displays:

VProcess Mo	> 🕹			
Please resolve all erro	rs listed below to pr	oceed with the proc	ess move.	
General Errors				0
Line Error Message				
1 Not allowed to ha				
Document Errors				
Line Document ID	Document Name	Error Message	Delete	Finalize
Referesh Error List				

Figure 2-103 Process Move Errors

- 13. Delete the IEP.
- 14. Click **Finalize**. The student record will be removed from the Portfolio screen. The finalized document displays on the Historical Docs tab.

GENAZ 500 – ESY LETTER

The ESY Letter is used to remind parents of their child's ineligibility for Extended School Year (ESY).

The ESY Letter contains one tab:

• ESY Letter

VESY Letter
Student Name: Abbott, Billy C. Document: GENAZ 500 Description: ESY Letter
ESY Letter
Document Name
ESY Letter
Document Date
Extended School Year Notice
Dear Parent/Guardian of: Abbott, Billy C.
The recognizes that some students receiving special education may need services beyond the traditional school year. The purpose of Extended School Year (ESY) is to:
- Prevent irreparable harm to the child's ability to maintain identified skills or behavior.
- Assist Children who reach critical learning stages who are unlikely to receive another opportunity to learn or generalize targeted skills or behavior.
The purpose of this letter is to remind you that your child was not determined eligible for Extended School Year programming
as documented in your child's IEP dated: 11/29/2011
If needed, you can review any data assessments or observation reports used by the IEP team. The reason for this action is the educational progress of your child will not be severely impacted by the summer break.
IEP Items Reviewed and Considered:
Critical learning stages Data-based observations Information provided by parent(s) and teachers and other(s) Least restrictive environment consideration Previous history Progress report(s) of annual goals Regression and recoupment evidence The current IEP or IFSP (present levels of educational performance, annual goals, objectives, etc.) Other factors:
А
Parents Rights
These factors are defined in your parent handbook entitled Explanation of Procedural Safeguards. If you need another copy of your procedural safegaurds, it may be obtained by contacting the school. You have the right to request an IEP meeting, at any time, if you feel your child's IEP should be changed.
Please call me at if you have any questions.
Sincerely,
Staff Name 🛶

Figure 2-104 ESY LetterScreen

To create an ESY Letter document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Check applicable IEP Items Reviewed and Considered.
- 3. If desired, check Other and explain in the textbox below.
- 4. Include the appropriate phone number in the Parents Rights section.
- 5. Click + next to **Staff Name**. The Find: Staff screen displays.
- 6. Enter all or part of staff Last Name, First Name.

Find Close Select Clear Selection						
Find: Staff	Find: Staff					
Find Criteria			0			
Last Name	First Name	Middle Name				
Smith	С					
Search Results						
Find Result			٩			
Line Last Name	First Name	N	liddle Name			
1 Smith	Christine					
2 Smith	Jk					

Figure 2-105 Find: Staff Screen

- 7. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 8. Click line of staff name. Line highlights.
- 9. Click again or click set. Find: Staff screen closes and staff name displays in gray box.
- 10. Click Save .

GENAZ 501 – TAP LETTER

The Team Approach Process (TAP) Letter can be used to request a meeting time with the parent to discuss additional resources needed for their child.

The TAP Letter contains one tab:

• TAP Letter

Menu Save Undo Delete Print Preview Valid	te Finalize			Status: Ready 没 🛓	0
√TAP Letter					-
Student Name: Alejandrez, Willie JR Document: GENAZ 501	Description: TAP Letter				
TAP Letter					
Document Name		Docu	iment Date		
TAP Letter					
Team Approach Process Notice					0
Dear Parent/Guardian of: Alejandrez, Willie JR					
The strives to meet the individual academic and behavior this goal.	al needs of its students. A var	iety of approaches,	, materials, and staff are used to	o try and accomplish	
Recently, it has come to my attention that your child may regarding your child's educational progress at this time, a child.	not be receiving the full benef nd invite you to confer with us	it of available schoos in order to exchan	ol resources. We would like to s ge information that may be help	hare our concern oful to us and your	
We call this endeavor the Team Approach Process (TAP appropriate educational program. The need for a positive	With your help we can bette learning experience is a goal	r assess the educa I that we share for y	tional needs of your child and p rour child.	lan the most	
Purpose of Letter					0
This letter is to inform you that we would like to schedu	e a TAP meeting with you. Th	is meeting is sched	tuled for:		
Meeting Date: Meeting Time:					
Location, Building, Room					
The enclosed Procedural Safeguards explain your rig	ts regarding special educatio	n provisions.			
This letter is to inform you that you will be contacted by	Staff Name				
to discuss options available to you. The enclosed Pro	edural Safeguards explain yo	our rights regarding	special education provisions.		
	Figure 2-106 TAP Let	ter Screen			

To create a TAP Letter document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Place a check in the **Purpose of Letter Section** indicating that a TAP meeting would like to be scheduled.
- 3. Enter the Meeting Date, Meeting Time and Location, Building, Room of the Meeting.
- 4. Check This letter is to... line
- 5. Click + next to **Staff Name**. The Find: Staff screen displays.
- 6. Enter all or part of staff Last Name, First Name.

Find Close Select Clear Selection				
Find: Staff				
Find Criteria				٢
Last Name	First Name	Middle Name		
Smith	С			
Search Results				
Find Result				0
Line Last Name	First Name		Middle Name	
1 Smith	Christine			
2 Smith	Jk			
	Figure 2-107 Find Staff Sc	reen		

- 7. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 8. Click line of staff name. Line highlights.
- 9. Click again or click set. Find: Staff screen closes and staff name displays.
- 10. Click Save

GENAZ 502 – TAP PARENT NOTICE

The Team Approach Process (TAP) Parent Notice functions the same as a prior written notice. It is used to inform the parent of the TAP team's intent to refer to special education, not take any further action, or state that further data is needed for a decision. These options may be selected from the drop down box in the **Based on the Review, That Data Suggest** section.

The TAP Parent Notice contains one tab:

• TAP Parent Notice

∀TAP Parent Notice	<<
Student Name: Abbott, Billy C. Document: GENAZ 502 Description: TAP Parent Notice	
TAP Parent Notice	
Document Name	
TAP Parent Notice	
Document Date	
Meeting Notice Documentation	
Describe the results of attempted or completed phone calls. Attach copies of correspondence sent to the parents and responses received. Describe visits made to the parents' home or place of employement and results of those visits:	ł

Figure 2-108 TAP Parent Notice Screen

To create a TAP Parent Notice document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Describe the results of attempted correspondence in the **Meeting Notice Documentation** section.
- 3. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included.
- 4. On the Parents section, check **Participant**, to include each parent/guardian name, as a participant. If these are left blank, the names will not be included as participants.

Participants:				
Student Student				
Parents		۵		
Line Parent Name	Relation Type	Participant		
1 Aaron, Kathleen	Mother			
2 Aaron, Phillip	Father			
3 Williams, Silver	Step-Father			
Staff		Add		
X Line Staff Name	Role			
☐ 1 Aderson, Gordon ←	Reader 💌			
2 <u>User, Admin</u> ←	Special Ed Teacher 🛛 👻			
□ 3 Blasdell W., Wendy ←	Reader 🗸 🗸			
Uilson, Rob←	Case Carrier 🛛 👻			
Other Specialists Add				
X Line Name	\ominus	Role 🖨		

Figure 2-109 TAP Parent Notice Screen Parent Notice Participants

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however, changes may be made including additional staff names added.

Change current staff names:

- 1. Click next to the **Staff Name** to change. The Find: Staff screen displays.
- 2. Enter all or part of staff Last Name, First Name.
- 3. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click set. Find: Staff screen closes and staff name displays.

Find Close Select Clear Selection					
Find: Staff	Find: Staff				
Find Criteria				٩	
Last Name	First N	Vame	Middle Name		
Smith	C				
Search Results					
Find Result				٨	
Line Last Name		First Name		Middle Name	
1 Smith		Christine			
2 Smith		Jk			

Figure 2-110 Find: Staff Screen

6. Click the Role dropdown and select the staff role.

Stat	Staff			Orient./Mobility Specialist
$ \mathbf{X} $	Line	Staff Name	Role	Other
	1	Green, Tom	Case Carrier	Physical Therapist
	2	User, Admin +	Teacher Specialist	Ps y chologist
	3	Smith, John +		Reader
				School Nurso

Figure 2-111 TAP Parent Notice Screen Staff Section Select Role

Add staff names:

- 1. Click **Add** on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check is on the line of the staff name to remove. The row is removed.

The Other Specialists section will allow for participant names that are not available in the Staff directory.

1. Click the Add button on the Other Specialists bar. A new row will be added.

Other Specialists		
×	Line Name	Role
	1 Linda Harris	Social Worker

Figure 2-112 TAP Parent Notice Screen Other Specialists

2. Enter the Name and Role of the specialist.

Basis(es) For Proposed Action:	G			
School staff members have been addressing concerns regarding your child. Information about your child has been reviewed to determine if there is reason to suspect a disability at this time. The basis(es) for the proposed action included:				
Parent/Guardian Reports Health History Discipline Records Report Cards	Staff Reports			
Educational History	ention Strategies			
Other:				
Summary Statements: 🕎 📀				
	A			
	*			

Figure 2-113 TAP Parent Notice Screen Basis for Proposed Action

- 1. Check any Basis for Proposed Action that applies.
- 2. Check Other and enter a description to provide a customized basis.
- 3. A text box has been provided to allow for **Summary Statements** of the information selected.
- 4. Using the drop down select the desired statement for **Based on the Review** Activities...and type any Other Relevant Factors.

Based On The Review Activites, That Data Suggests:	G
	~
Other Relevant Factors: 🕎 🥥	
	<u>^</u>
You have guaranteed rights under the law known as procedural safeguards. A copy of the proc form. If needed, another copy can be obtained by contacting your school or the Special Service legal rights.	edural safeguards was attached to the meeting notification s office. staff is available to assist you in understanding your

Figure 2-115 TAP Parent Notice Screen Based on Review Activities

- 5. Click next to Form Completed By: and use the Find: Staff view. Select the staff member's Title/Position using the available drop down.
- 6. Click Save

GENAZ 503 - ESY ELIGIBILITY PROFILE

The Extended School Year (ESY) Eligibility Profile describes, in detail, the reasons a student may be eligible for ESY services.

The ESY Eligibility Profile contains one tab:

• ESY Eligibility Profile

VESY Eligibility Profile	~
Student Name: Alejandrez, Willie JR Document: GENAZ 503	escription: ESY Eligibility Profile
ESY Eligibility Profile	
Document Name	
ESY Eligibility Profile	
Document Date	
Profile:	
Identify IEP Goals under consideration for ESY services.	O
A	
-	
Describe any parent-initiated inquiries or input about ESY se	ervices. 🅎 📀
A	•
-	
Describe regression following scheduled school breaks in th	e specific areas
identified above. Indicate performance levels between May/S	September and
pre/post winter break. Indicate evaluation/assessment meas	ures utilized. 🕎 父
· · ·	
-	
Describe rate of recoupment following scheduled school bre	aks
Indicate type of documentation utilized.	
<u> </u>	
Skill loss attributed to other reasons, i.e.: attendance, rando	om regression, medical. 🕎 🥥
A	
-	
Describe any other factors considered in justifying the stude	ent's eligibility to ESY services
(Nature & severity of disability, critical learning periods relate	ed to
self-sufficiency). 🕎 🔇	_
A	

Figure 2-116 ESY Eligibility Profile Screen

To create an ESY Eligibility Profile document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Complete the Profile: textboxes. Each field has the 🕎 spellcheck and 🛇 for more space.
- 3. Select the ESY Eligibility recommendation from drop down list.

Recommendation:	Q
ESY Eligibility	
×	

Figure 2-117 ESY Eligibility Profile Screen Recommendation

4. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Staff			Add
X	Line Staff Name	Role	
	1 <u>Green, Tom</u> ←	Case Carrier	
	2 <u>User, Admin</u> ←	Teacher Specialist	

Figure 2-118 ESY Eligibility Profile Screen Staff Section Change/Add

Change current staff names:

1. Click - next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria				٨	
Last Name First N		e	Middle Name		
Smith	С				
Search Results	Search Results				
Find Result	Find Result				
Line Last Name	Firs	t Name		Middle Name	
1 Smith	Chri	istine			
2 Smith	Jk				

Figure 2-119 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click **Find** or press **ENTER**. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click set. Find: Staff screen closes and staff name displays.

6. Click the **Role** dropdown and select the staff role.

Staff			Orient./Mobility Specialist	
X	Line	Staff Name	Role	Other
	1	Green, Tom	Case Carrier	Physical Therapist
	2	User, Admin (Teacher Specialist	P §y chologist
	3	Smith, John ←		Reader
				Cohool Nurse

Figure 2-120 ESY Eligibility Profile Screen Staff Section Select Role

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check is on the line of the staff name to remove. The row is removed.

The Other Specialists section will allow for participant names that are not available in the Staff directory.

- 1. Click the Add button on the Other Specialists bar. A new row will be added.
- 2. Enter the Name, Role and Job Title of the specialist.
- 3. If needed, check is on the line of the staff name to remove. The row is removed. Use to spellcheck. Use Is for more space.
- 4. Click Save .

GENAZ 504 – AZ504ELIGIBILITY

Use the AZ504Eligibility document is a Notice of Section 504 Eligibility Form that is used when determining if a student is eligible for services under Section 504.

The AZ504Eligibility contains four tabs.

- Evaluation Information
- Eligibility Analysis
- Eligibility Determination
- Attachments

VAZ504Eligibility
Student Name: Tacho, Katherine A. Document: GENAZ 504 Description: Notice of Section 504 Student Eligibility Form
Evaluation Information Eligibility Analysis Eligibility Determination Attachments
Document Alias
Notice of Section 504 Student Eligibility Form
Document Date
Evaluation Information: (check all that apply)
Psychological Evaluation Teacher Input
Physician Report Discipline History
Achievement Tests
Teacher Recommendations Curriculum Based Assessments
Observation Data Other
Other 🕎 🛇

Figure 2-121 AZ504Eligibility Screen Evaluation Information Tab

To create an AZ504Eligibility document:

EVALUATION INFORMATION TAB

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Check all sources of evaluation information used to determine 504 Eligibility.
- 3. Check **Other** and input any additional information in the **Other** textbox. Use 🕎 to spellcheck and 📀 for more space.
- 4. Click save and move to the next tab.

ELIGIBILITY ANALYSIS TAB

VAZ504Eligibility				
Student Name: Tackett, Heather S. Document: GEN	AZ 504 Description: Notice	of Section 504 Student E	Eligibility Form	
Evaluation Information Eligibility Analysis Eligibility De	termination Attachments			
Document Alias				
Notice of Section 504 Student Eligibility Form				
Document Date				
1. Mental or physical impairment				
Does the student have a mental or physical impair impairment and supporting data)	ment? (If "No", go to elig	ibility determination	section. If "Yes",	identify the
List each identified impairment and the physician, ps [As recognized in DSM-IV or other respected source	sychologist or other profe if not excluded under 504	essional who made th #ADA, e.g., illegal dru	g use]	Add 🕥
X Line Impairment	Diagnosed By)	Date	\$
Summarize supporting evaluation information 🕎 Q)			
1				4
2. Culture, economics or environment (CEE) account	for limitations			9
Does culture, economics or environment (CEE) acc (MLA/MBF)? (If "No", go to the next section. If "Yes Describe why CEE limits a MLA/MBF 🕎 🛇	count for limitations in a s", describe why CEE li	Major Life Activity/N mits a MLA/MBF)	lajor Bodily Funct	ion
				4
Important Note: If the substantial limitation is prima is not 504 disabled and a 504 Equal Educational C	arily the result of cultural opportunity Plan (EE0P)	, economic or enviro should not be develo	onmental factors, t oped.	he student

Figure 2-122 AZ504Eligibility Screen Evaluation Information Tab Part 1 and 2

1. Select **Yes** or **No** from drop down to indicate whether the student has a mental or physical impairment.

Identify impairments:

- 1. Click **Add** on the bar below for each impairment to identify. A new line is added each time to the grid.
- 2. Complete each line with the name of the **Impairment**, **Diagnosed By** and the **Date** it was diagnosed.
- 3. If needed, check is on the line of an impairment to delete. The row is removed.
- 4. Summarize supporting evaluation information in the text box.

Rule out other factors:

- 1. Under Section 2., select **Yes** or **No** from the drop down to indicate whether culture, economics, or environment account for limitations.
- 2. If **No**, move to the next section. If **Yes**, describe why CEE impacts Major Life Activity in the text box.

3. Temporary Impairment	6
Is the impairment temporary?	
4. Impairments episodic or in remission	6
Are any of the student's identified or suspected impairments episodic or in remission? If "Yes", state which of the identified or suspected impairments is episodic or in remission and describe the frequence intensity or expected duration of the impairment's symptoms or characteristics 🕎 🛇	cy,

Figure 2-123 AZ504Eligibility Screen Information Tab Part 3 and 4

Temporary impairment:

- 1. Under Section 3., select **Yes** or **No** from the drop down to answer the question: **Is the impairment temporary?**
- 2. Using the drop down select **Yes** or **No** if the student's impairments are episodic (occurring or appearing in irregular intervals) or in remission (the symptoms have subsided or no longer observed).
- 3. If **No**, move to the next section. If **Yes**, indicate which impairments are episodic or in remission along with frequency, intensity and duration in the provided text box.

5. Identified impairment(s) limit any of MLA or MBF if not have mitigating measures in place	6
Would the student's identified impairment(s) limit any of the following major life activities (MLA) or major bodily func (MBF) if the student does not or did not have mitigating measures in place?	tions:
In terms of frequency, intensity and duration, does the impairment, when in an active state, substantially limit a ML when compared to how the average, non-disabled student performs the same major life activity? If so, please check of the following major life activities or major bodily functions are or may be limited by the impairment(s)	A/MBF k which
Caring for One's Self Learning Eating	
Walking Concentrating Sleeping	
Bending Reading Communicating Standing Seeing Other	
Other 🕎 🛇	
h.	
A. Is the student using any measures or other modifications to reduce or control the effect of the impairment?	
B. How is the impairment being mitigated? 🕎 🛇	
C. Describe the extent to which a MLA/MBF is limited if the student was not using a mitigating measure 🕎 🥥	
D. Describe how and the degree to which the impairment limits MLAVMBF	
Explain 🕎 🛇	

Figure 2-124 AZ504Eligibility Screen Information Tab Part 5

- In section 5, select Yes or No from the drop down to indicate if the Identified impairments limit (Major Life Activities) MLA or Major Bodily Functions (MBF) if the student does not or did not have mitigating measures in place.
- 2. Check all identified MLA or MBF activities affected. An **Other** textbox is provided for any additional areas noted by the team.
- 3. Answer **Yes** or **No** from the drop down to indicate whether the student is using any additional measures or modifications to reduce the effects of the impairment.
- 4. In the provided text box answer how the impairment is mitigated.
- 5. Describe the extent to which the MLA/MBF is limited when not using a mitigating method.
- Describe how and the degree to which impairment limits MLA/MBF by selecting Negligible, Mild/Moderate, Substantial, or Severe from the drop down. Explain your answer the text box below.

ELIGIBILITY DETERMINATION TAB

VAZ504Eligibility	у			(«			
Student Name: Tackett, He	eather S. Document GEM	IAZ 504 Description: Notice r	of Section 504 Student Eligibility Form				
Evaluation Information Eligibility Analysis Eligibility Determination Attachments							
Document Alias				Document Date			
Notice of Section 504 Stud	lent Eligibility Form						
Based on analysis of the e	valuation data, does the	student have a disability	that substantially limits a major	life activity?			
×							
The student is Section 504	eligible but does not red	uire a Section 504 EEO	P because				
	~						
Does the student require s impairment?	pecific health manageme	ent protocols to manage	the effects of a chronic or acute	health or medical			
×							
Participants:				Q			
Student (grades 7-12 r	nust be invited):						
Parent Participants				Q			
Line Parent Name	Relation Type	Educational Rights	Contact Allowed	Participant			
1 Hunt, Donna	Grandmother	Yes	Yes				
2 Tackett, Carl	Father	No	No				
3 Lou, Cheryl	Mother	No	No				
Staff Participants				Add 🔇			
X Line Staff Name			Role	Ş			
Admin User +		Behavior Intervention Sp	ecialist 💌				
2 ReadOnly User	+	Case Carrier	~				
Other Participants				Add 🔇			
X Line	Name	÷.	Role	÷			
Parantal Notice				0			
I have received a conv of t	his Notice of Section 50	Eligibility and have reco	ined a conv of the Darent's Notic	a of Section 504 Diabte			
i nave received a copy of t	his Notice of Section So-	Cligionity and have rece	eved a copy of the Parent's Notif	te of Section 504 Rights.			
Devest Cise store Date							
Parent Signature Date	Parent Signature Date						

Figure 2-125 AZ504Eligibility Screen Eligibility Determination Tab

- Select the appropriate determination from the drop down to indicate whether the student has a disability that substantially limits a major life activity. If the team selects No or that an EEOP plan is required the user will not have the option to select a choice from the following field.
- 2. If the user selects that the statement indicating the **student is eligible for a 504 but does not require an EEOP because** they must hit the Save before the user can select **why an EEOP is not required** from the following drop down.
- 3. Select Yes or No to indicate if the student requires special health management protocols.

Participants:

- 4. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant. Students in grades 7-12 must be invited.
- 5. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Sta	Staff				
X	Line	Staff Name	Role		
	1	Green, Tom	Case Carrier 🗸 🗸		
	2	User, Admin +	Teacher Specialist 👻		

Figure 2-126 AZ504Eligibility Screen Staff Section Change/Add

Change current staff names:

1. Click - next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria			٨		
Last Name	First Name	Middle Name			
Smith	С				
Search Results					
Find Result			6		
Line Last Name	First Name	Middle N	lame		
1 Smith	Christine				
2 Smith	Jk				

Figure 2-127 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click **Find** or press **ENTER**. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click set. Find: Staff screen closes and staff name displays.

Staf	Staff			Orient./Mobility Specialist
×	Line	Staff Name	Role	Other
	1	Green, Tom +	Case Carrier	Physical Therapist
	2	<u>User, Admin</u>	Teacher Specialist	P §y chologist
	3	Smith, John 🗲		Reader
				School Nurso -

Figure 2-128 AZ504Eligibility Screen Staff Section Select Role

6. Click the **Role** dropdown and select the staff role.

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check a on the line of the staff name to remove. The row is removed.

The Other Specialists section will allow for participant names that are not available in the Staff directory.

- 1. Click the Add on the Other Specialists bar. A new row will be added.
- 2. Enter the Name, Role and Job Title of the specialist.
- 3. If needed, check 🗖 on the line of the staff name to remove. The row is removed. Use 🕎 to spellcheck. Use 🛇 for more space.

4. Indicate **Parental Notice** by typing in the Parent's name and entering the date notice was given to parents by using the Calendar icon or type in the date using MM/DD/YYYY format.

ATTACHMENTS TAB

VAZ504Eligibility					(«
Student Name: Tackett, Heather S. Document: GENAZ 504 Description: Notice of Section 504 Student Eligibility Form					
Evaluation Information	Eligibility Analysis	Eligibility Determination	Attachments		
Document Alias					
Notice of Section 50	4 Student Eligibil	ity Form			
Document Date					
Word Document Atta	chments				Add 🔕

Figure 2-129 AZ504Eligibility Screen Attachments Tab

5. Attachments may be saved along with the document. To add a document click **Add.** A small upload window opens.

Attach document		
Steps To Upload Image: 1) Click Browse and select the file you wish to upload 2) Click Upload		
Browse		
Upload		

Figure 2-130 Upload File Screen

- 6. Click **Browse** to locate the document on your computer.
- 7. Once selected, click **Upload**. The document title and type display on the line. Only PDF and Word documents may be attached.

Word Document Attachments					Add] 🔕		
Γ	×	Line	Pr	int Order	Comment 🔤	(Document	\$
[1	1		Physician Summary Statement		W	

Figure 2-131 AZ504Eligibility Screen Word Document Attachments

8. Click Save

GENAZ 505 – ESY ADDENDUM

The Extended School Year (ESY) Addendum includes the IEP Meeting Notice documentation, as well as details of the goals and objectives, program description, special considerations and parent participation. This document is an addendum to the student's current IEP.

The ESY Addendum contains one tab:

• ESY Addendum

VESY Addendum	(«
Student Name: Tacho, Katherine A. Document: GENAZ 505 Description: ESY Addendum	
ESY Addendum	
Document Name	
ESY Addendum	
Document Date	
Meeting Notice Documentation	٩
Date of Meeting Notice Date of IEP Meeting	
Record of Attempt to Arrange Meeting 🕎 🛇	
۲.	4
ESY Goals/Objectives 🕎 🛇	
Program Description 🕎 🛇	
Special Considerations 🕎 🛇	
	1
Description of Parental Participation 🕎 🥥	
	1

Figure 2-132 ESY Addendum Screen Screen

To create an ESY Addendum document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Using the Calendar select the Date of Meeting Notice and Date of IEP Meeting.
- 3. Type in Record of Attempt to Arrange Meeting in the textbox.
- 4. All **ESY Goals/Objectives** that were checked in the finalized IEP will be imported. In addition, goals and objectives may be added and edited by typing in the textbox.
- 5. Complete the Program Description, Special Considerations, and Description of Parental Participation.

Participants:

- 1. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant. Students in grades 7-12 must be invited.
- 2. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Sta	Staff				
X	Line	Staff Name	Role		
	1	Green, Tom	Case Carrier 💌		
	2	User, Admin ←	Teacher Specialist		

Figure 2-133 ESY Addendum Screen Staff Section Change/Add

Change current staff names:

1. Click - next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection						
Find: Staff						
Find Criteria	Find Criteria					
Last Name	First Name	Middle Name				
Smith	С					
Search Results						
Find Result			۵			
Line Last Name	First Name	h	Middle Name			
1 Smith	Christine					
2 Smith	Jk					

Figure 2-134 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click for press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click <u>seet</u>. Find: Staff screen closes and staff name displays.

Staf	ff		Orient./Mobility Specialist	
X	Line	Staff Name	Role	Other
	1	Green, Tom	Case Carrier	Physical Therapist
	2	<u>User, Admin</u> ←	Teacher Specialist	Psychologist
	3	Smith, John +		Reader
				School Musea_

Figure 2-135 ESY Addendum Screen Staff Section Select Role

6. Click the **Role** dropdown and select the staff role.

Add staff names:

- 1. Click **Add** on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check 🗖 on the line of the staff name to remove. The row is removed.

The Other Specialists section will allow for participant names that are not available in the Staff directory.

- 1. Click the **Add** on the Other Specialists bar. A new row will be added.
- 2. Enter the Name, Role and Job Title of the specialist.
- 3. If needed, check 🗖 on the line of the staff name to remove. The row is removed. Use 🖤 to spellcheck. Use 🔮 for more space.

Prior Written Notice

- 1. Indicate **Parental Notice** by typing the parent's name and entering the date notice was given to parents (MMDDYY) or click and select date.
- 2. Check all Sources of information used as basis for proposal:.
- 3. Add the IEP (Date) (MMDDYY) or click IP and select date.
- 4. If needed, type additional information in the **Other** box.
- 5. Enter **The reason for this proposal . .** in the textbox. Use 🖾 to spellcheck. Use 🛇 for more space.

Prior Written Notice	Prior Written Notice				
Information used as the basis for	or the proposal include the	following sources:			
Sources of information used as	the basis for the proposal:	(Check those used)			
Grades	Parent Report	Work Samples	School Records		
Medical Reports	Psychoeducational Eva	aluations 🗖 Classroom Teacher(s)	Report 🗖 Group Achievement Test		
🗖 Individual Achievement Tests	s 🗖 Classroom Observatio	ns			
IEP (Date)					
Other					
The reason for this proposal, oth	ner options considered and	rejected, and other factors relevar	nt to the district's proposal or refusal 🕎 🥥		
		*			
		-			

Figure 2-136 ESY Addendum Screen Prior Written Notice

6. Indicate **Parent Consent** by selecting the response of **Accept, Decline** or **Did Not Respond** from the drop down box.



Figure 2-137 ESY Addendum Screen Parent Consent

- 7. Enter the **Parent Signature Date** (MMDDYY) or click and select date.
- 8. Click Save

GENAZ 700 – HEALTH AIDE PREPAYMENT REVIEW FORM

The Health Aide Prepayment Review Form has one tab:

• Health Aide Prepayment Review

∀Health Aide Prepayment Review Form						
Student Name: Docu	ment: GENAZ 700) Description: Health A	ide Prepay	ment Review Form		
Health Aide Prepayment Review						
Document Name					0	Document Date
Health Aide Prepayment Review Form						
1. Complete Contact Information						Q
Contact name:			Job title:			
Contact e-mail:	_		Contact t	elephone number:		
2. Complete Student IEP Information						(
Note: (if amendment is related to Health Aid	de services, ple	ase use the effection	ve date of	the amendment a	s the I	IEP start date)
Student Last Name:			Student F	First Name:		
AHCCCS ID #: (Axxxxxxxx)		Birth Date				
Start date of IEP: (mm/dd/yyyy)			End date	of IEP: (mm/dd/y)	ууу)	
3. Number of Health Aide Minutes Per Day Req	uested					(
Number of health aide minutes per day requ	ested:					
4. List Name(s), Position, and Certification of G (ADL)	Qualified Medica	Il Provider(s) That Si	gned the I	EP and Recommen	ded Ac	tivies of Daily Living 🕥
Provider Name:	Position:			Certification or Lie	cense:	:
Qualified medical providers: Audiologist, Lic Licensed Professional Counselor (LPC), Oc Guidance Counselor, School based License Nurse (RN), Speech-Language Pathologists	ensed Clinical cupational The d Practical Nu (SLP)	Social Worker (LC rapist, Physical Th rse (LPN), School I	SVV), Lice erapist, P Based Sc	ensed Marriage and sychiatrist, Psych hool Psychologist	d Fam iologis , Scho	ıly Therapıst (LM⊢T), ıt, School Based ool Based Registered
5. What Medicaid Reimbursable Activities of D	aily Living (ADL)	have been prescib	ed for the	student?		۵
Check only those that apply to the student.						
Dressing	Mobility			Transfer	s	
Eating/Feeding	Position	ina		Use of A	Assisti	ive devices
Grooming	Toiloting					
Grooming	Tolleting	1				
6. Page Number(s) of the IEP That Demonstrat	e the Need for 1	he ADL(s) Listed Ab	ove			
Above. Please highlight relevant sentences	in attached co	py of the IEP.	vider is re	commenaing need	i for th	ie ADL(s) identified
7 Dage Number/s) of the IED that state the Sec	ne Frequency	and Duration (SED)	of Mediacia	d Allowable Service		
List the page number(s) of the IEP that clear provided by a health aide. Please highlight S	arly state the so SFD in attache	cope, frequency, and dopy of the IEP.	d duratior	n (SFD) of Medicai	id allov	wable services to be
8. Additional Health Aide Services			-			
Does the student need Health Aide services	s that are not a	Medicaid reimburs	able ADL	such as reinforce	ment o	of therapy, education or
academic needs, or behavior?						
8a. If yes, does the SFD in the IEP separate	e time for thes	e activities from the	Medicaid	I reimbursable ADI	Ls?	
~						
Confirmation						<u>(</u>
LEA qualified representative first and last na	ame (print):	Title:		Dat	e of Si	ignature:

Figure 2-138 Health Aide Prepayment Review Form Screen

To create a Health Aide Prepayment Review Form document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Complete Contact Information including Contact name:, Contact e-mail:, Job title:, and Contact telephone number:.
- 3. Complete Student IEP Information including **AHCCCS ID** (if this field is available), **Start date of IEP**: and **End date of IEP**: (MMDDYY) or click and select date.



Note: If amendment is related to Health Aide services, please use the effective date of the amendment as the IEP start date.

- 4. Enter the Number of health aide minutes per day requested:.
- 5. List Name(s), Position, and Certification of Qualified Medical Provider(s) That Signed the IEP and Recommended Activities of Daily Living (ADL) in the appropriate spaces provided. The list of possible qualified medical providers follows:

Audiologist, Licensed Clinical Social Worker (LCSW), Licensed Marriage and Family Therapist (LMFT), Licensed Professional Counselor (LPC), Occupational Therapist, Physical Therapist, Psychiatrist, Psychologist, School Based Guidance Counselor, School based Licensed Practical Nurse (LPN), School Based School Psychologist, School Based Registered Nurse (RN), Speech-Language Pathologists (SLP)

- 6. Check only the Medicaid Reimbursable Activities of Daily Living (ADL) that have been prescribed for the student.
- 7. List the page number(s) of the IEP that demonstrate the qualified medical provider is recommending need for the ADL(s) that were identified above. Remember to highlight relevant sentences in attached copy of the IEP.
- 8. List the page number(s) of the IEP that clearly state the scope, frequency, and duration (SFD) of Medicaid allowable services to be provided by a health aide. Remember to highlight SFD in attached copy of the IEP.
- 9. Click the drop-down under Does the student need Health Aide services that are not a Medicaid reimbursable ADL such as reinforcement of therapy, education or academic needs, or behavior? and select Yes or No.
- 10. If Yes is selected, click the drop-down under 8a. If yes, does the SFD in the IEP separate time for these activities from the Medicaid reimbursable ADL? and select Yes or No.
- 11. Enter the Local Education Agency (LEA) qualified representative first and last name (print): If this document has already been printed out, make sure to print this person's name.
- 12. Enter their Title:
- 13. Enter the **Date of Signature**: (MMDDYY) or click P and select date.
- 14. Click Save



Chapter Three: PROCESS DOCUMENTS

In this chapter, the following topics are covered:

- ▶ What SE Process Documents are available
- ► How to create, save, validate and finalize specific documents

PROCESS DOCUMENTS

GENAZ 01	Referral
GENAZ 02	Notice of Referral
GENAZ 03	Parent Input
GENAZ 04	Notice of Evaluation Decision
GENAZ 05	Parent Permission
GENAZ 06	Multidisciplinary Evaluation Team (MET)
GENAZ 07	MET Meeting Request
GENAZ 08	Notice of Eligibility
GENAZ 09	IEP Meeting Request
GENAZ 10	Notice of Placement
GENAZ 11	Notice of IEP
GENAZ 12	IEP
GENAZ 12 GENAZ 13	IEP Notice of Placement
GENAZ 12 GENAZ 13 GENAZ 14	IEP Notice of Placement Notice of IEP
GENAZ 12 GENAZ 13 GENAZ 14 GENAZ 15	IEP Notice of Placement Notice of IEP Notice of Reeval Waiver
GENAZ 12 GENAZ 13 GENAZ 14 GENAZ 15 GENAZ 16	IEP Notice of Placement Notice of IEP Notice of Reeval Waiver Notice of Referral
GENAZ 12 GENAZ 13 GENAZ 14 GENAZ 15 GENAZ 16 GENAZ 17	IEP Notice of Placement Notice of IEP Notice of Reeval Waiver Notice of Referral Notice of Referral
GENAZ 12 GENAZ 13 GENAZ 14 GENAZ 15 GENAZ 16 GENAZ 17 GENAZ 18	IEP Notice of Placement Notice of IEP Notice of Reeval Waiver Notice of Referral Notice of Referral Notice of Triennial
GENAZ 12 GENAZ 13 GENAZ 14 GENAZ 15 GENAZ 16 GENAZ 17 GENAZ 18 GENAZ 19	IEP Notice of Placement Notice of IEP Notice of Reeval Waiver Notice of Referral Notice of Referral Notice of Triennial Notice of Triennial
GENAZ 12 GENAZ 13 GENAZ 14 GENAZ 15 GENAZ 16 GENAZ 17 GENAZ 18 GENAZ 19 GENAZ 20	IEP Notice of Placement Notice of IEP Notice of Reeval Waiver Notice of Referral Notice of Referral Notice of Reevaluation Decision Notice of Triennial Notice of Test Intent Notice of Test Intent
GENAZ 12 GENAZ 13 GENAZ 14 GENAZ 15 GENAZ 16 GENAZ 17 GENAZ 18 GENAZ 19 GENAZ 20 GENAZ 21	IEP Notice of Placement Notice of IEP Notice of Reeval Waiver Notice of Referral Notice of Referral Notice of Triennial Notice of Triennial Notice of Test Intent Notice of Termination

GENAZ 23	Notice of Transfer
GENAZ 24	Transfer IEP
GENAZ 25	Notice of Referral (Preschool)
GENAZ 26	Notice of Evaluation Decision (Preschool)
GENAZ 27	Notice of Placement (Preschool)
GENAZ 28	Notice of IEP (Preschool)

ELIGIBILITY DETERMINATION DOCUMENTS

GENAZ 56	Eligibility Determination	Autism
GENAZ 57	Eligibility Determination	Emotional Disability
GENAZ 58	Eligibility Determination	Hearing Impairment
GENAZ 59	Eligibility Determination	Intellectual Disability
GENAZ 60	Eligibility Determination	Multiple Disabilities / SSI
GENAZ 61	Eligibility Determination	Other Health Impairment
GENAZ 63	Eligibility Determination	Orthopedic Impairment
GENAZ 64A	Eligibility Determination	Developmental Delay
GENAZ 64	Eligibility Determination	Preschool Severe Delay
GENAZ 65	Eligibility Determination	Specific Learning Disability
GENAZ 66	Eligibility Determination	Speech/Language Impairment
GENAZ 67	Eligibility Determination	Traumatic Brain Injury
GENAZ 68	Eligibility Determination	Visual Impairment
GENAZ 69	Eligibility Determination	Non Eligible Child

GENAZ 01 – REFERRAL

The Referral is located in the Initial and Reevaluation Process.

The Referral contains seven tabs. The tabs include:

- Reason for Referral
- Interventions
- Attendance History
- Cultural Factors
- Standardized Testing
- Student Performance
- Health

Referral	
Student Name: Aaron, Ian Document: GENAZ 01 Description: Referral	
Reason for Referral Interventions Attendance History Cultural Factors Standardized Testing Student Performance	Health
Jocument Name	Document Date
Referral	
Arizona English Language Learner Assessment (AZELLA)	
Scaled Score Performance Level	
Reason for Referral	<u></u>
Referral Source Type	
Referred By	
Reason For Referral 🕎 🥥	
ii.	
Speech Only: Click Here if Reason For Referral is for Articulation. Voice, or Fluency concerns ONLY.	
Student Strengths (Please describe in full sentences, areas of relative strength and student's positive attribut	es) 🕎 🙆
citatine changers (r radio accorde in fair somenoos), alcas of refaire onenger and statine positive atmost	
Areas of Canaam	
Areas of Concern	
Check the general category, if it is an area of concern. Within areas of concern, check all items that reflect s compared with others at the student's grade level.	tudent difficulties when
Reading CRead	ing Other
Does not know letter names	
Does not know letter sounds	
Does not decode new words phonetically	
Does not have the expected sight word vocabulary	
Does not read at an appropriate rate	
Has difficulty comprehending what is read	
Cannot summarize the main idea of passages	
Cannot recall details of what is read	

Figure 3-1 Referral Screen Reason for Referral Tab

To create a Referral document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

REASON FOR REFERRAL TAB

- 2. Enter the AZELLA scores, if applicable, for the student. The **Scaled Score** field accepts numerical data only.
- 3. Click the **Referral Source Type** drop-down and select.
- Type the name of the person who referred the student in the Referred By text box. The data in this field will import to GENAZ 05 Parent Permission in addition to GENAZ 06 – MET Report/Referral Tab.
- Type the reason the student was referred in the Reason For Referral textbox. The data in this field will import to GENAZ 05 Parent Permission in addition to GENAZ 06 – MET Report/Referral Tab.
- 6. If the student is being referred for speech only concerns, place a checkmark in the **Speech Only** checkbox.
- 7. Type strengths of the student in full sentences in the **Student Strengths** textbox. The data in this field will import to GENAZ 06 MET Report.

Areas of Concern contain a series of statements that are to be checked if the area is of concern for the student. Only the selected statements will appear on the printable Referral document. The data in this field will import to GENAZ 06 – MET Report/Referral Tab.

Each area has an "Other" textbox available for listing items not included in the checkbox list. The data in this field will import to GENAZ 06 – MET Report/Referral Tab.

INTERVENTIONS TAB

 Indicate in the Interventions textbox which interventions have been implemented for at least four weeks. The data in this field will import to GENAZ 06 – MET Report/Existing Data Tab.

∀Referral	~
Student Name: Aaron, Ian Document: GENAZ 01 Description: Referral	
Reason for Referral Interventions Attendance History Cultural Factors Standardized Testing Student Performance	Health
Document Name	Document Date
Referral	
Interventions	(
(Please indicate which interventions have been implemented for at least four weeks.)	
Interventions 🕎 🛇	

Figure 3-2 Referral Screen Interventions Tab



Tip: When entering, editing or viewing information in a textbox, grab in the bottom right corner, to resize the box. The box can be adjusted larger to view more of the information or smaller to provide more room on the screen.

ATTENDANCE HISTORY TAB

The student's attendance history imports from Synergy SIS. This history will only display attendance from the current school district. The data in this field will import to GENAZ 06 – MET Report/Existing Data Tab.

∀Referral				(«
Student Name: Aaron, Ian Document: GENAZ 01 Description: Referral				
Reason for Referral Interventions Attendance History Cultural Factors Standardized Testing Student Performance	Health			
Document Name	Docume	nt Date		
Referral				
Attendance History				0
			Add	
🗙 Line Year \ominus Grade 🖨 School Location 😂 Absences 🖨 Significant Information				
□ 1 2012 04 🕜 Adams Elementary 37			:	
Refresh From Attendance				

Figure 3-3 Referral Screen Attendance History Tab

1. Significant Information can be added in the textbox. Use 🖾 to spellcheck. Use 🛇 for more space.

If additional school years need to be added:

- 2. Click the **Add** button to display a new row.
- 3. Enter the school **Year**, **Grade**, **School Location** and **Absences** in the spaces provided. **Significant Information** can also be added to this row.
- 4. If needed, check 🔲 on the line of the record to remove. The row is removed.

CULTURAL FACTORS TAB

∀Referral	(«
Student Name: Aaron, Ian Document: GENAZ 01 Description: Referral	
Reason for Referral Interventions Attendance History Cultural Factors Standardized Testing Student Performance	Health
Document Name	Document Date
Referral	
Cultural Factors	Q
There is no evidence of lack of instruction in reading and math (including excessive absences and/or frequ There is no evidence that race, limited English proficiency, or socio-economic status have contributed to th The following cultural factors (race, limited English proficiency, or socio-economic status) may have impact progress:	ent moves). he student's learning difficulties. :ted the student's academic
Please describe any cultural factors which may affect student's achievement and behavior 🕎 🛇	

Figure 3-4 Referral Screen Cultural Factors Tab

- 1. Determine if there were **Cultural Factors** that had an impact on the student's academic progress and check the appropriate statement(s).
- 2. If the third statement is selected, describe those factors in the textbox below. Use ^I to spellcheck. Use ^I of or more space.

STANDARDIZED TESTING TAB

The Standardized Testing contains tests used by the school district. The data from this tab will import to GENAZ 06 – MET Report/Existing Data Tab.

∀Referral					(«		
Student Name: Aaron, Ian Document: GENAZ 01 Description: Referral							
Reason for Referral Interventions Attendance H	Reason for Referral Interventions Attendance History Cultural Factors Standardized Testing Student Performance Health						
Document Name				Docum	ent Date		
Referral					P		
Standardized Test					Show Detail		
Line Test Name 🔶	Test Grade		Test Date	♦	Print Test 🛛 🔶		
1 District Assessment	*				\checkmark		
2 Terra Nova	*				Image: A start of the start		
3 AIMS	*		7		v		
4 AIMS-A	~		P				

Figure 3-5 Referral Screen Standardixed Testing Tab

Standardized Tests cannot be removed but can be set to not print on the printable documents.

1. Click the checkmark (uncheck) in the **Print Test** column of the test rows that will not be used.

To add Standardized Test data:

- 2. Click the **Show Detail** button
- 3. Select the Test Name by clicking on the test name line.
- 4. Add the grade from the **Test Grade** drop-down.
- 5. Enter the **Test Date** (MMDDYY) or click and select date.
- 6. Add **Test Scores** by clicking on the Add button in the Test Scores group box.
- 7. If needed, check 🔲 on the line of the **Test Score** to remove. The row is removed.
- 8. Click <u>Save</u> before updating another test.
- 9. Click another **Test Name** and repeat the steps above, to update that test information, if desired.

STUDENT PERFORMANCE TAB

The Student Performance section allows for evaluation data to be entered for each of the student's subject areas. The data from this tab will import to GENAZ 06 – MET Report/Existing Data Tab and GENAZ 12 – IEP/PLAAFP Tab.



Figure 3-6 Referral Screen Student Performance Tan

- 1. Click the Add button to add a Student Evaluation Report.
- 2. Click next to the **Teacher Name.** The Find: Staff screen displays.

Find Close Select Clear Selection						
Find: Staff						
Find Criteria			۵			
Last Name	First Name	Middle Name				
Smith	С					
Search Results						
Find Result			۵			
Line Last Name	First Name	м	iddle Name			
1 Smith	Christine					
2 Smith	Jk					

Figure 3-7 Find: Staff Screen

- 3. Enter all or part of the Last Name, First Name.
- 4. Click **Find** or press **ENTER**. Search Results displays a list of matching criteria.
- 5. Click line of teacher name. Line highlights.
- 6. Click again or click set. Find: Staff screen closes and the teacher name displays.
- 7. Select the subject from the Subject drop-down. If the subject needed does not appear in the drop-down list, the desired subject can be typed into the Other Subject text box.
- 8. Click the **Show Detail** button. (You may be prompted to save your changes before you can show detail.) A detailed screen displays on the right.
- 9. Select only that which is applicable for this student. Items not selected do not appear on the printable document.
- 10. Click <u>Save</u> before adding another **Student Evaluation Report**.
- 11. Repeat the steps above to add another **Student Evaluation Report**, if desired. Up to seven subject areas may be added.
- 12. If needed, check on the line of the **Student Evaluation Report** to remove. The row is removed.

HEALTH TAB

Vision and Hearing results for the student will import from Synergy SIS, however, existing results can be edited or new results can be added to the Health view. The data from this tab will import to GENAZ 06 – MET Report/Existing Data Tab.

$\nabla \mathbf{F}$	Refe	rral										(et
Stud	ent Na	me: Aar	on, lan D	ocument: GENAZ (1 Desa	ription: Referr	al					
Rea	son for	Referral	Intervention	s Attendance H	istory	Cultural Fact	ors	Standardized	Testing	Student Performance	Health	
Docu	ment I	Name									Document Date	
Refe	rral											7
Med	lical											<u></u>
Visi	on Res	ults									Add	Show Detail
									Res	ults		
$ \times $	Line	Scree	en Date	\$		Without Glas	sses				With Glasses	
				Right Eye	\	Left Eye	₽	Both Eye	s 🍦	Right Eye 🌲	Left Eye 🍦	Both Eyes 🏼 🄤
	1	01/30/20	12 🗗	20/20	≥ 2	20/20	*	20/20	*	*	*	*
Con	ments	s 🕎 🥥										
Hee	ring De	oulto							***			
nea V	ппу ке	suits	Sereen Dat			Di	aht Do	oult			Loft Docult	A00
Ê	1	02/25/20	13 III		2	KI	упт ке	v v		P	v	
											1	
	iments	s 💽 🔍							Re	efresh from Health Screen]	
									41			
Hea	Ith Issi	ues 🕎 🤇							_			
									.4			
Med	lication	ns 🕎 🥥										
									.4			

Figure 3-8 Referral Screen Health Tab

- 1. Click the Add button on the Vision Results bar to add a vision record.
- 2. Enter a Screen Date (MMDDYY) or click P and select date.
- 3. Enter the results by clicking the drop-downs across the row and selecting the appropriate scores for each result.
- Enter any Comments that might be appropriate about the vision screening, such as: Student has a prescription for eye glasses but does not wear them or has lost them. Use
 to spellcheck. Use I for more space.
- 5. If needed, check a on the line of the **Vision** record to remove. The row is removed.
- 6. Repeat the above instructions to add a Hearing Results record.
- 7. Enter any appropriate **Heath Issues** and **Medications** in the textboxes provided. The Heath Issues and Medications textboxes are for the Referral information, only, and do not import into any other Synergy SE document.
- 8. Click Save

The document can be printed, validated and finalized.

GENAZ 02 – NOTICE OF REFERRAL

The Notice of Referral is located in the Initial and Reevaluation Process.



Note: The Notice of Referral has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Referral contains one tab:

• Prior Written Notice

Prior Written N	otice	
Student Name: Akins, Sha	NR E. Document: GENAZ 02 Description: Notice of Referral	
Prior Written Notice		
Document Name		Document Date
Notice of Referral		
Description of Actions Prope	used or Refused	(
DESCRIPTION OF ACTION	IS PROPOSED OR REFUSED BY THE DISTRICT: Ident	ification
The evaluation team has re	ceived a referral for a possible comprehensive evaluation	of your child.
Statements		(
Explanation of why the dist ♥	rict proposes or refuses to take the action:	
		al
Description of each evaluat 알	on procedure, assessment, record or report used as a b	asis for the proposed or refused action:
		h.
Description of other options 	considered and why those options were rejected:	
E -		
Description of the factors r	elevant to the actions proposed or refused are:	
1900 B		
		.a
Implementation of Decision		(
This decision is proposed to	o be implemented on	
Parents of a student and th school psychologist or call Procedural Safeguards pro	e student have protection under procedural safeguards in a the Special Education office if you want a copy of the provided to parent(s)	accordance with Federal Law. Contact the cedural safeguards.
This document was grapped	(initials)	
Admin User	u vy.	
Case Manager	Case Manager Phone	
	×	

Figure 3-9 Notice of Referral Screen

To create a Notice of Referral document:

1. Enter the Document Date (MMDDYY) or click and select date. This should reflect the date the document was created.

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

Explanation of why the district p	roposes or refuses to take the action:	
×		
Educational Disability Suspected		<u> </u>
4		-1
ļ		

Figure 3-10 Notice of Referral Screen Statements Section Drop-down

- 2. Click on the drop-down box located above the textbox.
- 3. Select the desired key-word stem in the drop-down list.

Explanation of why the district proposes or refuses to take the action:	
▼	
suspects that Harry may have an educational disability.	
	-

Figure 3-11 Notice of Referral Screen Statements Section Populated

- 5. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 6. Enter user (initials) to signify that Procedural Safeguards were provided to parent.
- 7. Click next to **This document was prepared by:.** The Find: Staff screen displays.
- 8. Enter all or part of staff Last Name, First Name.
- 9. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 10. Click line of staff name. Line highlights.

Find Close Select Clear Selection						
Find: Staff						
Find Criteria			٨			
Last Name	First Name	First Name Middle Name				
Smith	С					
Search Results						
Find Result			٩			
Line Last Name	First Name		Middle Name			
1 Smith	Christine					
2 Smith	Jk					

Figure 3-12 Find: Staff Screen

- 11. Click again or click seet. Find: Staff screen closes and staff name displays.
- 12. Click Save .

The document can be printed, validated and finalized.

GENAZ 03 – PARENT INPUT

The Parent Input is located in the Initial, Reevaluation and Preschool Process.

There are two versions of the Parent Input: K-12 and Preschool. If a student is in grade K-12, they will have the K-12 version of the Parent Input document. If a student is in grade Preschool, the additional preschool options will be available in their Parent Input document.

The K-12 version of Parent Input contains four tabs. The tabs include:

- Family Information
- Educational Information
- Medical/Development/Health Information
- Functional Information

The Preschool version of Parent Input contains an additional tab:

• Preschool

♥Parent Input			(«
Student Name: Akins, Shawn E. Document: GE	IAZ 03 Description: Parent Input		
Family Information Educational Information Medi	cal/Development/Health Information	Functional Information	
Document Name			Document Date
Parent Input			
Input Type: Use Abbreviated	l Form		
The following questions concerns your child's d information as part of the comprehensive/confid influence on your child's growth and achievement	evelopment and functioning wi ential evaluation. This will be u nt in school. Thank you for yo	thin your family. Your answers useful in understanding factors ur cooperation in completing t	will provide us with which have had an his form.
Family Information			Q
With whom does the child live (Specify: Biologi	cal parents, adoptive parents,	etc.)	
Legal Guardian			
Natural Father: F	ather's Occupation		
~			
Health Problems - Father:	Level of Education	n - Father:	
		~	
Natural Mother: N	lother's Occupation		
~			
Health Problems - Mother:	Level of Education	n - Mother:	
		*	
How many children in family household: Ages (of children:		
Please check if either of this child's natural par	ents, or immediate family mer fficultios:	mbers, have experienced any	of the following, which
Could have contributed to your child's school di	incuities.		
alcohol addiction	phological / psychiatric evalua	tion	
drug addiction	ures		
learning disabilities / problems	and or language disorder		
mental illness	nce / abuse		
mental retardation	r		
ather special education disabilities			
physical disability			
Details 🗐 🙆]	

Figure 3-13 Parent Input Screen Family Information Tab

To create a Parent Input document:

FAMILY INFORMATION TAB

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Select the **Input Type** by selecting the appropriate choice from the drop-down menu.
- The Use Abbreviated Form checkbox gives the user the option of a shorter form. By checking this option, sections under Educational Information and Medical/Development/Health Information will be hidden from view.
- 4. The Family Information section asks questions about the parents and siblings. Enter data in the With whom does the child live, Legal Guardian, Father and Mother Occupation and Father and Mother Health Problems.
- 5. The **Natural Father** and **Natural Mother** fields are drop-down boxes that display the guardians listed for this student as they appear in Synergy SIS. Select the appropriate option in the drop-down list.
- 6. Enter **How many children in family household** and the **Ages of children**. The data in this field will import to GENAZ 06 MET Report/Existing Data Tab.
- 7. Check any issues that might contribute to student difficulties. **Details** can be added in the textbox. Use [™] to spellcheck. Use [♥] for more space.

EDUCATIONAL INFORMATION TAB

The Educational Information tab contains four questions that are to be answered by the parent during the parent interview.



Figure 3-14 Parent Input Screen Educational InformationTab

Data that exists in **"What is your understanding as to why your child is being referred...?"** will import to GENAZ 06 – MET Report/Existing Data Tab. Data that exists in **"What concerns do you have about your child's education?"** will import to GENAZ 06 – MET Report/ Existing Data Tab and GENAZ 12 – IEP/PLAAFP Tab.

1. Complete the textboxes. Use 🖾 to spellcheck. Use 🛇 for more space.

MEDICAL/DEVELOPMENTAL/HEATH INFORMATION TAB



Tip: When entering, editing or viewing information in a textbox, grab in the bottom right corner, to resize the box. The box can be adjusted larger to view more of the information or smaller to provide more room on the screen.

♥Parent Input	
Student Name: Akins, Shawn E. Document: GENAZ 03 Description: Parent Input	
Family Information Educational Information Medical/Development/Health Information Functional Information	
Document Name	Document Date
Parent Input	
Prenatal/Birth/Infancy History	Q
Mother's age at child's birth:	
Did the mother visit doctor regularly during pregnancy?	
Was there any difficulty during the pregnancy?	
lf yes, please explain: 🕎 🔾	
al and a second s	
Did the mother take medication during pregnancy?	
If ves. please list: 🕎 🥥	
.4	
Did the mother receive anesthesia during delivery?	
If ves, please list: 🕎 🗅	
Did mother smoke during the pregnancy?	
Did mother use alcohol during pregnancy?	

Figure 3-15 Parent Input Screen Medical/Developmental/Heath Information Tab

The first section of the Medical/Developmental/Heath Information tab consists of Prenatal, Birth and Infancy History. The data in this section will import into GENAZ 06 – MET Report/ Existing Data Tab.

1. Answer the questions in the **Yes/No** drop-down boxes. Add additional information (if applicable) in the textboxes provided. Use 🕎 to spellcheck. Use 🌍 for more space.

The Developmental History section consists of questions regarding early development.

Developmental History			0
		*	
When did your child b	egin the following:		
Rolling over by self	Sitting without support	Crawling on hands and knees	Walking independently
Saying first words	Talking in simple 2-3 word sentences	Toilet training begun	Toilet training complete
Did your child begin ta	lking normally, then stop at some later da	te? 💌	
If yes, please explain:	19 📀		

Figure 3-16 Parent Input Screen Medical/Developmental/Heath Information Tab Dev. History

2. The first drop-down has two choices available. If the first option: **Parent indicated the following areas of developmental delays:** is selected, complete the remaining drop-downs in the section.

OR

If the second option: **Parent reports developmental milestones were within normal parameters:** is selected, the drop-downs in the section may be skipped.

The data in the Medical History section will import into GENAZ 06 – MET Report/ Existing Data Tab. The Medical History section contains a checklist of possible Medical Difficulties that the student may have experienced.

ledical History				Ģ
ledical Difficulties				
	×			
				<u>(</u>
According to the health history, student has had no serious illnesses or injuries.		Yes/No		
According to the health history, student has experienced the following difficulties		*	🕎 📀	~
1 Significant illness:	-			
				~
		~	🕎 📀	
2 Serious accident:				
				~
		~	🕎 🔇	
3 Surgery/Hospitalization:				
				X
		~	19	
4 Seizure:				
				Loom I

Figure 3-17 Parent Input Screen Medical/Developmental/Heath Information Tab Parent Input

3. The first drop-down has two choices available. If the first option: According to the health history, student has had no serious illnesses or injuries: is selected, this statement will appear in the MET Report. Continue on to answer Yes or No from any of the drop-downs that may apply.

OR

If the second option: **Parent reports developmental milestones were within normal parameters:** is selected, this statement will appear in the MET Report. Continue on to answer **Yes** or **No** from any of the drop-downs that may apply. Only items addressed with **Yes** or **No** will import to the MET Report/ Existing Data Tab and IEP/Medical Tab.

FUNCTIONAL INFORMATION TAB

The Functional Information Tab consists of a checklist of items that might describe the student.

Parent Input		e
Student Name: Akins, Shawn E.	Document: GENAZ 03 Description: Parent Input	
Family Information Educational Inform	ation Medica/Development/Health Information Functional Information	
Document Name		Document Date
Parent Input		17
Functional Information		Ģ
Please check the following that d	escribe your child:	
🗖 and states to family and dis	Cashe alara well with at here	
is affectionate	participates in outside activities, e.g., clubs, performing arts	
has a good self-image	has mood swings	
has a poor attention span	has a poor memory	
lies	steals	
frustrates easily	acts without thinking	
has temper tantrums	becomes angry often	
is aggressive	experiences excessive sadness	
is withdrawn	has made suicide threats	
Is there any other information abo	ut your child that you would like to share? 🕎 🥥	

Figure 3-18 Parent Input Screen Functional Information Tab

- 1. Items checked from this section as well as data entered into the textbox will import into GENAZ 06 MET Report/ Existing Data Tab.
- 2. A textbox for additional information is also available. Use 🖾 to spellcheck. Use 🛇 for more space.
- 3. Click Save .

The document can be printed, validated and finalized.

GENAZ 04 – NOTICE OF EVALUATION DECISION

The Notice of Evaluation Decision is located in the Initial Process.

The Notice of Evaluation Decision provides two options:

- **Decision to Evaluate**: If this option is selected, the document will be created and finalized and the student will remain in the Initial process.
- **Decision to NOT Evaluate:** If this option is selected, the document will be created and finalized and the student will be exited from Synergy SE. The notice and all other previously created documents will move to the student's historical documents.

(See: Documents With Unique Functionality)



Note: The Notice of Evaluation Decision has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Evaluation Decision contains one tab:

• Prior Written Notice

VPrior Written Notice	
Student Name: Abbott, Billy C. Document: GENAZ 04 Description: Notice of Evaluation Decision	
Prior Written Notice	
Document Name	Document Date
Notice of Evaluation Decision	
Decision	G
Current Decision: Evaluate Change Decision To "	Not Evaluate"
Description of Actions Proposed or Refused	G
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Evaluation	
The Multidisciplinary Evaluation Team (MET) has decided to collect additional data on your child.	
Statements	G
Explanation of why the district proposes or refuses to take the action:	
Description of each evaluation procedure, assessment, record or report used as a basis for the proposed or revealed as a basis for the proposed as a bas a basis for t	efused action:
	.15
Description of other options considered and why those options were rejected:	
×	
	a
Description of the factors relevant to the actions proposed or refused are:	
	.4
Implementation of Decision	0
This decision is proposed to be implemented on:	
Parents of a student and the student have protection under procedural safeguards in accordance with Federal school psychologist or call the Special Education office if you want a copy of the procedural safeguards.	Law. Contact the
Procedural Safeguards provided to parent(s)	
(initials)	
This document was prepared by:	
Admin User	
Case Manager Case Manager Phone	
User, Admin ¥ 481-123-4578	

Figure 3-19 Notice of Evaluation Screen

To create a Notice of Evaluation Decision document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. The Notice of Evaluation opens in Evaluate mode. To change the decision click <u>Change Decision To "Not Evaluate"</u>.Current Decision will display **Not Evaluate**.
- 3. The Current Decision can be changed back to Evaluate by clicking Change Decision To "Evaluate"

Based on the decision made above the document will display the appropriate text in the Statement fields and drop-down selections.

There are four statement areas for the explanations of action taken. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly into the textboxes.

4. Click on the drop-down box located above the textbox.

Explanation of why the district proposes or refuses to take the action:								
զիտյ 🔽								
Disability not suspected								
Adequate educational performance								

Figure 3-20 Notice of Evaluation Screen Sentence Stem Drop-down

Evolution of why the district proposes or refuses to take the action:	
a Aplanation of why the district proposes of refuses to take the action.	
19 🛇	
Information reviewed by district and parent(s) does not suggest that Harry has a suspected educational disability.	
×	

Figure 3-21 Notice of Evaluation Screen Inserted Statement

- 5. Select the desired key-word stem in the drop-down list.
- 6. The statement associated with the key-word stem selected will appear in the textbox. The statement can then be edited and spell checked if desired.
- 7. Enter the **This decision is proposed to be implemented on:** date (MMDDYY) or click and select date.
- 8. Enter (initials) to signify that the Procedural Safeguards were provided to parent.
- Click

 next to the This document was prepared by: to select the staff name. The Find: Staff screen displays.

Find Close Select Clear Selection								
Find: Staff								
Find Criteria			٨					
Last Name	First Name	Middle Name						
Smith	С							
Search Results								
Find Result			٨					
Line Last Name	First Name	N	liddle Name					
1 Smith	Christine							
2 Smith	Jk							



- 10. Enter all or part of staff Last Name, First Name.
- 11. Click **Find** or press ENTER. Search Results displays a list of matching criteria.
- 12. Click line of staff name. Line highlights.
- 13. Click again or click <u>seet</u>. Find: Staff screen closes and staff name displays.

Chapter Three

14. Click Save .

The document can be printed, validated and finalized.

If the option selected on this Notice was to *NOT* Evaluate, all previously created documents for this student will move to the Historical Documents tab and the student will be removed from your Portfolio. If the student is ever referred for another evaluation they can be pulled back into the Initial Process.

Once <u>finalized</u>, a Student Exit from Special Ed screen will display.

- 1. The **Exit Date** will default to the current date and can be changed using the Calendar Icon.
- 2. Select the **Exit Reason** from the statements available in the drop-down box and type in the **Exit Explanation**.
- 3. Click the **Exit from Special Ed** button. A **Cancel** button is available if you are not ready to exit the student, yet. If the cancel option is selected, the document will remain not finalized and in the *In Progress* state.

GENAZ 05 – PARENT PERMISSION

The Parent Permission is located in the Initial, Reevaluation and Preschool Process.

Creating a Parent Permission document will generate a cover letter as well as a request for parent permission to evaluate the student.

The Parent Permission consists of two tabs. The tabs include:

- Parent Permission
- Evaluation

VParent Permission
Student Name: Sabin, Heather R. Document: GENAZ 05 Description: Parent Permission
Parent Permission Evaluation
Document Name
Parent Permission
Document Date
Parent Permission
Dear Parent/Guardian/Adult Student:
After a review of the existing data between the school team and you, and in an attempt to best meet the individual needs of the student, and for the specific reasons stated on the attached permission form, it is recommended that the student be individually evaluated by Edupoint School District personnel.
In order to make this process of evaluation clear to you, and in accordance with State and Federal laws and regulations, information regarding (1)Procedural Safeguards, (2)evaluation components, and (3)possible evaluating instruments are included.
If you have any questions regarding this material and/or the evaluation process, please contact
at
for assistance.
Sincerely,
Special Education Department
Edupoint School District

Figure 3-23 Parent Permission Screen Parent Permission Tab

To create a Parent Permission document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

PARENT PERMISSION TAB

The Parent Permission section of the document is a cover letter that will print out as a separate page.

2. Complete the cover letter by filling in the contact name and phone number. This information will import into the Evaluation section of this document.

THE EVALUATION TAB

VParent Permission				
Student Name: Sabin, Heather R. Document: GENAZ 05 0	Description: Parent Permission			
Parent Permission Evaluation				
Document Name			Document Date	
Parent Permission				6
Evaluation				
In order to best meet the individual needs of the student,	it is recommended that the	student be individually e	valuated by Edup	oint School District personnel.
This evaluation is being proposed because: Heather			was referred b	У
Due to: 🕎 🔾		Refresh From Referral		
To determine potential eligibility or continued eligibility for	Special Education service	s, an evaluation will be c	onducted by a mu	Itidisciplinary team.
THIS EVALUATION WILL INCLUDE (see checked areas below)	t		٢	
THIS EVALUATION WILL INCLUDE (see checked areas b	elow):			
A vision/hearing screening: Screening of any visual or performance.	hearing problems that woul	d interfere with testing or	school	
Child's academic history and current educational funct of achievement in the present educational setting.	ioning: Review of your child	's prior school records an	id current level	
An educational evaluation of learning and achievemen	t: Tests to measure academ	nic skills taught in school.		
An assessment of your child's learning environment: O including physical environment and learning style.	bservations of student's inter-	eraction in the classroom	environment,	
A summary of your child's medical history and current is problem is having a significant impact on your child's s	health status: Information to chool performance.	determine if any current	or past medical	
Parent input regarding their child's health, developmen survey, interview or records from other agencies (e.g.	nt and educational history: In medical).	nformation provided by pa	arents through	
Psychological evaluation: To determine student's funct social/emotional development, functional behavior, and procedures are included.	tioning level in the areas of d/or academic achievement.	intelligence, visual-motor Formal and informal ass	coordination, essment	
Language evaluation: To determine student's proficien as well as functional communication skills. Language p	ncy levels in the areas of re- roficiency is assessed for b	eptive and expressive la lingual students.	nguage abilities	
Speech evaluation: To determine the nature and extern speech sounds, voice, and/or fluency.	nt of student's speech abilitie	es, including such skills a	s articulation of	
An assessment of your child's adaptive behavior: An a how the environment affects your child's ability to learn independently and meets standards of personal and s	ssessment of your child's in h, including adaptive behavior ocial responsibility) and cult	-school and out-of-schoo or (how your child functio ural background.	ns	
Related services evaluation: To determine eligibility for education.	r additional services require	d for student to benefit fr	om special	
Other Assessments (specify):				
<u> 퀸</u> 🍳				
		a		
This portion to be completed by Parent(s)/Guardian(s)	ill be echeduled with you to	communicate the team'	a feedings and rea	ammandations. The student's
educational placement will not change during the evaluation	on process. If you have any	questions or wish to dis	cuss the evaluation	ommendations. The student's on process,
prease can	at priorie	1		
I hereby give consent for Edupoint School District pers assessment of the student is necessary.	sonnel to conduct the evalu	ation described and I par	ticipated in the te	am decision that further
Consent for the evaluation is hereby denied.				
Please return this form to:	Phone:	Consent Received Da	te	
	1			

Figure 3-24 Parent Permission Screen Evaluation Tab

The student's name will automatically import into the name field.

The **Referring Name** and the **Reason for Referral** should automatically appear in the referred by field and the **Due to:** field. This data is pulled from the Referral document. If these fields are empty it is because the Permission to Test document was created or clicked on prior to the data being added to the Referral.

3. To import the data, click Refresh From Referral. The data from the Referral will import into the textboxes.



Caution: If any text has been manually added to the fields prior to clicking the Refresh button, the data will be over-written with the imported data.

- 4. Select the areas to be included in the student's evaluation by placing a checkmark in the box provided.
- 5. If a specific evaluation isn't available in the above list, it can be added in the text box below the list of evaluations titled **Areas to be assessed include:.**

The portion to be completed by Parent(s) Guardian(s) section will pull the contact information from the cover sheet.

- 6. The checkbox area is for the parent to consent or deny permission.
- 7. Fields are provided to enter a name and number of the person who will receive the form from the parent.
- 8. Click Save

CREATING ADDITIONAL PARENT PERMISSION DOCUMENTS

In cases where additional attempts are made to contact the parent to receive permission for evaluation, multiple Parent Permission documents may need to be created. Before an additional Parent Permission document can be created, the previous document must be finalized.

 Click on the green icon that represents the finalized Parent Permission document. The DocumentViewList view will open displaying the previously finalized Parent Permission document.



Figure 3-25 Finalized Parent Permission Icon

10. Click ______. A new Parent Permission will open.

The document can be printed, validated and finalized.

GENAZ 06 – THE MET REPORT

The MET (Multidisciplinary Evaluation Team) Report is located in the Initial, Reevaluation and Preschool Process.

REFRESH BUTTONS

The MET Report Action Bar contains three Refresh buttons, Refresh from Parent Input and Refresh from Referral located at the top of the document. Refresh Participants from Team is located in the MET Participants section.

					_
dupoint School District (2009-2010 : Show	w active and inactive)				ĺ
Menu 🔻 Save Undo Delete F	Print Preview Validate Finalize	Refresh from Parent In	put	Refresh from Referral	
✓MET					
	Figure 3-26 MET Report	Action Bar			
	MET Participants:				
	Student (grades 7-12 must	be invited):			
	Refresh Participants from 1	[eam			
	Figure 3-27 MET Screen Part	icipants Refresh			

When the **Refresh** buttons are clicked, a confirmation dialog box displays. Once confirmed,

data from specified fields in the previous document will import into the MET Report.



Figure 3-28 MET Confirm Refresh Message



Caution: If any text has been manually added to the fields prior to clicking the Refresh button, the data will be over-written with the imported data.

The Met Report contains six tabs. The tabs include:

- Cover
- Referral
- Existing Data
- Additional Data (Available based on decision made in Existing Data Tab)
- Eligibility
- Additional Information
- Attachments

COVER TAB

∀M	ET									
Studen	t Name:	. 0	Document: GENAZ 06	Description: Mu	Itidisciplina	ry Evaluation Team	(MET)			
Cover	Referral	Existing Data El	igibility Additional	nformation Att	achments					
Docum	ent Alias							Displ	ay 'DRAFT'	
MET D	late:	Student is not	eligible, Reevalua	tion is Not App	plicable: T	hree Year Reeval	uation Due Da	ate: Type	of Evaluation:	
L	1	2				G	2			
Eligibili	ity: 🕎 🥥									
Medica	al									
Vision	Results:								Ac	id Show Detail
						Re	sults			
X	Line Sc	reen Date 🔶		Without GI	asses				With Glasses	
			Right Eye	Left Eye		Both Eyes 🌐	Right Eye	-	Left Eye	Both Eyes
	1	1	~		~	*		~	*	×
Comm	nents 🕎 🥝	1								
Hearin	g Results:								·	Add
X	Line	Scre	en Date	\		Right Result		e	Left Re	sult (
	1	P				*			~	
Comm	nents 🕎 🥥	1							Refresh Erom He	with Screen
	-								- Noreal From Fr	
								.11		
MET Pa	articipants:									(
Stu	udent (grad	les 7-12 must be	invited):							
Refres	sh Participant	from Team								
Parent	t Participan	te								
Line	Parent Name		Relatio	1 Туре	Educati	onal Rights	Cor	tact Allow	ed	Participant
1										
2										
Charles D	atiologota				1					
X	ne Staff Nam	20					Role			Q
	Admin	lser		Case Carrier		~	noio			
	2 Cieey H			Speech/ angua	ane Theran	ist 🗸				
	Gibby I	<u>will</u> +		-poconcarigua	-ye meidp					
Other P	Participants			A(AL.		Add
X u	ne	Name				Job Title			R	ole

Figure 3-29 MET Report Screen Cover Tab

To create a MET Report document:

- 1. Check **Draft** to display the word "Draft" on all pages of the document in the Print Preview option. Make sure to uncheck prior to finalizing the MET report.
- 2. Enter the **MET Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 3. If Student is not eligible, Reevaluation is Not Applicable is checked, the Three Year Reevaluation Due Date field will be blocked.

Three Year Reevaluation Due Date will calculate from the MET Date by adding three years, minus one day to the next Reevaluation Due Date.

- 4. Select Type of Evaluation from the drop-down list.
- 5. Indicate area(s) of Eligibility in the textbox provided.
- 6. Click the Add button on the Vision Results bar to add a vision record.
- 7. Enter a **Screen Date** (MMDDYY) or click 🗊 and select date.
- 8. Enter the results by clicking the drop-downs across the row and selecting the appropriate scores for each result.

- Enter any **Comments** that might be appropriate about the vision screening, such as: Student has a prescription for eye glasses but does not wear them or has lost them. Use
 to spellcheck. Use I for more space.
- 10. If needed, check 🔲 on the line of the **Vision** record to remove. The row is removed.
- 11. Repeat the above instructions to add a **Hearing Results** record.
- 12. If this document was created prior to the Medical and Hearing Results being entered click Refresh From Health Screen to import the data.

MET Participants

- 1. Click Refresh Participants from Team to pull the participants from the student's current Team List. Participant changes can be made directly to this document, as well.
- Check Student to include the student's name, with a signature line, as a participant in the MET conference. If the checkbox is left blank the name will not be included as a participant.
- 3. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Sta	Staff					
X	Line	Staff Name	Role			
	1	Green, Tom	Case Carrier 💌			
	2	User, Admin ←	Teacher Specialist			

Figure 3-30 MET Report Screen Cover Tab Staff Section Change/Add

Change current staff names:

1. Click • next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select (Clear Selection		
Find: Staff			
Find Criteria			۵
Last Name	First Name	Middle Name	
Smith	С		
Search Results			
Find Result			۵
Line Last Name	First Name	Mic	idle Name
1 Smith	Christine		
2 Smith	Jk		

Figure 3-31 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click find or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click <u>seet</u>. Find: Staff screen closes and staff name displays.

6. Click the Role drop-down and select the staff role.

Staff		Orient./Mobility Specialist		
\mathbf{X}	Line	Staff Name	Role	Other
	1	Green, Tom	Case Carrier	Physical Therapist
	2	<u>User, Admin</u> ←	Teacher Specialist	P sy chologist
	3	Smith, John 🗲		Reader
				School Nurso

Figure 3-32 MET Report Screen Cover Tab Staff Section Select Role

Add staff names:

REFERRAL TAB

- 1. Click **Add** on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check 🔲 on the line of the staff name to remove. The row is removed.

The Other Participants section will allow for participant names that are not available in the Staff directory.

- 1. Click the Add on the Other Participants bar. A new row will be added.
- 2. Enter the Name and Job Title of the participant.
- 3. If needed, check is on the line of the staff name to remove. The row is removed. Use is to spellcheck. Use is for more space.

Student Name: Doo	ment: GENAZ 06 Description:	Multidisciplinary Evaluation	Team (MET)	
Cover Referral Existing Data Eligib	lity Additional Information	Attachments		
Document Alias			I	Display 'DRAFT'
Multidisciplinary Evaluation Team (MB	:T)			
Referral				
Referred By				
×				
Referred must be specific appunding	wide the coloction of our	lustion instruments and a	dross all aroas of suc	nastad disability 🕅 🔿
Referral must be specific enough to g	uide the selection of eval	uation instruments and a	udress all areas of sus	pected disability.
				.af
Specific concerns identified include t	ne following: 🐯 🥥			
	С <u>С</u> -			
				4

Figure 3-33 MET Report Screen Referral Tab

1. Type the name of the person who referred the student in the **Referred By** text box.

2. The Referral section contains a drop-down that provides four key word stems describing referring reason. Select from the drop-down to display full statement or type the reason directly into the textbox provided.



Figure 3-34 MET Report Screen Referral Tab Stem Drop-down

- 3. Enter relevant information in the **Specific concerns identified include the following** textbox.
- 4. Click Save .



Tip: When entering, editing or viewing information in a textbox, grab in the bottom right corner, to resize the box. The box can be adjusted larger to view more of the information or smaller to provide more room on the screen.

EXISTING DATA TAB

(For Preschool students proceed to Existing Data Tab - Preschool)

MET			
Student Name: Sabin, Heather R. Document: GENAZ 06 Description: Multidisciplinary Evaluation Team (MET)			
Cover Referral Existing Data Eligibility A	dditional Information Attachments		
Document Alias		[)isplay 'DRAFT'
Multidisciplinary Evaluation Team (MET)			
Review of Existing Data			(
Efforts to Educate the Student in the General O	Classroom		۵
In an effort to educate STUDENT in the regu	lar classroom, the following int	erventions have been tried: 🕎 父	
			4
×			
These intervention efforts resulted in 🕎 📀			
			н.
Attendance and Educational History			
A review of school records indicates that ST	UDENT has attended the follo	wing schools:	
			Add 🔇
🗙 Line Year 🖨 Grade 🖨 School L	ocation 🔶 Absences 🖨	Significant Information	
		**** Ø	
~			
Summary of Previous Assessments Including	g Evaluations, Medical Certifica	ation, and Information Provided by the	e Parents 🕎 🛇
Medical Certification			Add 🙆
X Line Date	Description	Certified By	
	,		
State and District Testing			<u></u>
State and District Testing Not Applicable			
Description			
y			Q
			Show Detail
Line Test Name 🖨	Test Grade 🔶	Test Date 🚔	Print Test 🛛 🖨
District Assessment	~		
2 Terra Nova	~		
3 AIMS	×		✓
4 AIMS-A	~	7	✓





Note: The Efforts to Educate and Intervention fields are OPTIONAL. If no data is entered, the headings will not appear in the printed report.

- 1. Enter intervention data in the **Efforts to Educate the Student** in the regular Classroom textbox, enter intervention data. Use 🖾 to spellcheck. Use 🛇 for more space.
- 2. In the **These Intervention efforts resulted in:** field, select from the drop-down options or type results directly in textbox.

The student's attendance history imports from the Referral document. This history will only display attendance from the current school district.

1. Significant Information can be added in the textbox. Use 🖾 to spellcheck. Use 🛇 for more space.

If additional school years need to be added:

- 2. Click the **Add** button to display a new row.
- 3. Enter the school **Year**, **Grade**, **School Location** and **Absences** in the spaces provided. **Significant Information** can also be added to this row.
- 4. If needed, check 🔲 on the line of the record to remove. The row is removed.

Assessments

5. This textbox contains a drop-down that provides key word stems. The selection will insert full text paragraphs. Select one of the key word stems.



Figure 3-36 MET Report Screen Existing Data Tab Summary of Previous Assessments

The full statement based on the keyword selection will display in the textbox.

6. Complete the blank information.



Figure 3-37 MET Report Screen Existing Data Tab Summary of Previous Assessments Statement

- 7. If the student has a current medical certification, click the **Add** button to add a row to the Medical Certification section.
- 8. Enter the **Date of Medical Certification** (MMDDYY) or click P and select date.
- 9. Fill in the **Description** and **Certified By** fields.

State and District Testing

If **State and District Testing Not Applicable** is checked and the document is saved, the testing data will be hidden from view. The following view will display:

۵

Figure 3-38 MET Report Screen Existing Data Tab State and District Testing

If **State and District Testing Not Applicable** is *NOT* checked the testing data grid will be available.

Standardized Tests cannot be removed but can be set to *not* print on the printable documents.

10. Click the checkmark (uncheck) in the **Print Test** column of the test rows that will not be used.

To add Standardized Test data:

- 11. Click the Show Detail button
- 12. Select the **Test Name** by clicking on the test name line.
- 13. Add the grade from the Test Grade drop-down.
- 14. Enter the **Test Date** (MMDDYY) or click IP and select date.
- 15. Add **Test Scores** by clicking on the **Add** button in the Test Scores group box.
- 16. If needed, check 🔲 on the line of the **Test Score** to remove. The row is removed.
- 17. Click <u>Save</u> before updating another test.
- 18. Click another **Test Name** and repeat the steps above, to update that test information, if desired.

Standardized Test			Hide Detail 🔕
Line Test Name	Test Grade Test Date		
1 District Assessment	✓		
2 Terra Nova	T (C		
3 AIMS	Test Scores		Add
4 AIMS-A	X Line Subject	Test Level	

Figure 3-39 MET Report Screen Existing Data Tab Report Test Scores

EXISTING DATA TAB (CONTINUED)

Background, Medical and Developmental Information, Including Information Provided by Parents	Q
Parent concerns pertaining to educational progress: 🕎 🥥	
h.	
Background Information 🕎 🛇	
h.	
Current Classroom Based Assessment and Performance in the General Curriculum	<u></u>
Classroom Functioning 🕎 🛇	
Additional Information Provided by Teacher(s) and Related Service Provider(s) 🕎 🥥	
A	
Impact of Educational Disadvantage and Limited English Proficiency on Progress in the General Curriculum (e.g. English L	anguage 🔾
Assessment results) Please address the following factors and describe in detail if significant: consideration of lack of learning opportunitie	es frequent school
changes, poor attendance, multiple teachers in the same year, questionable home school curriculum, inadequate ge	eneral curriculum
and/or instruction, and limited English proficiency 🕎 🛇	
h	
The determinant factor in this student's difficulty progressing in the general curriculum	
Reading Math English Proficiency	y V
Consideration of the Need for Additional Data	G
parent/guardian reviewed existing data and participated in the decision regarding the need to gather additional of parent/guardian received a copy of the referral and was requested to provide input.	iata. Trie
The team reviewing the existing data included: 🕎 🥥	
On the basis of the review of existing data and input from the student's parents, the team determined that	
Refresh From Parent Permission	

Figure 3-40 MET Report Screen Existing Data Tab Part 2

Parent Concerns and Background Information will have imported in from the Parent Input if the Refresh From Parent Input button was selected.

19. Editing may be necessary in order for sentences to flow clearly.

Background, Medical and Developmental Information, Including Information Provided by Parents
Parent concerns pertaining to educational progress: 🕎 🛇
Background Information 🕎 🛇
Parent input, including medical and developmental information and history, was provided by parent. The summary indicated that Harry presently lives with his mother. There are 2 children in the home, whose ages are 5 and 7.

Figure 3-41 MET Report Screen Existing Data Tab Background Information

Classroom Functioning will import data from the Referral document/Student Performance if Refresh from Referral button was selected.

20. If appropriate, use the **Additional information** textbox for information not included in the Referral entry.



Figure 3-42 MET Report Screen Existing Data Tab Assessment and Performance

Impact of Educational Disadvantage and Limited English Proficiency in the General Curriculum textbox is for information relevant to English Language Proficiency issues.

Impact of Educational Disadv Assessment Results)	antage and Limited English Proficiency on P	Progress in the General Curriculum (e.g. English Language
Please address the following the changes, poor attendance, mainstruction, and limited English	actors and describe in detail if significant: co ultiple teachers in the same year, questionab i proficiency 🕎 🛇	onsideration of lack of learning opportunities, frequent school ole home school curriculum, inadequate general curriculum and/c
		<u> </u>
		<u>-</u>
The determinant factor in this	student's difficulty progressing in the genera	al curriculum
Reading	Math	English Proficiency
	×	▼
Other 🕎 📀		

Figure 3-43 MET Report English Language Assessment Results

- 21. Address the statement as directed. Use 🖾 to spellcheck. Use 🛇 for more space.
- 22. Select the **determinant factor** that applies to this student using the drop-down lists provided:

Reading	Math	English Proficiency
n.	Л	ň.
d	2	
is lack of appropriate instruction in reading	is lack of appropriate instruction in math	is Limited English Proficiency
is not lack of appropriate instruction in reading	is not lack of appropriate instruction in math	is not Limited English Proficiency

Figure 3-44 MET Report Screen Existing Data Tab Determinant Factor Selection

- 23. The Other textbox is available as needed.
- 24. In **The team reviewing the existing data included:** textbox list all individuals who have reviewed existing data, including parent and staff. If records were reviewed at a Transition conference, include participants in this list.

Consideration of the Need for Additional Data	
The parent/guardian reviewed existing data and participated in the decision regarding the need to received a copy of the referral and was requested to provide input.	gather additional data. The parent/guardian
The team reviewing the existing data included: 🕎 🛇	

Figure 3-45 MET Report Screen Additional Data

25. On the basis of the review of existing data included: dropdown select whether or not additional data is necessary to determine eligibility.

On the basis of the review of existing data and input from the student's parents, the team determined that
×
No additional data were needed
Additional data were needed

Figure 3-46 MET Report Screen Additional Data Were Needed

If **No additional data were needed** is selected, the Additional Data tab will not appear. Proceed to Eligibility tab.



Figure 3-47 MET Report Screen No Additional Data Tab

If **Additional data were needed is selected**, the Additional Data tab will be necessary. See <u>Additional Data Tab</u> description which follows the <u>Existing Data Tab Preschool</u>.



Figure 3-48 MET Report Screen Additional Data Tab

26. Enter a description of the additional data needed.



Figure 3-49 MET Report Screen Additional Data MET Report Screen Additional Data Description

EXISTING DATA TAB PRESCHOOL

𝒴MET	
Student Name: Maya, Diane P. Document: GENAZ 06 Description: Multidisciplinary Evaluation Tea	ım (MET)
Cover Referral Existing Data Eligibility Additional Information Attachments	
Document Alias	Display 'DRAFT'
Multidisciplinary Evaluation Team (MET)	
Review of Existing Data	Q
19 O	
Opportunities for Interaction in Regular Preschool Program	Q
v	
	.#
×	
Summary of Previous Assessments Including Evaluations, Medical Certification, and Inform	nation Provided by the Parents 🕎 🔮
Medical Certification	Add
X Line Date 🖨 Description	Certified By

Figure 3-50 MET Report Screen Existing Data Tab Preschool Screen

1. In the **Review of Existing Data** textbox, summarize sources of previous information, including results of screening. Use 🖾 to spellcheck. Use 📀 for more space.

Opportunities for Interaction in Regular Preschool Program	
*	
cared for at home զիդ	
attends a private daycare	
hours at a daycare center	
attends Head Start program	

Figure 3-51 MET Report Screen Existing Data Tab Preschool Screen Opportunities for Interaction

2. In **Opportunities for Interaction in Regular Preschool Program**, select from the dropdown of library stem, the keywords that will insert a full text paragraphs. Edit as necessary or type description without using dropdowns.

The full statement based on the keyword selection will appear in the textbox.

Sandra is cared for at home by family members and does not attend a preschool program.

Figure 3-52 MET Report Screen Existing Data Tab Preschool Screen Library Statement

- 3. Repeat the directions for Summary of Previous Assessments Including Evaluations, Medical Certification, and Information Provided by the Parents.
- 4. If the student has a current medical certification click the **Add** button to add a row to the Medical Certification section.

.....

- 5. Enter the **Date** of Medical Certification. (MMDDYY) or click 📴 and select date.
- 6. Fill in the **Description** and **Certified By** fields.

Background, Medical and Developmental Information, Including Information Provided by Parents	(
Parent concerns pertaining to educational progress: 🕎 🛇	
	.4
Background Information 🕎 🛇	
	æ
Impact of Educational Disadvantage and Limited English Proficiency on Progress in the General Curriculum (e.g. Er Assessment Results)	iglish Language 🤇
Please address the following factors and describe in detail if significant: consideration of lack of learning oppo	ortunities, frequent
school changes, poor attendance, multiple teachers in the same year, questionable home school curriculum, curriculum and/or instruction, and limited English proficiency 🕎 🛇	inadequate general
	.4
The determinant factor in this student's difficulty progressing in the general curriculum	
Educational Opportunity English Proficiency	
× ×	
Other 🗐 🛇	
	4
	111
Consideration of the Need for Additional Data	(
The parent/guardian reviewed existing data and participated in the decision regarding the need to gather addi parent/guardian received a copy of the referral and was requested to provide input.	tional data. The
The team reviewing the existing data included: 🕎 🛇	
	.4
On the basis of the review of existing data and input from the student's parents, the team determined that	
Addl Data Desc 🕎 🛇	
Refresh From Parent Permission	

Figure 3-53 MET Report Screen Existing Data Tab Preschool ScreenPart 2

EXISTING DATA TAB PRESCHOOL (CONTINUED)

The text fields under Background, Medical and Developmental Information, Including Information Provided by Parents will have imported in from the Parent Input document if Refresh From Parent Input button was selected.

7. Editing may be necessary in order for sentences to flow clearly.

The Impact of Educational Disadvantage and Limited English Proficiency in the General **Curriculum** textbox is for information relevant to English Language Proficiency issues.

- 8. Address the statement as directed. Use 🖤 to spellcheck. Use 🛇 for more space.
- 9. Select the determinant factor that applies to this student using the drop-down lists provided:

English Proficiency	Educational Opportunity
Ĭ	1 n×
र,	n ()
is Limited English Proficiency	is lack of appropriate educational opportunity
is not Limited English Proficiency	is not lack of appropriate educational opportunity

Figure 3-54 MET Report Screen Existing Data Tab Preschool Screen Determinant Factors

10. The **Other** textbox is available as needed.

ADDITIONAL DATA TAB

∀MET				
Student Name: Armenta, Sandra Docu	ment: GENAZ 06 Description:	Multidisciplinary Evalua	tion Team (MET)	
Cover Referral Existing Data Addition	al Data Eligibility Additiona	Information Attachm	ients	
Document Alias				
Multidisciplinary Evaluation Team (MET)				
Display 'DRAFT'				
Evaluation Procedures				9
×				
Evaluation Procedures 🕎 🛇				
				.41
~				
Evaluation Procedure Summary 🕎 🔾				
				.41
Classroom Observations				0
~				
Classroom Observation 🕎 🛇				
				.4
Test Behavior				0
×				
Test Behavior 🕎 🥥				
		.11		
Assessment Results				Q
Category				
	×			
lest	~			
	Lin .			
Add Test				
Tests				Show Detail
X Line View Order	Test Short Name		Test Name	
Other Findings				٩
				111
Summary of Additional Data				(
				473

Figure 3-55 MET Report Screen Additional Data Tab

1. In **Evaluation Procedures**, select from the list in the drop-down, those evaluation procedures that were needed. The full name of the test or assessment will populate the box below. Information can be added directly in the box, as well.

Evaluation Procedures	Ability: RIAS	
×	Ability: RIST	
Evaluation Procedures	Ability: Stanford-Binet-V	
	Ability: UNIT	
	Ability: WAIS-III	
l	Ability: WISC-IV	

Figure 3-56 MET Report Screen Additional Data Tab Evaluation Procedures

2. In the Evaluation Procedure Summary textbox select from the library keyword stems.

✓	
	гу 🕎 🛇
Evaluation procedure	
Norms based on proportion	
Norms not based on proportion	v
Additional information	

Figure 3-57 MET Report Screen Additional Data Tab Evaluation Procedure Summary

3. The full statement will appear in the textbox or text can be added directly without using the drop-down list.

he MET completed a review of existing data and concluded that standardized testing was no o determine the continuing presence of a disability, the appropriateness of Harry's current rogramming, and the need for ongoing special education services, due to the sufficiency of ex ata. The information included updated medical information, the results from previous evaluati lassroom-based assessments and observations, input from the parent/legal guardian, studen eachers, as well as information from school records.	t needeo xisting ions, it, and

Figure 3-58 MET Report Screen Additional Data Tab Evaluation Procedure Summary Textbox

- 4. Repeat the directions for entering information in **Classroom Observations** and **Test Behavior.**
- 5. Tests are organized by Categories. Choose the assessment **Category** from the dropdown.
- 6. Select the **Test** from the drop-down.



Note: Districts have the ability to add and remove Categories and Tests based on individual needs and preferences.

- 7. Click Add Test. The test selected above is displayed in the grid. Multiple tests may selected by repeating the steps above.
- 8. Click the Line number of the test. The line highlights.
- 9. Click again or click Show Detail. The Test Detail opens on the right side of the screen.
- 10. A template of the test displays for input of test scores and/or a narrative of the results.
- 11. If needed, check 🧾 on the line of the test to remove. Click save.
- 12. The row is removed.

- 13. Other Findings and Summary of Additional Data are optional textboxes to allow for inclusion of information other than results of standardized testing.
- 14. Click <u>Save</u>, when finished.

∀MET	
Student Name: Sabin, Heather R. Document: GENAZ 06 Description: Mult	Itidisciplinary Evaluation Team (MET)
Cover Referral Existing Data Additional Data Eligibility Additional Infi	formation Attachments
Document Alias	Display 'DRAFT'
Multidisciplinary Evaluation Team (MET)	
Summary of Student's Performance and Progress in the General Curricu	ulum
Describe overall functioning, including strengths and weaknesses, dra student's performance in the educational setting and progress in the g	awn from all sources of data included in the report. Describe general curriculum. (This section will go to the PLAAFP on th
	ii.
Educational Needs and Recommendations to Access the General Curricu	ulum, including Assistive Technology
✓	
Describe impediments to learning and instructional techniques and su curriculum in the general education classroom and the special educat	upports needed to allow the student to access the general tion classroom. (This will go to the PLAAFP in the IEP). $ar{P}$ (
Accommodation Category	
×	
Accommodation Category Detail	
▼ Viceoniniodation outegoly betain	
Accommodation Description 🕎 🛇	
	h.
×	
Assistive Technology (A T) 🗐 🔿	
i bolatici reannology (r.t.) 🔽 🖝	
	±±.
Determination of Eligibility	
Student has an Impairment	
	~
Student's Impairment has Deputted in an Advarge Impact on Education	anal Parfarmanca
Student's impairment has Resulted in an Adverse impact on Educatio	
Student Requires Specially Designed Instruction	
Eligibility	
Disability	
Primany Disability	
Secondary Disabilities	
AUTISM DISTURBANCE	

Figure 3-59 MET Report Screen Eligibility Tab

ELIGIBILITY TAB

- 1. Address the questions under **Summary of Student's Performance and Progress in the General Curriculum.** Include the student's functional level including data sources listed. Data from this field will import into the IEP document / PLAAFP tab.
- Educational Needs and Recommendations to Access the General Curriculum / Assistive Technology contains a drop-down that provides key word stems. The selection will insert full text paragraphs. Select one of the key word stems, or enter data directly into textbox. Data from this field will import into the IEP document / PLAAFP tab.
Accommodations are organized by Category and Category Detail (specific accommodations). Accommodations input here will import into The IEP – GENAZ 12.

3. Select the accommodation category from the Accommodation Category drop-down list.

Accommodation Category
Environment
Assignments
Behavior Management
Environment
Instructional
Materials
Medicaid L
Medicaid-Aide Services
Medicaid-Nurses
Medicaid-SLA Statement
Non-Standard Alternate Accommodations
Standard Accommodations - Assessment
Figure 3-60 MET Report Screen Eligibility Tab Accommodation

4. Select the specific accommodation from **the Accommodation Category Detail** dropdown list. The accommodation will populate into the Accommodation Description textbox.

Accommodation Description 🕎 🛇	
Highlighted / altered materials	<u> </u>

Figure 3-61 MET Report Screen Eligibility Tab Accommodation Description

- 5. Add **Assistive Technology** accommodations by selecting from the drop-down list provided or typing in the textbox directly.
- Under Determination of Eligibility, select the appropriate statements for the Student has an Impairment, Student's Impairment has Resulted in an Adverse Impact on Educational Performance, Student Requires Specially Designed Instruction and Eligibility from the drop-downs.

Based on the above selections, a statement will appear on the printable MET Report.

When **No** is selected from the drop-down, the following statement will appear in the printable document:

Determination of Eligibility

The MET reached consensus that Harry exhibits no educational disability and consequently does not require special education services in order to make appropriate educational progress at this time.

When **Yes** is selected from the drop-down, the following statement will appear in the printable document:

Determination of Eligibility

The MET reached consensus that Harry exhibits the following disability: specific learning disability, autism. Eligibility was determined according to the criteria considered on the attached eligibility determination document(s).

- 7. Select the Primary Disability from the drop-down list.
- 8. Check any Secondary **Disabilities** that apply.
- 9. Click Save

Additional Information Tab

MET	
Student Name: Maya, Diane P. Document: GENAZ 06 Description: Multidisciplinary Evaluation Team (MET)	
Cover Referral Existing Data Eligibility Additional Information Attachments	
Document Alias	Display 'DRAFT'
Multidisciplinary Evaluation Team (MET)	
More Additional Information 🕎 🔾	
	.4

Figure 3-62 MET Report Screen Additional Information Tab

- 1. Enter any additional information that may be appropriate and helpful in implementing this student's IEP. Use 🕎 to spellcheck. Use 🛇 for more space.
- 2. Click Save .

The More Additional Information textbox is optional. It does not appear on printed document if left blank.

ATTACHMENTS TAB

∀MET				
Student Name:	Document: GENAZ 06 Description: Multidisciplinary Evaluation Team (MET)			
Cover Referral Existing Data	Eligibility Additional Information Attachments			
Document Alias		Display 'DRAFT'		
Multidisciplinary Evaluation Team (MET)				
Word Document Attachments Add				
X Line Pr	nt Order 🔶 Comment 🔶 Docur	nent 🔶		

Figure 3-63 MET Report Screen Attachments Tab

The Attachments tab allows for the attachment of documents to the MET Report (such as Compuscore printouts of testing, supporting documentation from service providers, etc.) Documents included here will print at the back of the MET Report as a single document, but will not have continuous page numbers or headings.

1. Click the Add button to add an attachment. A new window opens.

Attach document
Steps To Upload Image:
1) Click Browse and select the file you wish to upload
2) Click Upload
Browse
Upload
Figure 3-64 Attach Document

- 2. Click the Browse button and select the file you wish to upload.
- 3. Click Upload.



Figure 3-65 MET Report Screen Attachments Tab Attached Document

The name of the document displays in the **Comment** column. The type of document, Word or PDF, displays in the **Document** column.

4. The **Print Order** is the order the document will be printed following the MET report. This may be changed by typing in a different order.



Note: Attachments must be in Word or PDF format.

GENAZ 07 – MET MEETING REQUEST

The MET Meeting Request is located in the Initial, Reevaluation and Preschool Process.

The MET Meeting Request contains two tabs:

- Meeting Participants
- Parent Rights

✓MET Meeting Request			
Student Name: Saager, Philip T. Document: GENAZ 07 Description: MET Meeting Re	equest		
Meeting Participants Parent Rights			
Document Name		Document [Date
MET Meeting Request			7
Meeting Participants			G
Dear Parents/Guardians: Your child's comprehensive evaluation is complete. The district needs to schere discuss the data gathered in the evaluation for special education services of yor Parents are permitted to bring guests to the meeting, and are encouraged to in served by another public agency, but are requested to inform the team ahead If you would like to review the records prior to Staff Name & the meeting, please contact	dule a meeting with you. our child and to make a nvite the child's support of f time.	The purpose of the determination regard coordinator if the stu	meeting is to ding eligibility udent is
The following are invited to attend and participate in the eligibility meeting:			6
Student (grades 7 - 12 must be involved)			
Parents			G
Line Parent Name		Participant	
Saager, Arthur			
2 Saager, Melissa			
Staff			Add
X Line Staff Name	Role		ę
Case Carrier	~		
Other Specialists			Add G
X Line Name 😂		Role	ę
Name of District Representative			
Name of Individual to Interpret Instructional Implications of Evaluation Results			
We would like to schedule a meeting with you at:			
Location. Building. Room			
Meeting Date Meeting Time			
This meeting was confirmed on Contact Method This meeting	ng was confirmed by		
Comments 🕎 🛇			
If you need to change the date and/or time of the meeting, please call	.d		

Figure 3-66 MET Meeting Request Screen

MEETING PARTICIPANTS TAB

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

2. Click on - next to **Staff Name** (see above) to enter the contact name for the parent. The Find: Staff screen displays.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria			٩		
Last Name	First Name	Middle Name			
Smith	С				
Search Results					
Find Result			۵		
Line Last Name	First Name		Middle Name		
1 Smith	Christine				
2 Smith	Jk				

- Figure 3-67 Find: Staff Screen
- 3. Enter all or part of staff Last Name, First Name.
- 4. Click for press ENTER. Search Results displays a list of matching criteria.
- 5. Click line of staff name. Line highlights.
- 6. Click again or click set. Find: Staff screen closes and staff name displays.
- 7. Check The Purpose of the meeting or check Other and enter another purpose.

The purpose of the meeting:
 To discuss the data gathered in the evaluation for special education services of your child and make a determination regarding eligibility To develop an IEP To review and revise your child's IEP
Cother:

Figure 3-68 MET Meeting Request Screen Check Purpose

8. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.

Pare	Parent(s)/Guardians(s)					
Line	Parent Name	Relation Type	Educational Rights	Contact Allowed	Participant	
1	Kelly, Louise	Mother	Yes	Yes	2	
2	Wilkinson, Samuel	Step-Father	Yes	Yes		
3	Smith, Brian	Father	No	No		

Figure 3-69 MET Meeting Request Screen Parent(s)Guardian(s) Check Parent

9. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Staff		Add
X Line Staff Name	Role	
☐ 1 Green, Tom←	Case Carrier	
□ 2 <u>User. Admin</u> ←	Teacher Specialist	

Figure 3-70 MET Meeting Request Screen Staff Section Change/Add

Change current staff names:

10. Click - next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria			۵		
Last Name	First Name	Middle Name			
Smith	С				
Search Results					
Find Result			۵		
Line Last Name	First Name	e M	liddle Name		
1 Smith	Christine				
2 Smith	Jk				

Figure 3-71 Find: Staff Screen

11. Enter all or part of staff Last Name, First Name.

12. Click for press ENTER. Search Results displays a list of matching criteria.

- 13. Click line of staff name. Line highlights.
- 14. Click again or click set. Find: Staff screen closes and staff name displays.

Staff			Orient./Mobility Specialist		
$ \times $	Line	Staff Name	Role	Other	
	1	Green, Tom	Case Carrier 👻	Physical Therapist	
	2	User, Admin +	Teacher Specialist 👻	P sy chologist	
	3	Smith, John +	~	Reader	
				Calcal Numa	

Figure 3-72 MET Meeting Request Screen Staff Section Select Role

15. Click the **Role** dropdown and select the staff role.

Add staff names:

- 16. Click Add on the Staff bar. A new line is added to the grid.
- 17. Repeat the procedure above.

18. If needed, check 🔲 on the line of the **Staff Name** to remove. The row is removed.

The Other Specialists section will allow for participant names that are not available in the Staff directory.

19. Click the Add button on the Other Specialists bar. A new row will be added.

20. Enter the Name and Role of the specialist.

X Line Role I Linda Harris Social Worker	Other Specialists	
Linda Harris Social Worker	X Line Name	Role
	Linda Harris	Social Worker

Figure 3-73 MET Meeting Request Screen Other Specialists

21. If needed, check 🗖 on the line of the staff name to remove. The row is removed.

22. Enter meeting information in the textboxes provided.

We would like to schedule a meeting with you at:			
Location, Building, Room			
Hope High School, Room 302			
Meeting Date 08/26/2010	Meeting Time 3:30 PM		
This meeting was confirmed by phone on 07/21/2010	This meeting was confirmed by Sally Secretary		
Comments 🕎 🛇			
If you need to change the date and/or time	of the meeting, please call		
Sally Secretary			
at 800-555-1234			
Interpreter Needed			
Procedural Safeguards Enclosed			

Figure 3-74 MET Meeting Request Screen Information

23. Click Save

PARENT RIGHTS TAB

The Parent Rights tab is for the parent to manually update when they receive the printed hard copy of the completed Meeting Request. This area is editable and can be completed for the parent or left blank for the parent to complete.

Editable Version:



Figure 3-75 MET Meeting Request Screen Parents Rights Tab View

Printable Version (This is what the parent will see).

Parent Rights			
A parent has the Right to participate in all meetings regarding Identification, Evaluation, Placement, and Free Appropriate Education (FAPE) for their child. A parent has the Right to advance notice (approximately 10 days) for scheduled meetings on their child.			
Please check the following, if applicable:			
I do not require a 10 day advance notice for the proposed meeting.			
☑ I plan to attend this meeting.			
I do not plan to attend at the proposed time, but am requesting an alternate meeting time.			
I do not plan to participate. Please meet and inform me of the outcome.			
Phone conference is requested.			
I need a copy of the Release of Student Records form and plan to bring	to the meeting,		
whose position is			
Parent Signature: Date:			

Figure 3-76 Parents Rights Printable View

The document can be printed, validated and finalized.

CREATING ADDITIONAL MET MEETING REQUEST DOCUMENTS

In cases where additional attempts are made to schedule a MET Meeting, multiple MET Meeting Request documents may need to be created. Before an additional MET Meeting Request document can be created, the previous document must be finalized.

1. Click on the green icon that represents the finalized MET Meeting Request document. The DocumentViewList view will open displaying the previously finalized Parent Permission document.



2. Click <u>Create</u>. A new Parent Permission will open.

The document can be printed, validated and finalized.

GENAZ 08 – NOTICE OF ELIGIBILITY

The Notice of Eligibility is located in the Initial, Reevaluation and Preschool Process. The Notice of Eligibility provides several options:

- **Eligible for Placement:** If this option is selected, the document will be created and finalized and the student will remain in the Initial process.
- Not Eligible for Placement: If this option is selected, the document will be created and finalized and the student will be exited from Synergy SE. This notice and all other previously created documents will move to the student's historical documents.
- Not Eligible for One Placement, but Eligible for Another: In certain cases the student may be found not eligible for a certain special education category and eligible for another. If this option is selected, the user will be given the option during the finalizing process of this document, to determine whether to keep the student in Synergy SE.

(See: Documents With Unique Functionality)



Note: The Notice of Eligibility has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Eligibility contains one tab:

• Prior Written Notice

VPrior Written Notice	
Student Name: Saager, Philip T. Document: GENAZ 08 Description: Notice of Eligibility	
Prior Written Notice	
Document Name	Document Date
Notice of Eligibility	CP
Decision	Q
Current Decision: Eligible for Placement Change Decision To "Not Elig	ble for Placement*
Description of Actions Proposed or Refused	Ģ
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Educational Placement The Multidisciplinary Evaluation Team (MET) has found that Philip is a child with a disability as defined in th category or categories of:	e IDEA within the
	.4
Statements	0
Explanation of why the district proposes or refuses to take the action:	
Description of each evaluation procedure, assessment, record or report used as a basis for the proposed or i	refused action:
Description of other options considered and why those options were rejected:	
	.d
Description of the factors relevant to the actions proposed or refused are:	
	-
	41
Implementation of Decision	9
This decision is proposed to be implemented on:	
Parents of a student and the student have protection under procedural safeguards in accordance with Federal school psychologist or call the Special Education office if you want a copy of the procedural safeguards. Procedural Safeguards provided to parent(s)	Law. Contact the
(initials) This document was prepared by:	
Admin Liser	
Case Manager Phone	

Figure 3-78 Notice of Eligibility Screen

To create a Notice of Eligibility document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- The Notice of Eligibility opens in Eligible mode. To change the decision, click Change Decision To "Not Eligible for Placement"
 .
- 3. The Decision can be changed back to Evaluate by clicking Change Decision To "Eligible for Placement"

Based on the decision made above, the document will state that the student is or is not eligible for placement in the selected category or categories.

4. Select the category or categories from the drop-down list.

Description of Actions Proposed	or Refused			
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Educational Placement				
The Multidisciplinary Evaluation	Team (MET) has found that Harry is not a child with a disability as defined in the IDEA within the catego			
v				
Autism				
An Emotional Disability				
A Hearing Impairment				
A Mental Disability				
Multiple Disabilities	oposes or refuses to take the action:			
An Other Health Impairment				
An Orthopedic Impairment				
A Preschool Developmental Delay	am (MET) has found that Harry does not have an educational			
A Specific Learning Disability	cial Education services in the above area(s).			
A Speech Language Impairment	rocedure assessment record or report used as a basis for the proposed or refused action:			
A Traumatic Brain Injury				
A Visual Impairment				

Figure 3-79 Notice of EligibilityScreen Disability Drop-down

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

Explanation of why the district proposes or refuses to take the action:	
Student does not have disat ty	
Figure 3-80 Notice of Eligibility Screen Section Drop-down	
Explanation of why the district proposes or refuses to take the action:	
▼	

Figure 3-81 Notice of Eligibility Screen Section Populated

The Multidisciplinary Evaluation Team (MET) has found that Harry does not have an educational

disability and does not require Special Education services in the above area(s).

- 5. Click on the drop-down box located above the textbox.
- 6. Select the desired key-word stem in the drop-down list.

*

-

- 8. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 9. Enter user (initials) to signify that Procedural Safeguards were provided to parent.

Find Close Select Clear Selection				
Find: Staff				
Find Criteria			۵	
Last Name	First Name	Middle Name		
Smith	C			
Search Results				
Find Result			٢	
Line Last Name	First Name	Middle Name		
1 Smith	Christine			
2 Smith	Jk			

Figure 3-82 Find: Staff Screen

- 10. Click next to **This document was prepared by:.** The Find: Staff screen displays.
- 11. Enter all or part of staff Last Name, First Name.
- 12. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 13. Click line of staff name. Line highlights. Click again or click Sect. Find: Staff screen closes and staff name displays.
- 14. Click Save .

The document can be printed, validated and finalized.

NOTICE OF ELIGIBILITY AND INELIGIBILITY

Students who ARE eligible for placement in one or more categories but NOT eligible for another:

- 1. Create the Notice of Eligible for Placement with the decision of Eligible for Placement as directed above and proceed to finalize.
- 2. Click on the green icon that represents the finalized Notice of Eligibility document.



Figure 3-83 Notice of Eligibility Icon

The DocumentViewList screen opens displaying the previously finalized Notice of Eligibility document.

- 3. Click <u>Create</u>. A new Notice of Eligibility document opens.
- 4. Create this notice with the decision of Not Eligible for Placement as directed above.

Exit Process		
You have indicat special ed becau please type in th	ed the student is not eligit ise they are eligible for an e fields below.	ole for special ed for this disability. Is the student continuing in other disability? If you are sure you want to exit from special ed
Exit Date	Exit Reason	Exit Explanation
07/05/2012		▼
Continue in Spec	ial Ed Exit from Special	I Ed Cancel

Figure 3-84 Exit Process Screen Continue in Special Ed

- 5. Finalize the document. Upon <u>finalizing</u>, an Exit Process window will appear:
- 6. Click **Continue in Special Ed**. The student is to remain in special education since they are eligible for other disability placements.

Students who are NOT eligible for any special education services:

 Create the Notice of Eligible for Placement with the decision of Not Eligible for Placement as directed above and proceed to finalize. Upon <u>finalizing</u>, an Exit Process window will appear.

Exit Process	;		
You have in special ed b please type	dicated the stu ecause they a in the fields be	ident is not eligible fo re eligible for another elow.	r special ed for this disability. Is the student continuing in disability? If you are sure you want to exit from special e
Exit Date	Exit Rea	son 👝	Exit Explanation
07/05/2012	1	~	
Continue i	n Special Ed	Exit from Special Ed	Cancel

Figure 3-85 Exit Process Screen Exit from Special Ed

- 8. Select the Exit Reason from the available drop-down statement.
- 9. Enter the Exit Explanation.
- 10. Click **Exit from Special Ed**. The student will be exited from Synergy SE. All previously created documents will move to the student's Historical Documents tab.

GENAZ 09 – IEP MEETING REQUEST

The IEP Meeting Request is located in the Initial, Annual Review, Reevaluation, Transfer and Preschool Process.

The IEP Meeting Request contains two tabs:

- Meeting Participants
- Parent Rights

VMET Meeting Request			
Student Name: Saager, Philip T. Document: GENAZ 09 Description: IEP Meeting	Request		_
Meeting Participants Parent Rights			
Document Name		Document Date	_
MET Meeting Request			
Meeting Participants			0
D Y The following are invited to attend and participate in the meeting: Y discuss the data gathered in the evaluation for special education services of your child Parents are permitted to bring guests to the meeting, and are encouraged to invite the served by another public agency, but are requested to inform the team ahead of time. If you would like to review the records prior to Staff Name & the meeting, please contact	eeting with you. The pu and to make a determi child's support coordina	rpose of the meeting is nation regarding eligibilit ator if the student is	to ty.
The following are invited to attend and participate in the meeting:			0
Student (grades 7 - 12 must be involved)			-
Parents			0
Line Parent Name	Par	ticipant	
1 Saager, Arthur			
2 Saager, Melissa			
Staff		Add	٦
X Line Staff Name	Role		0
Case Carrier			
Other Specialists		Add	0
X Line Name	Role		٢
Name of District Representative			
Name of Individual to Interpret Instructional Implications of Evaluation Results			٦
We would like to schedule a meeting with you at:			
Location Building Room			
Location, Durining, Room			
Meeting Date Meeting Time			
This meeting was confirmed on Contact Method This meeting was o	onfirmed by		
Comments 🕎 🛇			
If you need to change the date and/or time of the meeting, please call	А		
n you need to change the date and/or time of the meeting, please call			
at			

Figure 3-86 IEP Meeting Request Screen

To create an IEP Meeting Request document:

MEETING PARTICIPANTS TAB

- 1. Enter the Document Date (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Click on next to **Staff Name** (see above) to enter the contact name for the parent. The Find: Staff screen displays.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria				٨	
Last Name	First N	Vame	Middle Name		
Smith	С				
Search Results					
Find Result				٨	
Line Last Name		First Name		Middle Name	
1 Smith		Christine			
2 Smith		Jk			
	Figure 3	3-87 Find: Staff Scr	een		

- 3. Enter all or part of staff Last Name, First Name.
- 4. Click find or press ENTER. Search Results displays a list of matching criteria.
- 5. Click line of staff name. Line highlights.
- 6. Click again or click <u>set</u>. Find: Staff screen closes and staff name displays.
- 7. Check The Purpose of the meeting or check Other and enter another purpose.

The purpose of the meeting:
 To discuss the data gathered in the evaluation for special education services of your child and make a determination regarding eligibility To develop an IEP To review and revise your child's IEP
Cother:

Figure 3-88 IEP Meeting Request Screen Check Purpose

8. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.

Pare	Parent(s)/Guardians(s)				
Line	Parent Name	Relation Type	Educational Rights	Contact Allowed	Participant
1	Kelly, Louise	Mother	Yes	Yes	
2	Wilkinson, Samuel	Step-Father	Yes	Yes	
3	Smith, Brian	Father	No	No	

Figure 3-89 IEP Meeting Request Screen Parent(s)Guardian(s) Check Parent

9. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

St	Staff Add					
×	Line Staff Name	Role				
Г	Green, Tom	Case Carrier				
	2 <u>User, Admin</u> ←	Teacher Specialist				

Figure 3-90 IEP Meeting Request Screen Meeting Request Staff Section Change/Add

Change current staff names:

10. Click • next to the Staff Name to change. The Find: Staff screen displays.

Find Close Select Clear Selection				
Find: Staff				
Find Criteria			۵	
Last Name	First Name	Middle Name		
Smith	С			
Search Results				
Find Result			۵	
Line Last Name	First Name	e M	liddle Name	
1 Smith	Christine			
2 Smith	Jk			

Figure 3-91 Find: Staff Screen

11. Enter all or part of staff Last Name, First Name.

12. Click for press ENTER. Search Results displays a list of matching criteria.

- 13. Click line of staff name. Line highlights.
- 14. Click again or click set. Find: Staff screen closes and staff name displays.

Sta	ff		Orient./Mobility Specialist		
X	Line	Staff Name	Role	Other	
	1	Green, Tom	Case Carrier 🗸 🗸	Physical Therapist	
	2	<u>User, Admin</u> ←	Teacher Specialist 👻	P §y chologist	
	3	Smith, John +	~	Reader	
		•		Calcal Numa	

Figure 3-92 IEP Meeting Request Screen Meeting Request Staff Section Select Role

15. Click the **Role** dropdown and select the staff role.

Add staff names:

- 16. Click Add on the Staff bar. A new line is added to the grid.
- 17. Repeat the procedure above.

18. If needed, check 🧾 on the line of the staff name to remove. The row is removed.

The Other Specialists section will allow for participant names that are not available in the Staff directory.

19. Click the Add button on the Other Specialists bar. A new row will be added.

20. Enter the Name and Role of the specialist.

X Line Name Rote I Linda Harris Social Worker	Other	Specialists		Add	٢
Linda Harris Social Worker	XL	ine Name	Role		
		1 Linda Harris	Social Worker		

Figure 3-93 IEP Meeting Request Screen Meeting Request Other Specialists

21. If needed, check 🗖 on the line of the staff name to remove. The row is removed.

22. Enter meeting information in the textboxes provided.

We would like to schedule a meeting with you at:					
Location, Building, Room					
Hope High School, Room 302					
Meeting Date 08/26/2010	Meeting Time 3:30 PM				
This meeting was confirmed by phone on 07/21/2010	This meeting was confirmed by Sally Secretary				
Comments 🕎 🛇					
f you need to change the date and/or time of the meeting, please call					
Sally Secretary					
at 800-555-1234					
Interpreter Needed					
Procedural Safeguards Enclosed	Procedural Safeguards Enclosed				

Figure 3-94 IEP Meeting Request Screen Information

23. Click Save

PARENT RIGHTS TAB

The Parent Rights tab is for the parent to manually update when they receive the printed hard copy of the completed Meeting Request. This area is editable and can be completed for the parent or left blank for the parent to complete.

Editable Version:



Figure 3-95 IEP Meeting Request Screen Parents Rights Tab

Printable Version (This is what the parent will see).

Parent Rights				
A parent has the Right to participate in all meetings regarding Identification, Evaluation, Placement, and Free Appropriate Education (FAPE) for their child. A parent has the Right to advance notice (approximately 10 days) for scheduled meetings on their child.				
Please check the following, if applicable:				
I do not require a 10 day advance notice for the proposed meeting.				
✓ I plan to attend this meeting.				
I do not plan to attend at the proposed time, but am requesting an alternate meeting time.				
I do not plan to participate. Please meet and inform me of the outcome.				
Phone conference is requested.				
I need a copy of the Release of Student Records form and plan to bring	to the meeting,			
whose position is				
Parent Signature: Date:				

Figure 3-96 Parents Rights Printable View

The document can be printed, validated and finalized.

CREATING ADDITIONAL MEETING REQUEST DOCUMENTS

In cases where additional attempts are made to schedule a MET Meeting, multiple MET Meeting Request documents may need to be created. Before an additional MET Meeting Request document can be created, the previous document must be finalized.

1. Click on the green icon that represents the finalized MET Meeting Request document. The DocumentViewList view will open displaying the previously finalized Parent Permission document.



Figure 3-97 Finalized Parent Permission Icon

2. Click <u>Create</u>. A new Parent Permission will open.

The document can be printed, validated and finalized.

GENAZ 10 – NOTICE OF PLACEMENT (INITIAL)

The Notice of Placement (Initial) is located in the Initial Process.



Note: The Notice of Placement (Initial) has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Placement contains one tab:

• Prior Written Notice

VPrior Written Notice	
Student Name: Akins, Shawn E. Document: GENAZ 10 Description: Notice of Placement	
Prior Written Notice	
Document Name Doc	cument Date
Notice of Placement	G
Description of Actions Proposed or Refused	9
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Identification	
The evaluation team has received a referral for a possible comprehensive evaluation of your child.	
Statements	٩
Explanation of why the district proposes or refuses to take the action:	
×	
(で))	
Description of each evaluation procedure, assessment, record or report used as a basis for the proposed or refuse	ed action:
¥	
団 0	
d	
Description of other options considered and why those options were rejected:	
×	
·····································	
Description of the factors relevant to the actions proposed or refused are:	
	-
Implementation of Decision	Q
This decision is proposed to be implemented on:	
Parents of a student and the student have protection under procedural safeguards in accordance with Federal Law.	Contact the
Deseadural Safeguarde precided to escent/a)	
(initials)	
(inuais)	
This document was prepared by:	
Admin User	
Case Manager Case Manager Phone	
v v	

Figure 3-98 Notice of Placement Screen

To create a Notice of Placement document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

Explanation of why the district proposes or refuses	to take the action:
~	
Otudant exercises Onesial	
Ed De	<u>_</u>
	*
Figure 3-99 Notice of Placement Scre	en Statements Section Drop-down
Explanation of why the district proposes or refuse	s to take the action:
~	
The IEP team found that Harry requires Special Educ	ation services in order to receive an appropriate 🛛 🔳
education.	
Figure 3-100 Notice of Placement S	creen Statements Section Populated

- 2. Click on the drop-down box located above the textbox.
- 3. Select the desired key-word stem in the drop-down list.
- The statement associated with the key-word stem selected will appear in the textbox. Use [™] to spellcheck. Use [♥] for more space.
- 5. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 6. Enter user (initials) to signify that Procedural Safeguards were provided to parent.
- 7. Click next to **This document was prepared by:.** The Find: Staff screen displays.

Find Close Select Clear Selection						
Find: Staff						
Find Criteria			۵			
Last Name	First Name	Middle Name				
Smith	С					
Search Results	Search Results					
Find Result			۵			
Line Last Name	First Name	Middle Name				
1 Smith	Christine					
2 Smith	Jk					

- Figure 3-101 Find: Staff Screen
- 8. Enter all or part of staff Last Name, First Name.
- 9. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 10. Click line of staff name. Line highlights.
- 11. Click again or click seet. Find: Staff screen closes and staff name displays.
- 12. Click Save .

The document can be printed, validated and finalized.

GENAZ 11 – NOTICE OF IEP (INITIAL)

The Notice of IEP is located in the Initial Process.



Note: The Notice of IEP (Initial) has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of IEP contains one tab:

• Prior Written Notice

Prior Written Noti	ce					
Student Name: Akins, Shawn I	E. (Document: GENAZ 11 Description: Not	ice of IEP			
Prior Written Notice						
Document Name					Document D	ate
Notice of IEP						G
Description of Actions Proposed	l or F	lefused				0
DESCRIPTION OF ACTIONS F	RO	POSED OR REFUSED BY THE	DISTRICT: Identifi	cation		
The evaluation team has receiv	red a	referral for a possible comprehe	ensive evaluation of	f your child.		
Statements						٩
Explanation of why the district	prop	oses or refuses to take the acti	on:			
~						
1 1 1 1 1						
					- 411	
Description of each evaluation	proc	edure, assessment, record or re	port used as a bas	sis for the proposed or	r refused action	2
~						
1 O						
And a second						
					af.	
Description of other options co	nsid	ered and why those options wer	e rejected:			
~						
m a						
					_	
					at	
Description of the factors releva	ant t	o the actions proposed or refuse	ed are:			
	_					
Implementation of Decision						0
This decision is proposed to be	imp	lemented on:				
Parents of a student and the st school psychologist or call the	uder Spe	t have protection under procedu cial Education office if you want	ral safeguards in ac a copy of the proce	cordance with Federa dural safeguards.	I Law. Contact t	the
Procedural Safeguards provided	d to p	parent(s)				
	(ir	iitials)				
This document was prepared by	v:					
Admin User						
Casa Managar		Casa Managar Dhana				
Gase Manager	~	oase manager Phone				
	-					

Figure 3-102 Notice of IEP Screen

To create a Notice of IEP document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

Explanation of why the dis	trict proposes or refuses to take the action:
¥	
Requires Services	
	v

Figure 3-103 Notice of IEP Screen Statements Section Drop-down

- 2. Click on the drop-down box located above the textbox.
- 3. Select the desired key-word stem in the drop-down list.

Explanation of why the district proposes or refuses to take the action:	
×	
The IEP team has determined that Harry requires the services listed on the attached IEP.	-
	T

Figure 3-104 Notice of IEP Screen Statements Section Populated

 The statement associated with the key-word stem selected will appear in the textbox. Use [™] to spellcheck. Use
 [♥] for more space.



Tip: When entering, editing or viewing information in a textbox, grab in the bottom right corner, to resize the box. The box can be adjusted larger to view more of the information or smaller to provide more room on the screen.

- 5. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 6. Enter user (initials) to signify that Procedural Safeguards were provided to parent.
- 7. Click next to **This document was prepared by:.** The Find: Staff screen displays.

Find Close Select Clear Selection						
Find: Staff						
Find Criteria			٩			
Last Name	First Name	Middle Name				
Smith	С					
Search Results						
Find Result			۵			
Line Last Name	First Name		Middle Name			
1 Smith	Christine					
2 Smith	Jk					

Figure 3-105 Find: Staff Screen

- 8. Enter all or part of staff Last Name, First Name.
- 9. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 10. Click line of staff name. Line highlights.
- 11. Click again or click set. Find: Staff screen closes and staff name displays.
- 12. Click Save

The document can be <u>printed</u>, <u>validated</u> and <u>finalized</u>.

GENAZ 12 – IEP

The IEP is located in the Initial, Annual Review, Reevaluation and Preschool Process.

Student Name: Sabin, Heather R. Student ID: 150478 Gender: Female Birth Date: 03/29/2006 Grade: 01 IEP Status: Draft IEP Cover Medical PLAAFP Special Cons. Goals Services Supt. Aids & ESY Testing LRE Parent St. Medicaid Attachments Dates Re-evaluation Due Date IEP Date IEP Review Due Date Process Name Display 'DRAFT 09/05/2012 09/04/2013 P Initial Evaluation Imitial Evaluation	<u>о</u>
Cover Medical PLAAFP Special Cons. Goals Services Supl. Aids & ESY Testing LRE Parent St. Medicaid Attachments Dates Re-evaluation Due Date IEP Date IEP Review Due Date Process Name Display 'DRAFT 09/05/2012 09/04/2013 P Initial Evaluation Initial Evaluation	<u>о</u>
Dates IEP Date IEP Review Due Date Process Name Display 'DRAF' 09/05/2012 09/04/2013 Initial Evaluation Initial Evaluation Initial Evaluation	<u>о</u> Г
Re-evaluation Due Date IEP Date IEP Review Due Date Process Name Display 'DRAF 09/05/2012 09/04/2013 Initial Evaluation Initial Evaluation	Γ
Interpreter Needed	
Eligibility	
Primary Eligibility	
Secondary Eligibility	
AUTISM COMMUNICATION DISORDER DEAFBLINDNESS	
EMOTIONAL DISTURBANCE HEARING IMPAIRMENT INTELLECTUAL DISABILITY	
ORTHOPEDIC IMPAIRMENT	
Program Recommended	
	_
i logian Neconmended	
It'r lean Members	<u></u>
Refresh Participants from Team	
Parent Participants	6
Line Parent Name Relation Type Educational Rights Contact Allowed Consulted/Present	
Sabin, Brian Father Yes Yes	
2 Sabin, Judith Mother Yes Yes 🗹	
Staff Participants Add] 6
X Line Staff Name Role 🕀 Consulted/Present	₽
User, Admin Case Carrier	
2 Horn, Cissy Special Ed Teacher	
Other Participants Add] 6
X Line Name ⊖ Title ⊖ Role ⊖ Consulted/Present	\$

Figure 3-106 IEP Screen

(See: Documents With Unique Functionality)

The IEP contains twelve tabs. The tabs include:

- Cover
- Medical
- PLAAFP (Present Levels of Academic Achievement and Functional Performance)
- Special Cons. (Considerations)
- Goals
- Services
- Supl. Aides and ESY (Supplementary Aides and Extended School Year)
- Testing
- LRE (Least Restrictive Environment)
- Parent St. (Parent Statement Optional for Annual Review and Reeval IEP's)
- Medicaid
- Attachments

To create an IEP document:

StudentIEP					
Student Name: Sabin, Heather R. Student ID: 150478 Gender: Female Birth Date: 03/29/2006 Grade: 01 IEP Status: Draft IEP					
Cover Medical PLAAFP	Special Cons. Goals	Services Supl. Aids & ESY	Testing LRE Parent St.	Medicaid Attachments	
Dates					G
Re-evaluation Due Date	IEP Date	IEP Review Due Date	Process Name	Dis	play 'DRAFT'
	09/05/2012 🔛	09/04/2013	Initial Evaluation		
Interpreter Needed					
~					
Eligibility					G
Primary Eligibility					
		*			
Secondary Eligibility	_	_			
AUTISM	COMMUNIC	ATION DISORDER 📃 DE	AFBLINDNESS		
EMOTIONAL DISTURE	BANCE 🗌 HEARING IN	IPAIRMENT	FELLECTUAL DISABILITY		
ORTHOPEDIC IMPAIR	MENT 🗌 OTHER HEA	ITH IMPAIRMENT 🗌 SF	ECIFIC LEARNING DISAE	BILITY	
TRAUMATIC BRAIN IN	JURY VISUAL IMP.	AIRMENT			
Program Recommended					G
Program Recommended					
IEP Team Members					
Student Consulted/Present	t				
~					
Refresh Participants from Team					
Parent Participants	Deleties Tree		Contrat Allowed	Consultad/Proces	
1 Sabin Brian	Eather		Ves	Consulted/Frese	/
2 Sabin, Judith	Mother	Vas	Ves		/
X Line Staff Name		Pole	4	Consulted/Pr	esent
1User Admin +	Case Carrier			v consulted/Ph	
2 Horn Ciscut	Special Ed Toor	her v		~	
Ling Z Horn, Cissy - Special Ed Teacher					
Other Participanta					Add
X Line Here	∆ Title	A Polo		Consulted/Present	Add
		→ Role		consulted/Present	

COVER TAB

Figure 3-107 IEP Screen Cover Tab

The Reevaluation Due Date will display the date that the next Reevaluation is due for the student. This date is pulled from the most recent finalized MET Report.

 The IEP Date will display the date from the most recent IEP. This date will control the IEP Review Due Date. If desired, enter a different IEP Date (MMDDYY) or click and select date. The IEP Review Due Date is pulled from the IEP Date field. It calculates by adding one year minus one day to determine the next annual review due date.

The Process Name indicates the process the student currently resides in.

- 2. Checking **Display** "**DRAFT**" will display the word DRAFT on all pages of the IEP. Make sure to uncheck this box prior to finalizing or it will display on the finalized IEP.
- 3. A section is available for **Documentation of efforts to schedule the IEP meeting**. Click the **Add** button to create a new row.
- 4. Enter **Date** (MMDDYY) or click and select date.
- 5. Enter the **Description** of the effort into the box.
- 6. If needed, check on the line of the documentation record to remove. The row is removed.

7. Indicate if **Interpreter Needed** by selecting **Yes** or **No** from the drop-down provided. If yes is selected, a staff member with the Role of Interpreter must be added.

The Primary Eligibility field in filled in automatically from the MET Report - GENAZ 06 or the Transfer Process – GENAZ 24.

- 8. Check the Secondary Eligibilit(ies), if any.
- 9. Enter the **Program Recommended** for this student.
- 10. Click **Refresh Participants from Team** to display the participants who have been added to the student's Team List. A confirmation screen displays.
- 11. Confirm Refresh Staff by entering Yes and clicking the Continue button.

Participant changes can be made directly to this document, also.

- 1. Click **Student Consulted/Present** drop-down and select the appropriate option. Selecting either option will place the student in the Participants section of the printable document. If the field is left blank the student will not be included in the Participants list.
- 2. On the Parent Participants section, click the **Consulted/Present** drop-down and select the appropriate option. The Parent Participants section will display the Parent/Guardians for the student as they appear in Synergy SIS (or other district SIS). Selecting from the Consulted/Present dropdown will place the specific parent in the Participants section of the printable document. If the drop-down is left blank the parent will not be included in the Participants list.

The Staff Participants section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List.

Staff Names displaying will be included as either consulted or present, however changes may be made including additional staff names added.

- 1. If the staff members **Role** is different for this IEP meeting, click the drop-down and make the appropriate selection.
- Click the **Consulted/Present** drop-down and select the appropriate option, for each staff participant. If the field is left blank, the staff member will not appear in the Participant Section of the Printable IEP.

Change current staff participant names:

Staff Participants Add					
X Line Staff Name	Role	😂 Consulted/Present 🔶			
Careen, Ton	Case Carrier	✓			
2 User, Admin (+	Special Ed Teacher 🛛 👻	×			

Figure 3-108 IEP Screen Cover Tab Staff Section Change/Add

3. Click - next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection						
Find: Staff						
Find Criteria						
Last Name	First Name	Middle Name				
Smith	С					
Search Results						
Find Result			۵			
Line Last Name	First Name	n.	Middle Name			
1 Smith	Christine					
2 Smith	Jk					

- 4. Enter all or part of staff Last Name, First Name.
- 5. Click **Find** or press ENTER. Search Results displays a list of matching criteria.
- 6. Click line of staff name. Line highlights.
- 7. Click again or click <u>set</u>. Find: Staff screen closes and staff name displays.
- 8. Click the **Role** dropdown and select the staff role.

Add staff names:

- 1. Click Add on the Staff Participants bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check a on the line of the **Staff Name** to remove. The row is removed.

The Other Participants section will allow for participant names that are not available in the Staff directory.

- 4. Click the **Add** button on the Other Participants bar. A new row will be added.
- 5. Enter the Name, Title and Role of the participant.
- 6. Click the **Consulted/Present** drop-down and select the appropriate option, for each participant.
- 7. Click Save



Note: Staff roles of District Representative and Individual to Interpret Results are required fields. The IEP will display a validation error when finalizing if Staff Participants have not been added with those roles.

MEDICAL TAB

The Medical Tab will display information from the most recent finalized IEP, or if this is a new referral, it will have imported the medical data from the Parent Input / Pertinent Medical Information.

∀StudentIEP							
Student Name: Sabin, Heather R. Student ID: 150478 Gender: Female Birth Date: 03/29/2006 Grade: 01 IEP Status: Draft IEP							
Cover Medical PLAAFP Special Cons. Goals	Services S	Supl. Aids & ESY	Testing I	LRE Parent St	. Medicaid	Attachments	
Refresh from Parent Input							
							9
Line	Yes/No	Description					
1 Significant illness:		~					
2 Serious accident:		~					
		1					
3 Surgery/Hospitalization:							
~							
Health Issues 🗐 🔾							
					.4		
Additional medical information is on file in the pu	roo'o offico an	d in the teache	do filo				
Additional medical mormation is on me in the hu	ises once an	u in the teache	a s me.	•			
Daily medication							
Procedure PRN (as needed)							

Figure 3-110 IEP Screen Medical Tab

- 1. To import the most recent data from the Parent Input, click Refresh from Parent Input. A confirmation screen displays.
- 2. Confirm Refresh Medical Information by entering **YES** and clicking the **Continue** button.

If there is no Parent Input document created or if this is an Annual Review IEP the button will not be available.

Refresh Pertinent Medical Information
You are about to refresh data from Parent Input. Fields "Pertinent Medical Information" will be updated. You will not be able to undo this action once it is complete. If you are sure you want to make this refresh, type the word YES in the space provided below, and then click the Continue button below.
Confirm Refresh Medical Information
Continue Cancel

Figure 3-111 IEP Screen Medical Tab Refresh Confirmation



Caution: If any text has been manually added to the fields prior to clicking the Refresh button, the data will be over-written with the imported data.

Changes can be made directly to this section. (This will not affect the data currently in the Parent Input or MET Report).

- 3. Select from the Yes/No dropdowns.



Note: Individual school districts can make the decision to hide the Medical List Items or have only items marked Yes/No appear on the printable IEP. Check with your district's System Administrator for more information on how you district has set up the Medical section.

- 5. Select **Health Issues** from the drop-down list of key words provided. Data can also be typed directly into the Health Issues textbox.
- 6. Select the desired key-word stem in the drop-down list.
- 7. The statement associated with the key-word stem selected displays in the textbox. Use Selected displays in the textbox. Use

	V-P Shunt		
Haalth Jacuas 🗐 🙆	Catheter Care		
rieaun issues 🖌 🗸	Suctioning		_
	G-tube Feeding		
	Medication Administration		
	Respiratory Management		af .
Additional medical informat	Urinary Management	e teacher's file	
	Nutrition Management		
Daily medication	Bowel Management		
Procedure PRN (as nee	Behavioral and Family Support		

Figure 3-112 IEP Screen Medical Tab Health Issues

- 8. Data can also be typed directly into the Health Issues textbox.
- 9. Indicate if Additional Medical Information is on file in the nurse's office and in the teacher's file.
- 10. Indicate if **Daily medication** or **Procedure PRN (as needed)** is necessary for this student by clicking in the checkboxes.
- 11. Click Save

Daily Medication and Procedures PRN are Medicaid billable items. If either is selected, those items will be placed on the CONSENT TO CLAIM MEDICAID REIMBURSEMENT page which will print as part of the IEP document.

PLAAFP TAB

(Present Levels of Academic Achievement and Functional Performance)

∀StudentIEP			
Student Name: Sabin, Heather R. Student II	D: 150478 Gender: Female Birth D	ate: 03/29/2006 Grade: 01 IEP St	atus: Draft IEP
Cover Medical PLAAFP Special Cons. Go	als Services Supl. Aids & ESY	Testing LRE Parent St. M	ledicaid Attachments
Include Transition in IEP			
Assessment Results including Age-Appropria	te Transition-based Assessmen	ts	
Standardized Test			Show Detail
Line Test Name 👙	Test Grade 🔶	Test Date	🖨 🛛 Print Test
1 District Assessment	×		Image: A start of the start
2 Terra Nova	×		
Refresh Tests from Referral			
Summary of Current Assessments 🕎 🥥			Refresh from MET
Please enter any current information regardin	ng the student 🕎 🕗		
			æ
·			
Summary of Present Levels of Academic Achie	evement and Functional Perform	ance	
×			
Strengths of Student (Academic, Behavioral,	, Learning Characteristics) 🕎 🤇	>	
~			
Neede as They Affect Learning 💯 🔿			
Needs as They Allect Learning 🖌 🗸			
Effect of disability on Progress in the Genera	al Curriculum and Needs of Stu	dent to Access the General Cu	urriculum 🕎 🛇
			.4
Refresh from MET			
Medicaid Service Category Medicaid	I Service Code		
×	*		
Medicaid Service 🖤 🛇			
			at
Parent Input for Enhancing Child's Education	n 🐨 📀		
1 5			
			.4
Refresh from Parent Input			
Performance in General Education			
Refresh Current Performance from Referral			
Additional Information: 🕎 🛇			

Figure 3-113 IEP Screen PLAAFP Tab Elementary

1. If the student is a Secondary student and requires Transition Services, the Transitionbased Assessment section displays on the IEP. For Elementary students not requiring Transition Services, skip to the Standardized Test section of this tab.



Note: Individual Districts can decide at what grade level to have the Transition section available in the IEP. The Synergy SE default is grades 9 – 12.

- 2. If you would like to include Transition Services for students who do not require it, check **Include Transition in IEP**.
- 3. Click Save .
- 4. Enter Assessment Results including Age-Appropriate Transition-based Assessments in the textbox provided.
- 5. Enter Measurable Postsecondary Goals for Training/Education, Employment and Independent Living Skill in the textboxes provided.

If the student has an existing IEP, there may be a Projected Course of Study added already. This section can be modified.

To add a Projected Course of Study:

- 6. Click the Add button on the Projected Course of Study bar. A new line displays.
- 7. Enter the School Year from the drop-down list.

	2011-2012		
	2012-2013		
	2013-2014		
Projected	2014-2015	Add	Show Detail
X Line	2015-2016	School Year 😂 Courses	
1	2013-2014	ton.	
	ď.		

Figure 3-114 IEP Screen PLAAFP Tab Projected Course of Study School Year

- 8. Click Save
- 9. Highlight the row by clicking on the **Line** number.
- 10. Click the Show Detail button. The detailed view displays on right.
- 11. Select the **Projected Course of Study** by selecting from the drop-down list, or type directly into the text box provided.
- 12. Add Courses by clicking on the **Add** button. A row displays.



Figure 3-115 IEP Screen PLAAFP Tab Projected Course of Study Detailed View

- 13. Type directly into the textbox to name Course.
- 14. If needed, check 🗖 on the line of the **Course** to remove. The row is removed.

Standardized Test Section (Elementary and Secondary IEPs)

The State and District Testing contains tests used by the school district. Data in this grid will import from the Referral document or changes can be made directly to this document.

- 1. If changes have been made to the Standardized Tests since the IEP has been opened, click Refresh from Referral. (If there is no Referral document created or if this is an Annual Review IEP the button will not be available.) A confirmation screen displays.
- 2. Confirm Refresh Standard Tests from Referral by entering **Yes** and clicking the **Continue** button.



Figure 3-116 IEP Screen PLAAFP Tab Refresh Confirmation

 Standardized Tests cannot be removed but can be set not to print on the printable documents. Remove the checkmark in the **Print Test** column on the test rows that will not be used.

Stan	Standardized Test Show Detail						
Line	Test Name 🌐	Test Grade 😂	Test Date 😂	Print Test 🔶			
1	District Assessment	×					
2	Terra Nova	~	7				
3	AIMS	~	P	✓			
4	AIMS-A	×		V			

Figure 3-117 IEP Screen PLAAFP Tab Standard Test Print Selection

To add Standardized Test data:

- 4. Click the line of the Test Name. The line highlights.
- 5. Click the line again or click the Show Detail button.

Standardized Test				
Line	Test Name	Test Grade Test Date		
1	District Assessment			
2	Terra Nova	Test Scores	Add	6
4	AIMS-A	X Line Subject Test Level		
		Comments 🕎 🛇		
		h.		

Figure 3-118 IEP Screen PLAAFP Tab Standard Test Detail View

- 6. Add the grade from the **Test Grade** drop-down.
- 7. Enter the **Test Dat**e (MMDDYY) or click and select date...
- 8. Add Test Scores by clicking on the Add button on the Test Scores bar.
- 9. If needed, check 🔲 on the line of the **Test Score** to remove. The row is removed.
- 10. Click Save
- 11. Repeat instructions above to update each test.

- 12. Import data for the **Summary of Current Assessments** by clicking Refresh from MET. (If there is no MET Report document created or if this is an Annual Review IEP the button will *not* be available.)
- 13. Enter any current information regarding the student's current assessments in the following textbox. Use 🕎 to spellcheck. Use 🛇 for more space.

The Summary of Present Levels of Academic Achievement and Functional Performance in General Education sections contain textboxes where descriptions and explanations are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

Summary of Present Levels	Social skills
,	Motor development
dim	Overall adaptive functioning
Strengths of Student (Adad	Overall cognitive development
	Listening comprehension and following directions
	Problem solving and reasoning skills
	Understanding question forms and formulating appropriate responses

Figure 3-119 IEP Screen PLAAFP Tab Present Levels Stem Drop-down

- 14. Click on the drop-down box located above the textbox.
- 15. Select the desired key-word stem in the drop-down list.
- 16. The statement associated with the key-word stem selected displays in the textbox. Use to spellcheck. Use for more space.



Figure 3-120 IEP Screen PLAAFP Tab Present Levels Statement Populated

OR Your screen may look like this:

Strengths of Student (Academic, Behavioral, Learning Characteristics)				haracteristics) Add	٥		
\mathbf{X}	Line	View Order 🌲		Area Considered	\triangleleft	Strengths	
	1		Math			Student has all of his multiplication facts memorzed and picks up new skills quickly.	4
Nee	dsas	They Affect Le	arning			Add	
\times	Line	View Order 🔶		Area Considered	\Rightarrow	Needs	
	1		Academic			Needs additional resources to help him be better understood in group settings.	*

Figure 3-121 IEP Screen PLAAFP Tab Present Levels Alternate View

- 17. Click the **Add** button to add a new row.
- 18. Type in the Area Considered and the Strengths of the student..
- 19. Additional rows may be added until all areas have been added.
- 20. If needed, check \square on the line of a row to remove. The row is removed.

Effect of Disability on Progress in the General Curriculum and Needs of Student to Access the General Curriculum is imported from the MET Report.

- 21. Additional data can be entered into this textbox.
- 22. If changes have been made to the MET Report since the IEP has been opened, click Refresh from MET (If there is no MET Report document created or if this is an Annual Review IEP the button will not be available.) A confirmation screen displays.



Figure 3-122 IEP Screen PLAAFP Tab Refresh Confirmation

23. Enter **YES** and click **Continue**.

(Medicaid Service times are set up and calculated in the Services tab.)

24. If any Medicaid Services are provided to the student, select from the **Medicaid Service Category** dropdown list to select a category.

Medicaid Service Category	Medicaid Service Code			
Activities of Daily Living	~			
Medicaid Service 🕎 🔇				
Harry will receive Aide assistance in th	Eating/Feeding	rooming - personal 🛛 🔺		
hygiende, combing/brushing hair, inser	Grooming	asses, or hearing aids.		
	Dressing	-		
Parent Input for Enhancing Child's E	Use of assistive devices		Refresh from Parent Input	
	Mobility		rear corr nom r or circ anpor	
	Tioleting			
	Transfers		1	
, ,	Desition			

Figure 3-123 IEP Screen PLAAFP Tab Medical Services Stem Drop-down

Based on the Category selected from the dropdown box, the applicable service code statements become available in the Service Code dropdown box.

- 25. Select the appropriate **Service Code**. A statement based on the Category and Code selected displays in the Medicaid Service textbox.
- 26. The statement can be edited directly in the textbox, if desired.

Medicaid Service Category	Medicaid Service Code					
Activities of Daily Living	Grooming					
Medicaid Service 🕎 🛇	Medicaid Service 🕎 🔇					
Harry will receive Aide assistance in the following Activities of Daily Living: Grooming - personal hygiende, combing/brushing hair, insertion and removal of contact lenses, glasses, or hearing aids.						

Figure 3-124 IEP Screen PLAAFP Tab Medical Services Statement Completed

Parent Input for Enhancing Child's Education is imported from the Parent Input document. Additional data can be entered into this textbox.

 If changes have been made to the Parent Input document since the IEP has been opened, click Refresh from Parent Input. (If there is no Parent Input document created or if this is an Annual Review IEP the button will not be available.) A confirmation screen displays.

Refresh Parent Input for Enhancing Child's Education from Parent Input 🔇				
You are about to refresh data from Parent Input. Field "Refresh Parent Input for Enhancing Child's Education" will be updated. You will not be able to undo this action once it is complete. If you are sure you want to make this refresh, type the word YES in the space provided below, and then click the Continue button below.				
Confirm Refresh Concern				
Continue Cancel				

Figure 3-125 IEP Screen PLAAFP Tab Refresh Confirmation

2. Enter Yes and click Continue.

Performance in General Education is imported in from the Referral document.

- 3. If changes have been made to the Referral document since the IEP has been opened, click Refresh Current Performance from Peferral.
- 4. To view the student's Current Performance click the **Show Detail** button.

All performance entries will be viewable as read only items. If changes are needed they will have to be made in the Referral document.

If this is an Annual Review IEP there will be no Referral document so the button will not be available.

5. An Additional Information textbox is available for summarization, if needed.

Performance in General Education	6
Refresh Current Performance from Referral	
Additional Information: 🕎 📀	
<u> </u>	

Figure 3-126 IEP Screen PLAAFP Tab Performance in General Education

- 6. Enter Progress on IEP Goals in the textbox provided.
- 7. Select if the student is making appropriate progress on IEP goals from the drop-down list.
- 8. If No is selected, enter Explanation for Lack of Progress in the textbox provided.

Explanation for Lack of Progress:	
The student is making appropriate progress on IEP Goals:	
×	
N/A	
No	
Yes	

PRESCHOOL STUDENTS



Figure 3-128 IEP Screen PLAAFP Tab Preschool

1. Select the appropriate response from the drop-down provided. The statement displays in the editable textbox.

SPECIAL CONS. TAB

(Special Considerations)

[™] StudentIEP	
Student Name: Sabin, Heather R. Student ID: 150478 Gender: Female Birth Date: 03/29/2006 Grade: 01 IEP Status: I)raft IEP
Cover Medical PLAAFP Special Cons. Goals Services Supl. Aids & ESY Testing LRE Parent St. Medic	aid Attachments
Assistive Technology	(
The team considered the student's need for Assistive Technology devices and services and determined that	
V	
	Refresh From MET
	.4
Behavioral Needs	Q
strategies, and supports to address that behavior. The team considered the student's need for positive behavio and strategies to address behaviors that impede learning of self or others and determined that	ral interventions, supports
English Language Learner	(
It has been determined that this student	
×	
	.41

Figure 3-129 IEP Screen Special Cons. Tab

If changes have been made to the MET document since the IEP has been opened, click
 Refresh from MET
 . (If the MET document has not been created or if this is an Annual Review
 IEP the button will not be available.) A confirmation screen displays.
2. Type Yes and click Continue.



Figure 3-130 IEP Screen Special Cons. Tab Confirmation Window

- 3. Select if Assistive Technology is or is not necessary from the drop-down list.
- 4. If Assistive Technology is necessary, select the Technology options from the drop-down list. The statement will populate the textbox.

Assistive Technology ele	ectronic	
The team considered the s tall	lking dictionary	tive Technology and determined that
it is necessary. 💌 tap	ipe player	
bo	ooks tape	
NC	CR	
col	omputers	Refresh From MET
co	omputer program	
typ	pewriter	

Figure 3-131 IEP Screen Special Cons. Tab Assistive Technology

5. Select if school and classroom rules **should or should not** be applied from the dropdown list.

Behavioral Needs		0	
The team considered the appropriateness of holding the student accountable to classroom, school and district discipline rules and consequences and determined that			
×			
these rules and consequences should be applied.			
these rules and consequences should not be applied.			

Figure 3-132 IEP Screen Special Cons. Tab Discipline Rules

6. Select if a Behavioral Intervention Plan **is or is not necessary**. (The BIP is available in the Ad Hoc Documents).

The team considered the student's need for positive behadetermined that	avioral interventions, supports and strategies to address behaviors that impede learning of self or others and
×	
the attached Behavioral Intervention Plan is necessary.	
these are not necessary.	

Figure 3-133 IEP Screen Special Cons. Tab Behavioral Intervention Plan Consideration

7. Select if the student is or is not an English Language Learner from the drop-down list.

English Language Learner	G
It has been determined that this student	
~	
is an English Language Learner.	
is not an English Language Learner.	
1	

Figure 3-134 IEP Screen Special Cons. Tab ELL

8. Select if Braille services are or are not needed for the student from the drop-down list.

nd/Visually Impaired	
e team considered if the student has a visual impairment that requires Braille services in order to function at a level consistent with expected achievement termined that they	and
e needed.	
e not needed.	

Figure 3-135 IEP Screen Special Cons. Tab Braille

9. Select if the communication needs **are or are not** necessary for the student from the drop-down list.

ed G			
The team considered if the student has communication needs that require educational communication in an alternate mode preferred by the student and determined that this			
v			

Figure 3-136 IEP Screen Special Cons. Tab Deaf and Hearing Impaired

10. Select if other communication services, supports and goals **are or are not** necessary for the student.

Communication		L
The team considered	t the student's needs for other communication services, supports and goals and determined that they	
~		
are necessary.	A	
are not necessary.	-	
1	-	

Figure 3-137 IEP Screen Special Cons. Tab Communication

11. Select if the student is or is not in need of related services from the drop-down list.

6

Figure 3-138 IEP Screen Special Cons. Tab Related Service

12. Click Save

GOALS TAB

Goals added to this IEP will be available in the student's Progress Report once this IEP is finalized.

- 1. Add the **Grading Periods** dates for Progress Reports. (MMDDYY) or click 🗐 and select date.
- 2. Click the Add button on the grading Periods bar. A new line displays.

Progress reports on goals will be sent home in accordance with the grading periods			
X Line Grading Period Label		Grading Period	
1 1st Grading Period		09/30/2010 🔛	
2 2nd Grading Period		11/24/2010	

Figure 3-139 IEP Screen Goals Tab Progress on Goals

- 3. Label the Grading Period as desired, (1st Grading Period, 1st Grading Quarter, etc.)
- 4. Enter the date for the **Grading Periods** (MMDDYY) or click Pand select date.
- 5. If needed, check is on the line of the **Grading Periods** record to remove. The row is removed.

ADDING GOALS

Goals can be added to the IEP in five ways:

- New Blank Goal
- Goal Library
- Personal Goal Library

✓StudentIEP		
Student Name: Sabin, Heather R. Stude	nt ID: 150478 Gender: Female Birth Date: 03/29/2006 Grade: 01 II	EP Status: Draft IEP
Cover Medical PLAAFP Special Cons	Goals Services SupLAids & ESY Testing LRF Parent St	Medicaid Attachments
Progress Report Frequency		Q
		±1.
Grading Periods		Add 🔇
🗙 Line View Order 🗧	Grading Period Label 🔤	Grading Period 🖨
	Progress Period 4	
2	Progress Period 3	
3	Progress Period 1	
4	Progress Period 2	
	· · ·	
		۵
		٥
Category Add	New Blank Goal	
Ľ		
To add a blank goal grid, click the Add N	ew Blank Goal button.	
To add a goal from the Goal Library, click	t the Add button.	
Goals		Add Show Detail
Line Category ƏDescri	otion Pre score date 🚽 Pre score	Applies to Esy
Move Category Up Move Category Down		

Figure 3-141 IEP Screen Goals Tab

- Goal Builder
- Standard Goal Library

NEW BLANK GOAL

- 1. Select the goal **Category** from the drop-down box.
- 2. Click Add New Blank Goal. A new row is now added to the Goals section.

(Category	Add New Blank Goal							
	To add a blank goal grid, click the A	Add New Blank Goal but	tton						
	To add a goal from the Goal Library	, click the Add button.							
	Goals						Add	Show Detail	
	X Line Category 🖨 Description				Pre score date	Pre score		Applies To Esy	₿
Î	1			*					
	1 Reading			~		*		÷	
H									

Figure 3-140 IEP Screen Goals Tab Add New Blank Goal

- 3. Type the goal in the **Description** textbox. Use 🕎 to spellcheck. Use 📀 for more space.
- 4. Add the **Goal Pre score date** (MMDDYY) or click 🗊 and select date.
- 5. Type the **Pre score** information.
- If this goal will apply to ESY place a check in the Applies To ESY column. By placing a checkmark in this area, the goal will then be imported into appropriate fields the ESY Progress Report and ESY Addendum – GENAZ 505.
- 7. Repeat above directions to add additional goals.
- 8. If needed, check 🔲 on the line of the **Goal** record to remove. The row is removed.
- 9. Click on the line of the goal. The line highlights.

Goals			Add	Hide Detai	I 🔇
Line Category	Description 🕎 📀	Date			
1 Reading		*			
		Pre-score			
		-			
	Add to Personal Goal Library				
	Short-Term Objectives/Benchmarks			Add	
	X Line Description		By Date 🗧	View Ord	er 🔶
		4		P	

Figure 3-142 IEP Screen Goals Tab Detail View

- 10. Click the Show Detail button. The detail view displays on the right.
- 11. Click the Add button on the Short-term Objectives/Benchmarks bar. A new line is added..
- 12. Enter the Short-Term Objectives/Benchmarks information in the **Description** textbox. Use [™] to spellcheck. Use [◇] for more space.
- 13. Insert the **By Date**, (MMDDYY) or click and select date when the student will meet the Short-Term Objective/Benchmark.
- 14. Type a number to indicate **View Order** you would like the Short-Term Objective/Benchmark to appear.
- 15. Repeat above directions to add additional Short-Terms Objectives.
- 16. If needed, check on the line of the **Short-Terms Objective** to remove. The row is removed.
- 17. Click the **Hide Detail** button to close the detailed view.

GOAL LIBRARY

														6
Ca	ate	gory		Add New B	lank Goal									
Te Te	o a	dd a dd a	i blank goal (goal from th	grid, click the Add New Blan he Goal Library, click the Ad	ik Goal butto dd button.	on.								
G	oa	ls									Add	Sho	w Detail	٨
>	<	Line	Category 🖨	Description					Pre score date	Pre score			Applies To Esy	Ş
ſ		1	Reading	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				*		ABC 📀		4.2		
	м	ove C	ategory Up	Move Category Down										

Figure 3-143 IEP Screen Goals Tab Add Goal

- 1. Click the Add button on the Goals bar. The Goal Library Search screen opens.
- 2. Click the **Category** drop-down and select.

- 3. Click the Sub Category drop-down and select.
- 4. Click the **Find** button. The goals matching the criteria selected displays.

Find	Close Assig	n Status: Ready							
Goal L	ibrary S	earch							
Goals									
Selection	Selection Criteria								
Category	S	ub Category Show from Goal Library Personal Only							
Reading 🔹 Reading - Grade 1 🔹 🗖									
Goal									
Line Categ	ory Sub Category	Goal							
1 Read	ing Reading - Grade 1	[STUDENT] will demonstrate improved knowledge of literature by identifying four organizational features of expository text when given (state conditions) scoring (state criteria) as measured quarterly (by your method of evaluation) R:01 S3 C1 PO3 Alt 1							
2 Read	ing Reading - Grade 1	[STUDENT] will demonstrate improved knowledge of literature by determining which picture/icon matches a story, heard or read, when given two pictures/icons to select from scoring (state criteria) as measured quarterly (by your method of evaluation) R:01 S2 C1 PO1 Alt 3							
3 Reading - Grade 1		[STUDENT] will demonstrate improved knowledge of literature by following a 1-step direction when given tactile symbols or pictures scoring (state criteria) as measured quarterly (by your method of evaluation) R:01 S3 C2 PO1 Alt 2							
4 Read	ing Reading - Grade 1	[STUDENT] will demonstrate improved knowledge of literature by demonstrating understanding that print materials (objects/partial objects, tactile symbols) are read left to right, with top to bottom progression, when given (state conditions) scoring (state criteria) as measured quarterly (by your method of evaluation) R:01 S3 C1 PO3 Alt 3							

Figure 3-144 IEP Screen Goals Tab Assign Goal

- 5. Click anywhere on the line of the appropriate goal. The line highlights.
- 6. Click the **Assign** button to add the selected goal to the student's IEP. A pop-up window displays containing the goal and stating that the goal has been added successfully to the IEP.
- 7. Click OK.
- 8. The Goal Library Search screen will remain open, allowing for additional goals to be added. When all goals have been added, close this window. The selected goals will populate in the IEP.
- 9. The goals are contained in editable textboxes. Edit the criteria as necessary. Use 🖾 to spellcheck. Use ◊ for more space.
- 10. Add **Pre score date** and **Pre score** in textboxes provided.
- Place a check in the Applies to ESY column checkbox, if this goal should apply to ESY. The selected goal will be imported into the ESY Progress Report and the ESY Addendum – GENAZ 505.
- 12. Click on the line of the goal. The line highlights.

Goals				Add Hide Detail 🤇
Line	Category	Description 🕎 📀	Date	
1 Reading			*	
			Pre-score	
			-	
		Add to Personal Goal Library		
		Short-Term Objectives/Benchmarks		Add 🕻
		X Line Description		By Date 😂 View Order 🗧
			×	
			T '	

Figure 3-145 IEP Screen Goals Tab Detail View

- 13. Click the Show Detail button. The detail view displays on the right.
- 14. Click the Add button on the Short-term Objectives/Benchmarks bar. A new line is added..
- 15. Enter the Short-Term Objectives/Benchmarks information in the **Description** textbox. Use ^I to spellcheck. Use ^I for more space.

- 16. Insert the **By Date**, (MMDDYY) or click and select date when the student will meet the Short-Term Objective/Benchmark.
- 17. Type a number to indicate **View Order** you would like the Short-Term Objective/Benchmark to appear.
- 18. Repeat above directions to add additional Short-Terms Objectives.
- 19. If needed, check a on the line of the **Short-Terms Objective** to remove. The row is removed.
- 20. Click the **Hide Detail** button to close the detailed view.

PERSONAL GOAL LIBRARY

Before adding a goal from your Personal Goal Library you must first add goals to your library. Goals are added to your Library after you have added commonly used goals to you IEP.

- 1. To add goals to your Personal Goal Library, open an IEP you have already completed with the desired goals:
- 2. Click on the line of the goal. The row highlights.
- 3. Click the **Show Detail** button. The detail view displays on the right.
- 4. Click Add to Personal Goal Ubrary . The Goal Personal Library window opens allowing you to edit the goal selected. State Standards and Benchmarks may be added in this section to allow for easier Goal adding.

Goals			Hide Detail 🔇
Line Category	State Standard Number		
1 Speech - Articulation			
	Description 🕎 🔕	Date	
	Henry will demonstrate improved intelligibility of speech by producing	01/22/2012	
	consonant blends to reduce the occurrence of the phonological process	Pre-score	
	and no model with a score of 80% accuracy as measured by quarterly	60%	
	Add to Personal Goal Library		
	Short-Term Objectives/Benchmarks		Add 🔇
	X Line Description	By Date	\Leftrightarrow View Order \Leftrightarrow
	₩ © 70%	03/22/2012	1

Figure 3-146 IEP Screen Goals Tab Add to Personal Goal Library

5. Click Save

Once you have added goals to your Personal Goal Library they are available for use.

- 6. Click the Add button on the Goals bar. The Goal Library Search screen opens.
- 7. Click the **Category** drop-down list and select.

Fin	d Close	Assign	Status: Ready					
Go	al Libra	ry Sea	rch					
Goa	ls							
Sele	ction Criteria		۵					
Cate	Category Sub Category Show from Goal Library Personal Only							
Spee	ech - Articulatio	r 🕶						
Goa	I		Q					
Line	Category	Sub Category	Goal					
1	Speech - Articulation		[Student] will demonstrate improved intelligibility of speech by producing consonant+vowel+consonant (CVC) combinations in simple sentences when given a stimulus statement with no model from the SLP with a score of 80% accuracy as measured by quarterly teacher created assessment. AZ Academic Standards LS-F 1,2,3.					

Figure 3-147 IEP Screen Goals Tab Goal Library Personal Only

8. Click on the Show from Goal Library Personal Only checkbox.

- 9. Click Find. The goals matching the criteria selected displays
- 10. Select the appropriate goal by highlighting the goal statement anywhere in the row.
- 11. Click Assign to add the selected goal to the student's IEP.

A pop-up window displays containing the goal stating that the goal has been added successfully to the IEP.

- 12. Click **OK.** The Goal Library Search Window will remain open allowing for additional goals to be added.
- 13. When all goals have been added, close this window. The selected goals will populate in the IEP.



Figure 3-148 IEP Screen Goals Tab Goal Added Successfully

- 14. The goals are contained in editable textboxes. Edit the criteria as necessary.
- 15. Add **Pre score date** and **Pre score** in textboxes provided.
- Place a check in the Applies to ESY column if this goal should apply to ESY. The selected goal will be imported into the ESY Progress Report and the ESY Addendum – GENAZ 505.
- 17. Click on the line of the goal. The line highlights.
- 18. Click the Show Detail button. The detail view displays on the right.
- 19. Click the Add button on the Short-term Objectives/Benchmarks bar. A new line is added..
- 20. Enter the Short-Term Objectives/Benchmarks information in the **Description** textbox. Use [™] to spellcheck. Use [◇] for more space.
- 21. Insert the **By Date**, (MMDDYY) or click and select date, of when the student will meet the Short-Term Objective/Benchmark.
- 22. Type a number to indicate **View Order** you would like the Short-Term Objective/Benchmark to appear.
- 23. Repeat above directions to add additional Short-Terms Objectives.

Goals			Add	Hide Detail 🔇
Line Category	Description 🕎 📀	Date		
1 Reading		<u>^</u>		
		Pre-score	;	
		-		
	Add to Personal Goal Library			
	Short-Term Objectives/Benchmarks			Add 🔇
	X Line Description		By Date	🔶 🛛 View Order 🈂
		× +	1	

Figure 3-149 IEP Screen Goals Tab Detailed View

- 24. If needed, check on the line of the **Short-Terms Objective** to remove. The row is removed.
- 25. Click the Hide Detail button to close the detailed view.

GOAL BUILDER

- 1. Select the goal **Category** using the available categories in the drop-down box.
- 2. Type in the **Timeframe** for the goal.
- 3. Type in the **Condition** for the goal.
- 4. Type in the **Behavior** for the goal.
- 5. Type in the **Criterion**.

Category	*	Add New Goal		Behavior (510)		Criterion 1990		_
By 6 months from now,	1	given time to practice their skills	* *	Craig's staff will be able to write measurable goals	-	to the satisfaction of District and ADE Standards 100 % of the time.	A R	

Figure 3-150 IEP Screen Goals Tab Goal Builder

6. Click the **Add New Goal** button. The goal builder automatically combines the entered information into a complete goal in the Goals Section.

Go	als					Add	Show D	etail 🔕
×	Line	Category 🖨	Description	Baseline Date 👙	Baseline		4	o Esy 🕀
		My New Area of Need	Observation of the state of		0		2	

Figure 3-151 IEP Screen Goals Tab Goal Builder Completed

- 7. Add **Baseline Date** (MMDDYY) or click 🗐 and select date.
- 8. Enter **Baseline** in the textbox provided.
- Place a check in the Applies to ESY column if this goal should apply to ESY. The selected goal will be imported into the ESY Progress Report and the ESY Addendum – GENAZ 505.
- 10. If needed, check 🔲 on the line of the **Goal** to remove. The row is removed.
- 11. Click on the line of the goal. The line highlights.

Goals			[Add	Hide Detail 🔇
Line Catego	ny Desc	scription 🅎 📀	Date		
1 Reading		A			
			Pre-score		
		-			
		Add to Personal Goal Library			
	Sho	ort-Term Objectives/Benchmarks		[Add 🔇
	×	Line Description		By Date 🗧	🗦 View Order 🌲
	-		*		

Figure 3-152 IEP Screen Goals Tab Detailed View

- 12. Click the **Show Detail** button. The detail view displays on the right.
- 13. Click the Add button on the Short-term Objectives/Benchmarks bar. A new line is added..
- 14. Enter the Short-Term Objectives/Benchmarks information in the **Description** textbox. Use [™] to spellcheck. Use [◇] for more space.
- 15. Insert the **By Date**, (MMDDYY) or click and select date, of when the student will meet the Short-Term Objective/Benchmark.
- 16. Type a number to indicate **View Order** you would like the Short-Term Objective/Benchmark to appear.
- 17. Repeat above directions to add additional Short-Terms Objectives.

- 18. If needed, check is on the line of the **Short-Terms Objective** to remove. The row is removed.
- 19. Click the Hide Detail button to close the detailed view.

STANDARD GOAL LIBRARY

Add a goal from the Star	ndard Goal Library: Select Standard	Type, Grade, and Nee	d Area and click the Ad	ld Standar	i Goal But	ton	I
Standard Type	Grade Need /	Area	Add St	andard Goal			
State Standards	💙 03 💙 Readir	g	¥				
Goals							Show Detail
X Line Category	State Standard Number	Description	Pre score date	♦	Pre score	Ş	Applies To Esy 🗧
Move Category Up	Move Category Down						

Figure 3-153 IEP Screen Goals Tab Standard Goal Library

- 1. From the **Standard Type** drop-down select the standard area for the goal.
- 2. Select the Grade level of the standard to add using the drop-down.
- 3. Select the Need Area from the drop-down.
- 4. Click the Add Standard Goal button. The Standard window will open.
- Click on ▶ next to the desired standard. The performance objectives display below and ▶ turns to ▼.



- 6. Click on the desired performance objective.
- 7. Check the goals desired in the Add column.
- 8. Click Add Goals.

View Order Code	Standard Description 🕎 📀	
1778	Compare and order positive fractions, decimals, and percents.	+
Add Goals		
Line Description	<u>[</u>	Add
[Student] will demonstrate team work skills, by c displaying conduct befitting a citizen of the class marks forschool weeks, as measured by t daily.	completing school projects on time, with integrity, while s, given a teacher directed activity, scoring pass eacher observation and a [Student] behavior check sheet,	
2 kdjfsdkfjsal;dkfj;sldkfj	1	Г
[Student] will demonstrate technological literacy (e.g. microfiche headings and numbering; head electronic media, library, interlibrary catalog dal pass marks forschool weeks, as measure sheet, daily.	r, by using organizational features of electronic information lings for accessing nested information in hypertext media, ta bases), given a teacher directed activity, scoring i d by teacher observation and a [Student] behavior check	

Figure 3-155 IEP Screen Goals Tab Add Goals

9. A pop-up message displays for each added goal letting you know that the goal(s) has/have been successfully assigned to the IEP. Click the **OK** button to close the message.

Add a	a go	al from the Sta	ndard Goal Library: Select	Standard Type, Grade, and Need Area and click the Add Standard Goal Button			۵		
Stand	Idard Type Grade Need Area Add Standard Goal								
Goal	Show Detail								
×	Line	Category 🌲	State Standard Number	Description	Pre score date 🖨		Applies To Esy 👙		
	1	Math	1778	O Adam will demonstrate team work skills, by completing school projects on time, with integrity, while displaying conduct befitting a citizen of the class, given a teacher directed activity, scoring pass marks for school weeks, as measured by teacher observation and Adam -	P				
	2	Math	1778	O Adam will demonstrate technological literacy, by using organizational features of electronic information (e.g., microfiche headings and numbering headings for accessing nested information in hypertext media, electronic media, library, interlibrary catalog data bases), given a	Ð		Г		

10. Close the **Standard** screen. The goals have now been added and are ready for editing.

Figure 3-156 IEP Screen Goals Tab Goals Added

Goals will automatically be sorted by Category. The order of categories can be changed.

11. Click the line number of a goal. The goal highlights.

Goa	als		
×	Line Category	Description	
-	1 Alternate Academic Stds - Math	Harry will demonstrate increased numerical operations when given a combination of coins and bills to determine if there is ?enough money? or ?not enough money? to make the purchase when given (state condition) scoring (state criteria) as measured quarterly by (your	•
	2 Alternate Academic Stds - Math	Harry will demonstrate increased data analysis with appropriate graphical representation by using labels, titles, and organized data provided to construct a graph scoring (state criteria) as measured quarterly (by your method of evaluation) M:9-12 S2 C1 PO2 Alt 2	4 F
-	3 Alternate Academic Stds - Math	Harry will demonstrate increased data analysis with appropriate graphical representation by using labels, titles, and organized data provided to construct a graph scoring (state criteria) as measured quarterly (by your method of evaluation) M:9-12 S2 C1 PO2 Alt 2	4
	4 Speech - Voice	Harry will demonstrate an improved awareness of vocal quality by generating a list of substitute (nonvocal) behaviors to use in given situation when given a stimulus question and situational context by the teacher with a score of () accuracy as measured by a	4
	5 Speech - Articulation	Harry will demonstrate improved intelligibility of speech by producing understandable utterances containing no more than ()% unintelligible words when given a trained listener and stimulus pictures/objects related to a structured classroom activity with a score	•

Figure 3-157 IEP Screen Goals Tab Sort

- 12. Click **Move Category Up** or **Move Category Down** to move the goal to the top or bottom of the Goals list.
- 13. Click Save .

SERVICES TAB

Services will display the type, location and duration of special education services provided to the student. If the service is a Medicaid Billable service it will calculate the service hours.

∀StudentIEP	
Student Name: Sabin, Heather R. Student ID: 150478 Gender: Female Birth Date: 03/29/2006 Grade: 01 IEP Status: Draft	IEP
Cover Medical PLAAFP Special Cons. Goals Services Supl. Aids & ESY Testing LRE Parent St. Medicaid	Attachments
Special Education Services	Add Show Detail 🔇
View Specially Provider Amount of Time Date of Note Note Location Frequency Initiation On/About Dug	ration of Service ⇔ Medicaid Hours Per ⇔ Year
Related Service	Q
The team considered the need for related services and determined that the student	
Related Services	Add Show Detail
X Line View Order Related Services Provider Role Location Amount of Time Hours Date of Frequency Unit Date of Initiation On/About Dura Services	ation of rvice Hours Per Year
×	
Services Justification 🕎 🛇	
h.	
Transportation	<u> </u>
There are no Auto-Populate entries for the specified question	
The student will receive Special Education transportation for the duration of this IEP due to the dis program site. Curb to curb transportation to address needs that are indicated in the IEP will be pro-	sability and to access the ovided.
The student will receive Special Education transportation for the duration of this IEP due to the dis program site. Adult assistance to address needs that are indicated in the IEP will be provided.	sability and to access the

Figure 3-158 IEP Screen Services Tab

- 1. Click the Add button to add a new special education service. A new row displays.
- 2. Click the **Provider Role** drop-down box and select the appropriate provider.
- 3. Click the **Location** drop-down box and select the appropriate location.
- 4. Enter the **Amount of Time** using quarter hour increments in the **Hours** textbox. (i.e., 2.25, 5.50, 3.75, etc.)
- 5. Select the correct **Frequency Unit** using the options in the frequency drop-down box.
- 6. Enter **Date of Initiation On/About** (MMDDYY) or click P and select date.
- 7. Enter **Duration of Service** (MMDDYY) or click and select date. If left blank, upon saving, the Duration of Service automatically populates the date, calculated for the next IEP (1 year minus 1 day).

5	Special Education Services											
	View 🛆		View 👝	Specially Designed Instruction	Drovidor Dolo	Logation		Amount of Time			Date of	
1	X	Line	Order 🔻	specially designed instruction 👳		Location		Hours 🔶	Frequency Unit	⊜	On/About	
I		1		Advocacy Skills 🗸 🗸	Special Ed Te 🔽	Special Ed Class	*	2.50	per week	~	07/06/2012	P
	Eigure 2 150 IED Sarran Sanitaga Tab Duration of Sanitag											

Figure 3-159 IEP Screen Services Tab Duration of Service

If the service added is Medicaid billable the Medicaid Hours Per Year will automatically calculate and be entered into the Medicaid Column.

- 8. Click line of **Specially Designed Instruction**. Line highlights.
- 9. Click again or click Show Detail. The detailed view displays on right.
- 10. Select the **Detail Description Code** using the drop-down statement box.

11. Type in the **Detail Description**. Use 🕎 to spellcheck. Use 🛇 for more space.

Special Education Services		Add Hide Detail 🔇
Line Specially Designed Instruction	Provider Role Location Hours	Frequency Unit
1 Functional Communication (SLI)	Special Ed Te 💙 Special Ed Classroom 🛛 2.50	per week 👻
	Date of Initiation On/About Duration of Service 07/06/2012 07/05/2013 Detail Description Code	
		~
	Detail Description 🐺 🥥	
		·

Figure 3-160 IEP Screen Services Tab Specifically Designed Instruction

12. Click Hide Detail to close the detailed view.

Related Services

- 13. Click the drop-down in the Related Service box and complete the statement.
- 14. If the student is not in need of Related Services, move on to the Transportation section.

F	Related Service																							
٦	The team considered the need for related services and determined that the student																							
i	is in need of related services.																							
Γ	Related Services Add Show Detail (
	×		Line		v o	iew der		Ş	1	Relate Service	i s	₽	Provider Role	₽	Location 🖨	Amo Hours 🖨	ount of Time Frequency Unit	¢	Date of Initiation On/About	¢	Duration of Service	Ş	Med	icaid Hours Per Year

Figure 3-161 IEP Screen Services Tab Related Service Statement

- 15. If the student requires Related Services, click Add on the Related Services bar.
- 16. Click the **Related Service** drop-down and select.
- 17. Click the **Provider Role** drop-down box and select.

Related Services								
X Line View ⊖ Order ⇔	Related Services 🔶	Provider Role 🖨	Location 🖨					
	~	~	*					

Figure 3-162 IEP Screen Services Tab Related Service

- 18. Click the **Location** drop-down and select.
- 19. Enter the **Amount of Time** using quarter hour increments in the **Hours** textbox. (i.e., 2.25, 5.50, 3.75, etc.)
- 20. Select the correct Frequency Unit using the options in the frequency drop-down box.
- 21. Enter **Date of Initiation On/About** (MMDDYY) or click P and select date.
- 22. Enter **Duration of Service** (MMDDYY) or click and select date. If left blank, upon saving, the Duration of Service automatically populates the date, calculated for the next IEP (1 year minus 1 day). Enter the Amount of Time using quarter hour increments in the Hours textbox. (i.e., 2.25, 5.50, 3.75, etc.)

If the related service is Medicaid billable, the Medicaid Hours Per Year will automatically populate, based upon the Amount of Time selected and the Duration of Service.

Amount of Time			Date of Initiation ≜		Duration of		Medicaid
Hours 🚔	Frequency Unit	⊜	On/About		Service		Year
0.50	per day	*	07/05/2012	P	07/04/2013	P	128.00

Figure 3-163 IEP Screen Services Tab Medicaid Hours Per Year

23. Click the **Services Justifications** drop-down and select. The statement will populate the textbox below. Custom statements may be added directly to the textbox, also.



- ading the text in the transportation section, answer **Yes** or **No** to each
- 24. After reading the text in the transportation section, answer **Yes** or **No** to each statement using the drop-downs. If **No** is selected, continue to the Services Tab. If **Yes** is selected to either statement, additional fields display.
- 25. In the second section, select Yes or No from The student requires... drop-down box.

Iransportation							
Transportation is a team decision. It is based on need not on a specific disability. NOTE: Transportation is a related service, so you must provide the justification for it in the PLAAFP. What are the student's behavioral needs or needs for specialized equipment that require transportation in a special bus? Example: 1) Mary requires a harness on the bus since she has been known to unbuckle/squirm out of her seat belt. She stands up and walks around the bus i motion. 2) John has a history of hitting other students and requires a special bus where he can be closely monitored.							
res The student will receive Special Education transportation for the duration of this IEP due to the disability and to access the program site. Curb curb transportation to address needs that are indicated in the IEP will be provided.							
No The student will receive Special Education transportation for the duration of this IEP due to the disability and to access the program site. Adult assistance to address needs that are indicated in the IEP will be provided.							
✓ The student requires medically necessary transportation to and from school and meets at least one of the following criteria:							
Student requires transportation in an adapted vehicle.							
Description 🕎 📀							
· · · · · · · · · · · · · · · · · · ·							
Student has behavioral problems and must be transported separately from non-disabled students.							
Description 🕎 📀							

Figure 3-165 IEP Screen Services Tab Transportation Section

- 26. Check if the **Student requires transportation in an adapted vehicle**. If selected, either type in a **Description** of the necessary vehicle adaptations or select the appropriate statements from drop-down box. As many adaptations may be selected as needed using the drop-down statements.
- 27. Check if the **Student has behavioral problems and must be transported separately from non-disabled students**. If selected, either type in a **Description** of the behavioral concerns or select the appropriate statements from drop-down box. As many behavioral concerns may be selected as needed using the drop-down statements.
- 28. Click Save .

These are Medicaid Billable items that, if selected, will reflect on the Consent to Claim Medicaid Reimbursement that prints with the IEP.

SUPL. AIDES AND ESY TAB

(Supplementary Aides and Extended School Year)

StudentIEP	
tudent Name: Sabin, Heather R. Student ID: 150478 Gender: Female Birth Date: 03/29/2006 Grade: 01 IEP Status: Draft	EP
Cover Medical PLAAFP Special Cons. Goals Services Supl. Aids & ESY Testing LRE Parent St. Medicaid	Attachments
Supplemental Aids and Services	G
Need for Aids and Services	
×	
Supplementary Aids and Services	Add
X Line Order 🖨 Service Description Location 🖨 Frequency/Amount of Time 🖨 Date of Initiation On/About	Duration of Service \$
Veed for Program Modifications	
	*
Program Modifications and/or Supports for School Personnel	Add (
X Line Order \ominus Service Description Location \ominus Frequency/Amount of Time \ominus Date of Initiation On/About	Duration of Service \$
Accommodations	
	~
Accommodation Category Accommodation Category Detail	
✓	~
Accommodation Description 🕎 🔇	Refresh From MET
Extended School Year	(
The team considered the need for ESY	*
Student has received ESY services in the past	
Describe the most recent services and what year(s) they were provided 🕎 🛇	
Ťt.	

Figure 3-166 IEP Screen Supl. Aides and ESY Tab

- 1. Click the **Need for Aids and Services** drop-down and select if Supplemental Aides and Services are required.
- 2. If there is a Need for Aids and Services, click Add. A new line displays on grid.
- 3. Type in the **Order** number.

1	upplementary Aids and Services			
	< Line Order \ominus Service Description	Frequency/Amount of Time	Date of Initiation On/About	Duration of Service
				P

Figure 3-167 IEP Screen Supl. Aides and ESY Tab Supplementary Aides and Services

- 4. Type in the Service Description.
- 5. Click the **Location** drop-down box and select the appropriate location.
- 6. Enter the **Amount of Time** using quarter hour increments in the **Hours** textbox. (i.e., 2.25, 5.50, 3.75, etc.)
- 7. Enter the **Frequency/Amount of Time** that is needed in the Frequency/Amount of Time textbox. (ex. 3 hours/per day).
- 8. Enter **Date of Initiation On/About** (MMDDYY) or click and select date.
- 9. Enter **Duration of Service** (MMDDYY) or click and select date. If left blank, upon saving, the Duration of Service automatically populates the date, calculated for the next IEP (1 year minus 1 day).

F	Program Modifications or Supports for School Personnel										
	ĸ		Order 🔶 Service Description	Location 🔶	Frequency/Amount of Time	Date of Initiation On/About	Duration of Service				
1	-										

Figure 3-168 IEP Screen Supl. Aides and ESY Tab Program Modifications and Supports

- 10. Click the **Need for Program Modifications** drop-down and select appropriate statement.
- 11. If there is a **Need for Program Modifications**, click **Add**. A new line displays on grid.
- 12. Type in the **Order** number.
- 13. Type in the Service Description.
- 14. Click the Location drop-down box and select the appropriate location.
- 15. Enter the **Amount of Time** using quarter hour increments in the **Hours** textbox. (i.e., 2.25, 5.50, 3.75, etc.)
- 16. Enter the **Frequency/Amount of Time** that is needed in the Frequency/Amount of Time textbox. (ex. 3 hours/per day).
- 17. Enter **Date of Initiation On/About** (MMDDYY) or click IP and select date.
- 18. Enter **Duration of Service** (MMDDYY) or click and select date. If left blank, upon saving, the Duration of Service automatically populates the date, calculated for the next IEP (1 year minus 1 day).

The Accommodations from the MET Report can be imported into this section.

- 19. Click the Refresh From MET button to import.
- 20. From the **Accommodations** drop-down list specify if accommodations are necessary for the student.

Accommodations			
	~		
No accommodations are necessary.		•	~
The following accommodations are necessary for this student to benefit from instruction in the general education classroom:			
Ψ.			

Figure 3-169 IEP Screen Supl. Aides and ESY Tab Accommodations Necessary

- 21. If **No accommodations are necessary** is selected, move down to Program Supports for School Personnel.
- 22. If The following accommodations are necessary..... is selected, click the Accommodation Category drop-down and select.
- 23. Select the specific accommodation from the **Accommodation Category Detail** dropdown list. The accommodations displays in the Accommodation Description textbox. Data can be edited.

Accommodations			
The following accommodations are necessary for this student to benefit	from instruction in the general education classroom:	~	
Accommodation Category	Accommodation Category Detail		Behavior Management
Behavior Management 🗸 🗸		~	Clearly defined limits
Accommodation Description 🕎 📀	Frequent reminder of rules		
Highlighted / altered materials			Re-direction to task
			In-school time-out
			In-class time-out

Figure 3-170 IEP Screen Supl. Aides and ESY Tab Accommodation Detail

24. Click **The Team considered the need for ESY** drop-down and select the appropriate statement from the drop-down list.

Extended School Year	
The team considered the need for ESY	×
Student has received ESY services in t	
Describe the most recent convises and	Student is Eligible for ESY services
Describe the most recent services and	Available data do not demonstrate the need for ESY services
	Additional data is required to determine need for ESY services.

Figure 3-171 IEP Screen Supl. Aides and ESY Tab ESY Consideration

25. Click Student has received ESY services in the past drop-down and select No or Yes.

Student has received ESY services in the past	×	
Describe the most recent services and what ye		provided 🅎 📀
	No	
	Yes	
		· · · · · · · · · · · · · · · · · · ·

Figure 3-172 IEP Screen Supl. Aides and ESY Tab ESY Statement

- 26. Enter a description of the most recent services. Use 🖾 to spellcheck. Use 🛇 for more space.
- 27. Click Save .

TESTING TAB

∀Stι	udent	IEP																		
Student	Name:	Sabin, H	eather F	≀. Stu	dent ID: 18	5 0478 G	iender:	Female	Birth D	ate: 03	29/200)6 Gr	ade: 01	IEP	Status: I	Draft II	EP			
Cover	Medica	I PLAAFF	Specia	al Cons.	Goals	Servio	es	Supl. Aid	is & ESY	Tes	ting	LRE	Pare	nt St.	Medica	aid	Attachm	nents		
																				<u></u>
											~									
			~																	
Test A																				
Test A	comm	V V														_				
Studen	t meets	eligibility	for alterr	late or	alternat	ive asse	essme	ent?		*										
Compl	ete and	attach the	e Alternat	te Ass	essment	t Eligibil	ity De	etermin	ation fo	rm to	the IE	P for	stude	nts b	eing co	nside	red for	AIMS-	A.	
Elemer	ntary																			۵
Distric	t Tests																		Add	6
XL	ine		Sub	ject			Ş						On Gr	ade L	evel					¢
*Note	Accomn	nodations	used in t	the stu	ident's d	aily inst	ructio	n will h	e cons	idered	by th	e tea	n for i	ise d	urina di	strict	and st	ate as	sessm	ents

Figure 3-173 IEP Screen Testing Tab

PRESCHOOL STUDENTS

No testing is required for Preschool students.

Pre School
This student is in Early Childhood Special Education. No testing is required at this age level.
Optional tests may be added below.

Figure 3-174 IEP Screen Testing Tab Pre School Statement

ELEMENTARY AND SECONDARY STUDENTS

The Testing tab opens with the **Test Accomm** textbox grayed out.

28. Click the first drop-down and select if this student will participate with or without accommodations.



Figure 3-175 IEP Screen Testing Tab Accommodations Statement

29. Click Save .

If "The student will participate....with the following accommodations" was selected, the textbox will now be editable.

30. Select the appropriate **Test Accommodation** from the drop-down list.

>	repeat directions	
Test Accomm 🕎 📀	clarify directions	
	color overlay	
	breaks	
	test time	

Figure 3-176 IEP Screen Testing Tab Test Accommodation Drop-down

31. Click Student meets eligibility on Form 1 for alternative assessments drop-down and select Yes or No.



Note: The Alternate Assessment Eligibility Criteria Form is available as a printonly document in Ad Hoc Documents.

This section displays the appropriate screen based on the student's grade level.

ELEMENTARY AND PRESCHOOL STUDENTS

1. Click the **Add** button. A new row displays.

Elementary	0				
District Tests	Add 🔕				
X Line Subject	On Grade Level				
Note Accommodations used in the student's daily instruction will be considered by the team for use during district and state assessments.					

Figure 3-177 IEP Screen Testing Tab District Tests

2. Click the Subject drop-down and select.

- 3. Click the On Grade Level drop-down and select Yes or No.
- 4. If needed, check 🔲 on the line of the **Test** record to remove. The row is removed.

SECONDARY STUDENTS

5. Check the appropriate testing statement. A textbox is available for more information to be added.



Figure 3-178 IEP Screen Testing Tab Secondary Testing Statement

LRE TAB

(Least Restrictive Environment)

StudentIEP	
Student Name: Sabin, Heather R. Student ID: 150478 Gender: Female Birth Date: 03/29/2006 Grade: 01 IEP Status: Draft IEP	
Cover Medical PLAAFP Special Cons. Goals Services Supl. Aids & ESY Testing LRE Parent St. Medicaid Attachments	
Check box of educational options selected for primary placement and write a rationale for selected option. The following options were selected:	
Elementary and Secondary	6
Rationale for LRE selection:	6
a. Progress in the general curriculum is impacted by the disability? 🕎 🔾	
.4	
Are services to be provided at the neighborhood school?	
b. Potential harmful effects of the placement: 🕎 🛇	
c. Explain to what extent the student will not participate with non-disabled peers in academic and non-academic environments 🕎 🛇	
4	

Figure 3-179 IEP Screen LRE Tab

PRESCHOOL STUDENTS

If the student is in grade Preschool, the Least Restrictive Environment can be selected for both preschool services and elementary services.

1. Select the appropriate LRE statement from the **Pre School** drop-down list.

Pre School	
	~
Home at least 360 minutes per week.	
Inside Regular Early Childhood Program 40-79% of the time.	
Inside Regular Early Childhood Program at least 80% of the time.	
Inside Regular Early Childhood Program less than 40% of the time.	
Drivate School placement, enrolled by parent/e)	

Figure 3-181 IEP Screen LRE Tab Pre School Statement Pre School Drop-down

2. Select the appropriate LRE statement from the Elementary and Secondary drop-down

Elementary and Secondary	
	~
Correctional Facilities with code A.	
Correctional Facilities with code B.	
Correctional Facilities with code C.	
Homebased/homebound/hospital program.	
Inside Regular Class 80% or more of the day	

Figure 3-180 IEP Screen LRE Tab Elementary and Secondary Statement Drop-down

list.

ELEMENTARY AND SECONDARY STUDENTS

3. Select the appropriate LRE statement from the **Elementary and Secondary** drop-down list.

Elementary and Secondary	
	~
Correctional Facilities with code A.	
Correctional Facilities with code B.	
Correctional Facilities with code C.	
Homebased/homebound/hospital program.	
Inside Regular Class 80% or more of the day	

Figure 3-182 IEP Screen LRE Tab Pre School Statement Elementary and Secondary Drop-down

4. Select the appropriate statement from the drop-down list under **Rationale for LRE selection:.** This will populate the textbox below which can be edited.

Rationale for LRF selection	dencits in math problem solving	
	deficits in math skills	
×	deficits in attention	
a. Progress in the general (deficits in classroom behavior	у? 🕎 📀
	deficits in compliance	<u>*</u>
	deficits in emotional factors	
l	deficits in following directions	

Figure 3-183 IEP Screen LRE Tab A.

- 5. Select if the services will be provided at the student home school or not using the dropdown statement box. If **No** is selected, an additional box displays asking for an explanation of why.
- 6. Select the appropriate effect from the drop-down list. This will populate the textbox below which can be edited.



Figure 3-184 IEP Screen LRE Tab B.

7. Select the extent the student will not participate from the drop-down list. This will populate the textbox below which can be edited.



8. Click Save

PARENT ST. TAB

(Parent Statement - Optional for Annual Review and Reeval IEP's)

∀ StudentIEP
Student Name: Sabin, Heather R. Student ID: 150478 Gender: Female Birth Date: 03/29/2006 Grade: 01 IEP Status: Draft IEP
Cover Medical PLAAFP Special Cons. Goals Services Supl. Aids & ESY Testing LRE Parent St. Medicaid Attachments
We understand that placement will be reviewed annually and more frequently, if necessary. We also understand we will be contacted if any
placement changes are contemplated. Placement does not guarantee success: however, mutual cooperation will result in a greater degree of
processes in this researce We research the the bary hard and the sub-control of the data and the sub-control with result of a sub-co
success in this program. We acknowledge that we have been notified and have received a copy of our due process rights pertaining to
Special Education placement and have a basic understanding of these rights, we acknowledge that we have received a copy of the
completed IEP form.
×

Figure 3-186 IEP Screen Parent St. Tab

- 9. Select the appropriate statement from the Parent Statement drop-down list.
- 10. Click Save



Note: By default the Parent Statement tab is available for the Initial and Preschool IEP's. Individual districts have the option to make this tab available for the Annual Review and Reevaluation IEP's. Check with your System Administrator for more information.

MEDICAID TAB

The Medical section provides a list of items pertaining to services provided by Health Assistants.

∀StudentIEP	
Student Name: Aaron, Ian Student ID: 129442 Gender: Male Birth Date: 04/11/2003 Grade: 04 IEP Status: Draft IEP	
Cover Medical PLAAFP Special Cons. Goals Services SupL Aids & ESY Testing LRE Medicaid Attachments	
Medicaid DSC Health Related Services	9
Complete all areas as needed	
(includes all Health Aides assisting students that have Health Related Needs stated on the IEP. One-on-one and/or ex described and listed as a Related or Supplemental Service)	tensive individualized aide services must also be thoroughly
Assistance with Personal Care/Activities of Daily Living	0
A health aide will assist with Student's ADL needs, including those listed below, for	for the duration of the IEP.
Eating/Feeding:	
v	
a di secondo	
Grooming	
Dressing:	
in the second	
Use of Assistive Devices: Reference to the need for assistive devices and type of items MUST be included in Pres	ent Level statement and/or Goals

Figure 3-187 IEP Screen Medicaid Tab

- 1. Check the appropriate boxes and enter any pertinent information in the textboxes provided. Use [™] to spellcheck. Use [♀] for more space.
- 2. Click Save

If any Personal Care/ADL Services have been added to the student's Services Tab they will reflect in this section.



Figure 3-189 IEP Screen Medical Tab Personal ADL Services Populated.

ATTACHMENTS TAB

The Attachments tab allows for the attachment of documents to the MET Report (such as Compuscore printouts of testing, supporting documentation from service providers, etc.) Documents included here will print at the back of the MET Report as a single document, but will not have continuous page numbers or headings.

ິ Stu	dentIEP								
Student I	Name: Sabin, Hea	ather R. Studer	nt ID: 150478 Gende	er: Female Birth Date: 03	3/29/2006 Grade: 0	01 IEP Status: Draft	IEP		
Cover	Medical PLAAFP	Special Cons.	Goals Services	Supl. Aids & ESY Tes	sting LRE Pare	ent St. Medicaid	Attachments		
Docume	nt Attachments							Add	
X Lin	e l	Print Order	æ	Comment	t (♦	Document		₽

Figure 3-191 IEP Screen Attachments Tab

- 1. Click the Add button to add an attachment. A new window opens.
- 2. Click the Browse button and select the file you wish to upload.

Attach document
Steps To Upload Image:
1) Click Browse and select the file you wish to upload
2) Click Upload
Browse
Upload

Figure 3-192 Attach Document Screen

3. Click Upload.

The name of the document displays in the Comment column. The type of document, Word or PDF, displays in the Document column.

١	Vord Document Attachments		Add 🔇
	X Line Print Order	Comment	Document
	1 1	MED CERT	

Figure 3-193 IEP Screen Attachments Tab Attachments List

4. The **Print Order** is the order the document will be printed following the IEP. This may be changed by typing in a different order.



Note: Attachments must be in Word or PDF format.

FINALIZE THE IEP

CAUTION!

Caution: To guard against documents moving to Historical Docs before their time, only the student's Case Carrier should Finalize the IEP, unless the school district has designated another user to be in charge of finalizing.

When the IEP is finalized, all existing documents, including a copy of the IEP, will be sent to Historical Docs. The student will be moved to the next appropriate process. The next process is usually the Annual Review, unless the student's next Triennial Reevaluation date is due in less than 6 months, in which case they would be moved to the Reeval process.

1. Click the **Finalize** button in the Action Bar of the document.

If the Validation process has not yet been completed, it will be forced to run now. Once the document has been successfully validated, the Finalize process will begin.

If any active documents for this student HAVE NOT been finalized the Process Move Errors window displays.

∀Process	Move Errors	•		~
Please resolve all	errors listed below to	o proceed with the process move.		
General Errors				٨
Line Error Message	0			
Document Errors				3
Line Document ID	Document Name	Error Message	Delete	Finalize
1 GENAZ 03	Parent Input	All process documents must be finalized or deleted	×	0
2 GENAZ 01	Referral	All process documents must be finalized or deleted	×	0
Refresh Error List				

Figure 3-195 IEP Process Move Errors List

Active documents must be either finalized or deleted before advancing through the finalizing process.

- 2. To finalize, click the **yellow icon** associated with the document. The document will open allowing it to be finalized.
- 3. To delete, click on the "X" in the Delete column. The document will be deleted. The Delete option is a district security option and some users may not have access to the delete option.
- 4. Once all documents have been deleted or finalized, click Referesh Error List

When the list displays no more **Document Errors** the window can be closed.

Process Move	Errors			» 🕹
Please resolve all errors list	ted below to proceed with the	e process move.		
General Errors				۵
Line Error Message				
Document Errors				٥
Line Document ID	Document Name	Error Message	Delete	Finalize
Referesh Error List				

Figure 3-196 IEP Process Move Errors List Cleared

5. Click Finalize again from the action bar in the IEP.

Prior to the completion of the Finalize process a window prompt displays confirming the Finalization of the IEP.

6. Type **Yes** in the textbox provided.

Confirm making IEP Finalized 🛛 🖓
You are finalizing this IEP. This means that all participants have signed off on this IEP. You will not be able to undo this action once it is complete. Any changes to goals or services will be handled through the Addendum process. If you are sure you want to make this IEP current, type the word YES in the space provided below, and then click the Continue button below.
Confirm Current Continue Cancel

Figure 3-197 IEP Confirm IEP FInalize Message

- 7. Click **Continue.** A printable version of the IEP will display.
- 8. Close or print the finalized IEP.

The following events will have occurred:

The student will have been moved to the next appropriate process, most likely the Annual Review process.

The finalized documents are available in Historical Docs with a working copy of the IEP available (yellow icon).

The Progress Report has been created containing the student's goals from the finalized IEP.

The Reevaluation Date and Annual Review Date have been updated and appear in the date columns.

IEP AMENDMENT

1. Open the Working Copy of the IEP by clicking on the yellow hexagon in the IEP column of the Portfolio screen.

\mathbb{V}^{F}	Portfolio										
Good	l evening, Admin User										
Port	folio										
Name	•	 Image: A set of the set of the									
Initia	Evaluation										٢
Ann	ıal Review										٥
Line	Student Name	Grade	Team	Ad Hoc Docs	Historical Docs	IEP	Prg	Process D	DCS	A-R Date	R-E Date
1	Ackerman, Brian M.	09	Edit	<u>Edit</u>	View	IEP	PRG		0	01/17/2013	04/28/2014
2	Babb, Mark M.	08	<u>Edit</u>	<u>Edit</u>	View	IEP	PRG		Θ	05/09/2012	11/14/2013
3	Facio, Wayne E.	05	<u>Edit</u>	<u>Edit</u>	<u>View</u>	IEP	PRG		Θ	02/14/2012	04/10/2013

Figure 3-198 Portfolio Screen IEP Icon

OR

Using the SE Student screen go to the Process Docs tab and select the Working Copy of the IEP by clicking on the **green circle** in the Doc column.

Cu	rrent Process: Annual Review		
Pr	rocess Documents		۵
×	Line Name	Status	Doc
	GENAZ 09 - IEP Meeting Request	In Progress	.
	GENAZ 13 - Notice of Placement	In Progress	.
Г	3 GENAZ 14 - Notice of IEP	Skipped	▲
	4 IEP	In Progress	
M	anual Process Move		()
М	ove To Move To Move Exit Process		
	Eigura 2 100 SE Student Saroon Dracosa Dogur	anta Tab IED laan	

Figure 3-199 SE Student Screen Process Documents Tab IEP Icon

Confirm Make Amendment 🔇
You are creating an Amended IEP. This means that this IEP will become a copy of the current Finalized IEP. Any changes you have made to the draft IEP before clicking the Make Amendment button will be lost. If you are sure you want to create an Amendment, type the word YES in the space provided below, and then click the Continue button below.
Confirm Make Amendment
Continue Cancel

Figure 3-200 IEP Amendment Confirmation Screen

The Working Copy will open and be available for amending.

2. Click the Make Amendment button.



Caution: Clicking the Make Amendment button prior to making any changes to the IEP will overwrite data written prior to selecting the Make Amendment process. Changes made before the Amendment process has begun will not be saved.

- 3. A message window displays asking to Confirm Make Amendment. Type **Yes** in the Confirm Make Amendment field
- 4. Click **Continue**. The Working Copy of the IEP displays.
- 5. Make the necessary changes and click Finalize.

The new IEP will have the heading of Amended IEP and display the Amendment Date along with the unchanged IEP and Reeval dates.

Mesa, AZ 85204 Phone: 480-833-29 Fax: 480-833-29	900 901		AME				1ENT		School District
Student Name: Date Of Birth: Student No.:	Labianca, Dou 05/27/1995 888763	ıglas S .			Home Phone Home Addre	ss:	480-555-12 3453 E Dee Tempe, AZ	234 catur S t 2 85662	Date: 07/10/2012
Age 17	Gender Male	Grade 11		Home School				Attending School Hope High Sch	ool
Ethnicity White			Primary L	anguage - Dati	e Determined			Home Language - Date English	Determined
Parent/Guardian									
Name Steve Labianca			Home Phor 480-555	ne 5-1234	Name Aman	ida Li	abianca		Home Phone 480-555-1234
Address 3453 E Decatur	St		Work Phon 480-55	e 5-1234	Address 3453	E Deo	atur St		Work Phone 480-555-1234
Tempe, AZ 8566	2		Emergency	/ Phone	Temp	e, AZ	85662		Emergency Phone 480-555-1234

Figure 3-201 IEP Amendment Example

PROGRESS REPORT

The Progress Report is available whenever an IEP containing annual goals has been finalized and moved to Historical Documents. The goals that are specified in that finalized IEP are made available in the Progress Report.

1. Click on the Progress Report icon in the student's row of the Portfolio View.



OR

Click on the **Progress Report** button in the Student Screen Process Docs Tab. The Progress Report screen will open.



Figure 3-203 SE Student Process Docs Tab Progress Report Button



Note: Print Progress Report also means Save! Each time you click on the Print Progress Report button, the most recent version of the Progress Report displays in Historical Documents.

The Progress Report screen initially opens with no Progress Periods created. They are added as needed.





- 2. Click the Add button.
- 3. The **Progress Date** will display today's date by default. To change, enter a new date (MMDDYY) or click and select date.
- 4. Select the student's school from the **School** drop-down list.
- 5. Click <u>Save</u>. The Progress Link will now be available.
- 6. Click the Progress link to open the IEP Progress Period Detail screen.

X Line Progress Date Progress I 107/15/2010 Image: Washington Elementary Image: Washington Elementary Image: Washington Elementary	Progress Period								
Progress Progress	×	Line Progress Date	School	Progress					
		1 07/15/2010 🔛	Washington Elementary	Progress					

Figure 3-205 IEP Progress Report Progress Link

7. From this screen, the Progress, Score and Comments can be added to each goal.

\mathbb{V}	EP Progr	ess Period Detail					×	>
Prog	ress Date: 07/1	5/2010 Organization Name: Washington Elementary Progress Date: 07/1	5/2010					
Pro	gress Period De gress Detail							5
110	less betain		Dre score	Dro		Current Pe	eriod (7/15/2010)	-
Line	Category	Goal Description	date	score	Progress		Comment	
1	Language - Integrated Language	Shawn will demonstrate improved social language by maintaining interaction/topic at grade level, given group/classroom activities with necessary levels of support, scoring 12 out of 15 on a district Integrated Language Rubric, measured quarterly. (AZ Academic Standard, LS E1- 4)	02/02/2009	7/15	~			4
2	Language - Integrated Language	Shawn will demonstrate improved social language by responding to verbal communication at grade level, given group/classroom activities with necessary levels of support, scoring 12 out of 15 on a district Integrated Language Rubric, measured quarterly. (AZ Academic Standard, LS E1- 4)	02/02/2009	8/15	~			4
3	Speech - Articulation	Shawn will demonstrate improved intelligibility of speech by producing understandable utterances containing no more than 10% unitelligible works when speaking with an untrained listener on 10 designated occasions as measured by quarterly teacher created assessment. AZ Academic Standards LS E 1.2.3.4.	02/02/2009	30% unintelligible	~		2 S	
4	Alternate Academic Stds - Reading	Shawn will demonstrate improved comprehension skills by locating specific information using the title and page numbers found in expository text when given picture/prinit cues scoring 80% as measured quarterly as measured by teacher-made evaluation. RoG S3 C1 POS Alt 2	02/02/2009	45%	~			4
5	Alternate Academic Stds - Reading	Shawn will demonstrate improved comprehension skills by answering questions using basic textual and/or graphical features (e.g., headings, bold print) when given a variety of sources (e.g., charts, maps, schedules) scoring 80% as measured quarterly on teacher-made assessment R/o6 S1	02/02/2009	50%	~			4 1

Figure 3-206 IEP Progress Period Detail Screen

8. Select the progress for each goal by clicking the **Progress** drop-down and selecting from the list of choices.



Figure 3-207 IEP Progress Period Detail Screen Drop-down

- 9. Enter the current score in the Score column.
- 10. Add optional **Comments** for each goal.

Prog	ress Detail							- 📀
	Catagoni	Cool Description	Pre score	Pre		Current Pe	riod (7/15/2010)	
	Category		date		Progress	Score	Comment	
1	Language - Integrated Language	Shawn will demonstrate improved social language by maintaining interaction/topic at grade level, given group/classroom activities with necessary levels of support, scoring 12 out of 15 on a district Integrated Language Rubric, measured quarterly. (AZ Academic Standard, LS E1-4)	02/02/2009	7/15	4 💌	8 / 15	Shawn is making excellent progress on	*

Figure 3-208 IEP Progress Period Detail Screen Comments

11. After updating all goals, Click Save

- 12. Close the Progress Period Detail screen.
- 13. To print the progress report, click the **Print Progress Report** button in the Progress Report window.

ADDITIONAL PROGRESS PERIOD

- 1. To add an additional grading period to the Progress Report, click the **Add** button form the main Progress Report window.
- 2. In the new row that appears, add a **Progress Date** and select the student's school.
- 3. Click <u>Save</u>. A new Progress Period will be available.

Menu V Save Undo Print Progress Report	Status: Ready 没 🚣					
VProgress Report	>> 🛃					
Student Name: Akins, Shawn E Student ID: 962860 Gender: Male Birth Date: 02/17/1998 Grade: 06						
IEP	(
EP Date Date this IEP will be Reviewed IEP Status						
02/02/2009 🕑 02/01/2010 🔛 Current IEP						
School	()					
School of Attendance School Type						
Washington Elementary						
Progress Period	Add 🔇					
X Line Progress Date School Progress						
□ 1 07/15/2010 🔐 Washington Elementary 💙 Progress						
2 7/15/2010						

Figure 3-209 IEP Progress Report Screen Create New Period

4. Click the <u>Progress</u> link in the appropriate row to open the new Progress Report. The new Progress Report displays, along with the scores for the previous period.

Progress Period							
X Line Progress Date	School	Progress					
1 07/15/2010	Washington Elementary	Progress					
2 09/15/2010	Washington Elementary	Progress					

Figure 3-210 IEP Progress Report Screen Progress Link

- 5. Update the new progress period data and click save.
- 6. Close the **Progress Report** screen.

When the new updated Progress Report is printed the document will show the scores and comments for all available grading periods. This Progress Report sample shows two grading periods complete.

Category:	SLI - Fluency						
Annual Goal: Shawn will demonstrate increased fluency by spontaneously utilizing appropriate repair strategies in which the stuttered production is changed to more fluent production when given taped samples of his speech with no model from the teacher with a score of 90% accuracy as measured by quarterly speech sampling. AZ Academic Standards LS-F1,2,3							
Pre score	date: 01/12/2009) Pre	e score: 75%				
Date	Progress Code	Score	Comments				
07/15/2010	1	85%	Shawn is making excellent progress on this goal.				
09/15/2010	1	91%	Great work!				
Annual Goal: Shawn will demonstrate increased fluency by producing speech which exhibits easy onset at the phrase/sentence level when given pictures with a score of 80% accuracy as measured by quarterly criterion referenced assessment. AZ Academic Standards LS-F1,2,3.							
Pre score	date: 01/12/2009) Pre	e score: 10%				
Date	Progress Code	Score	Comments				
07/15/2010	1	50%					
09/15/2010	1	80%					

Figure 3-211 IEP Progress Report Example

ESY PROGRESS REPORT

The ESY Progress Report is available whenever an IEP containing annual goals checked with **Applies To ESY** has been finalized and moved to Historical Documents. The goals that are specified in that finalized IEP are made available in the ESY Progress Report.

1. To access the ESY Progress Report Click on the **ESY Progress Report** button in the SE Student Screen Process Docs Tab. The ESY Progress Report screen opens.

Demographics Parents Team Ad Hoc Doc	uments Historical I	Documents Pr	ocess Do	cs Timeline S	tudent Contac	t Log		
Last Name First Name	Middle Name	Suffix	Student	ID	Gender	Grade		
Ackerman Brian	M		120952		Male 💌	09	~	
Current Settings								٨
IEP Review Due Date Re-evaluation Due Date	Primary Disability		F	Preschool Primar	y Disability			
01/17/2013 📝 04/28/2014 📝	SPECIFIC LEARNIN	IG DISABILITY	~			~		
Current IEP Progress Report	Secondary Disabilit	ties 🥥	F	Preschool Secon	dary Disabilit	ies 🥥	_	
			÷.			÷		
Current BiP	Exit Date E	Exit Reason		Exit Explana	ation			
				~				

Figure 3-212 SE Student Screen Process Docs ESY Progress Report Button

The Progress Report initially opens with no Progress Periods created. Add a new grading period or grading quarter as needed.

- 2. Click the **Add** button
- 3. The **Period Date** will display today's date by default. To change the Period Date, enter a new date (MMDDYY) or click and select date.
- 4. Select the student's school from the **School** drop-down list.

Sch	lool							G	
Sch	hool of Attendance School Type								
Line	oln El	ementary	✓						
Pro	gre ss	Period			Adams Elementary		Add	6	
×	Line	Period Date	\ominus	School	Arizona National High School	Progre	S S	ł	
				*	Bev High School				
					Central Enrollment				
					Continuation High School				
_		7/0/00 10			Eisenhower Middle School				
		//6/2012			Grant Elementary				
					Hope High School				
					Jefferson Elementary				
					Kennedy High School				

Figure 3-213 ESY Progress Report Screen Progress Period Select School

- 5. Click <u>Save</u>. The Progress link will now be available.
- 6. Click the <u>Progress</u> link to open the ESY Progress Detail view.

From this window, student progress, score and comments can be added to each goal.

- 7. Select the progress for each goal by clicking the **Progress** drop-down and selecting from the list of choices.
- 8. Enter the current score in the **Score** column.
- 9. Add optional **Comments** for each goal.
- 10. After updating all goals, click save.
- 11. Close the ESY Progress Period Detail screen.
- 12. To print the progress report, click the **Print Progress Report** button in the ESY Progress Report window.

Note: Print Progress Report also means Save! Each time you click on the Print Progress Report button, the most recent version of the Progress Report displays in Historical Documents.

ADDITIONAL ESY PROGRESS PERIOD

- 13. To add an additional grading period to the ESY Progress Report, click the **Add** button from the main ESY Progress Report screen.
- 14. In the new row that appears, add a **Progress Date** (MMDDYY) or click 🗊 and select date.
- 15. Select the student's School.
- 16. Click <u>Save</u>. A new Progress Period will be available.
- 17. Click the <u>Progress</u> link in the appropriate row to open the new Progress Report. The new Progress Report displays, along with the scores for the previous period.

F	Progress Period							
	X	Line	Period D	late 🔶	School	\ominus	Progress	
		1	07/06/2012	7	Adams Elementary		Progress	
		2	07/26/2012	7	Adams Elementary		Progress	

Figure 3-214 ESY Progress Report Screen Progress Period Grid

- 18. Update the new progress period data and click save.
- 19. Close the ESY Progress Report window.

When the new updated ESY Progress Report is printed the document will show the scores and comments for all available grading periods.

This ESY Progress Report sample shows two grading periods complete.

Category:	SLI - Fluency					
Annual Go	bal: Shawn will o strategies ir given taped accuracy as	demonstrate which the s samples of measured b	increased fluency by spontaneously utilizing appropriate repair stuttered production is changed to more fluent production when his speech with no model from the teacher with a score of 90% by quarterly speech sampling. AZ Academic Standards LS-F1,2,3.			
Pre score	date: 01/12/2009) Pre	score: 75%			
Date	Progress Code	Score	Comments			
07/15/2010	1	85%	Shawn is making excellent progress on this goal.			
09/15/2010	1	91%	Great work!			
Annual Goal: Shawn will demonstrate increased fluency by producing speech which exhibits easy onset at the phrase/sentence level when given pictures with a score of 80% accuracy as measured by quarterly criterion referenced assessment. AZ Academic Standards LS-F1,2,3.						
Pre score	date: 01/12/2009) Pre	score: 10%			
Date	Progress Code	Score	Comments			
07/15/2010	1	50%				
09/15/2010	1	80%				

Figure 3-215 ESY Progress Report Screen Example

GENAZ 13 – NOTICE OF PLACEMENT (REVIEW)

The Notice of Placement (Review) is located in the Annual Review Process.



Note: The Notice of Placement (Review) has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Placement contains one tab:

• Prior Written Notice

Prior Written Notice	
Student Name: Akins, Shawn E. Document: GENAZ 13 Description: Notice of Placement	
Prior Written Notice	
Document Name	Document Date
Notice of Placement	1 6
Description of Actions Proposed or Refused	9
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Identification	
The evaluation team has received a referral for a possible comprehensive evaluation of your child.	
Statements	٥
Explanation of why the district proposes or refuses to take the action:	
	413
Description of each evaluation procedure, assessment, record or report used as a basis for the proposed or r	efused action:
<u>v</u>	
	-11
Description of other options considered and why those options were rejected:	
*	
	-11
Description of the factors relevant to the actions proposed or refused are:	
×	
	ai
Implementation of Decision	0
This decision is proposed to be implemented on:	
Parents of a student and the student have protection under procedural safeguards in accordance with Federal L	aw. Contact the
school psychologist or call the Special Education office if you want a copy of the procedural safeguards.	
Procedural Safeguards provided to parent(s)	
(initials)	
This document was prepared by:	
Admin User	
Case Manager Case Manager Phone	

Figure 3-216 Notice of Placement Screen

To create a Notice of Placement document:

1. Enter the Document Date (MMDDYY) or click and select date. This should reflect the date the document was created.

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

2. Click on the drop-down box located above the textbox.

Explanation of why the district proposes or refuses to take the action:					
~					
Student requires Special	A				
	V				

Figure 3-217 Notice of Placement Screen Statements Section Drop-down

3. Select the desired key-word stem in the drop-down list.

Explanation of why the district proposes or refuses to take the action:	
The IEP team found that Harry requires Special Education services in order to receive an appropriate	A
education.	-

Figure 3-218 Notice of Placement Screen Statements Section Populated

- 5. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 6. Enter user (initials) to signify that Procedural Safeguards were provided to parent.
- 7. Click next to **This document was prepared by:.** The Find: Staff screen displays.
- 8. Enter all or part of staff Last Name, First Name.

Find Close Select Clear Selection								
Find: Staff								
Find Criteria								
Last Name	First Name	Middle Name						
Smith	С							
Search Results								
Find Result								
Line Last Name	First Name	Mi	ddle Name					
1 Smith	Christine							
2 Smith	Jk							

Figure 3-219 Find: Staff Screen

9. Click Find or press ENTER. Search Results displays a list of matching criteria.

10. Click line of staff name. Line highlights.

- 11. Click again or click set. Find: Staff screen closes and staff name displays.
- 12. Click Save

The document can be printed, validated and finalized.

GENAZ 14 – NOTICE OF IEP (REVIEW)

The Notice of IEP (Review) is located in the Annual Review Process.



Note: The Notice of IEP (Review) has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of IEP contains one tab:

• Prior Written Notice

VPrior Written Notice	
Student Name: Akins, Shawn E. Document: GENAZ 14 Description: Notice of IEP	
Prior Written Notice	
Document Name	Document Date
Notice of IEP	1 6
Description of Actions Proposed or Refused	9
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Identification	
The evaluation team has received a referral for a possible comprehensive evaluation of your child.	
Statements	٥
Explanation of why the district proposes or refuses to take the action:	
×	
	at
Description of each evaluation procedure, assessment, record or report used as a basis for the proposed of	r refused action:
	.d
Description of other options considered and why those options were rejected:	
~	
ER O	
	af
Description of the factors relevant to the actions proposed or refused are:	
ETT ()	
	.fl
	-
Implementation of Decision	9
This decision is proposed to be implemented on.	
Parents of a student and the student have protection under procedural safeguards in accordance with Federa school psychologist or call the Special Education office if you want a copy of the procedural safeguards.	al Law, Contact the
Procedural Safeguards provided to parent(s)	
(initials)	
This document was prenared by	
Admin User	
Case Manager Case Manager Phone	

Figure 3-220 Notice of IEP Screen

To create a Notice of IEP document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

Explanation of why the district proposes or refuses to take the action:			
~			
Requires Services	A		

Figure 3-221 Notice of IEP Screen Statements Section Drop-down

- 2. Click on the drop-down box located above the textbox.
- 3. Select the desired key-word stem in the drop-down list.

Explanation of why the district proposes or refuses to take the action:	
19 🛇	
The IEP team has determined that Harry requires the services listed on the attached IEP.	_
	T





Tip: When entering, editing or viewing information in a textbox, grab in the bottom right corner, to resize the box. The box can be adjusted larger to view more of the information or smaller to provide more room on the screen.

- 5. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 6. Enter user (initials) to signify that Procedural Safeguards were provided to parent.
- 7. Click next to **This document was prepared by:.** The Find: Staff screen displays.

Find Close Select Clear Selection							
Find: Staff							
Find Criteria				٩			
Last Name	First Name Middle Nar		Middle Name				
Smith	С						
Search Results							
Find Result				٨			
Line Last Name		First Name		Middle Name			
1 Smith		Christine					
2 Smith		Jk					

Figure 3-223 Find: Staff Screen
- 8. Enter all or part of staff Last Name, First Name.
- 9. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 10. Click line of staff name. Line highlights.
- 11. Click again or click set. Find: Staff screen closes and staff name displays.
- 12. Click Save

GENAZ 15 – NOTICE OF REEVALUATION WAIVER

The Notice of Reevaluation Waiver is located in the Reevaluation Process.

A Reevaluation Waiver is conducted when the district and the student's team agree that the Triennial Evaluation will be waived. GENAZ 55 – Reevaluation Agreement in Ad Hoc documents is a companion to this document. Upon the finalization of this document the student will be moved to the Annual Review Process. The Waiver notice and agreement document will move to Historical Docs. The working copy of the IEP will move with the student. Changes made to the IEP will not be lost.

(See: Documents With Unique Functionality)

Note: The Notice of Reevaluation Waiver has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Reevaluation Waiver contains one tab:

Prior Written Notice	
Student Name: Akins, Shawn E. Document: GENAZ 15 Description: Notice of Reeval Waiver	
Prior Written Notice	
Jocument Name	Document Date
Notice of Reeval Waiver	
Description of Actions Proposed or Refused	G
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Identification	
The evaluation team has received a referral for a possible comprehensive evaluation of your child.	
Statements	G
Explanation of why the district proposes or refuses to take the action:	
¥	
90	
	11
Description of each evaluation procedure, assessment, record or report used as a basis for the proposed or	refused action:
×	
5 Q	
	at
Description of other options considered and why those options were rejected:	
	- ia
Description of the factors relevant to the actions proposed or refused are:	
×	
	H.
Implementation of Decision	G
This decision is proposed to be implemented on:	
Parents of a student and the student have protection under procedural safeguards in accordance with Federal school psychologist or call the Special Education office if you want a copy of the procedural safeguards.	Law. Contact the
Procedural Safeguards provided to parent(s)	
(initials)	
This document was prepared by:	
Admin User	
Case Manager Phone	
V V V	

Figure 3-224 Notice of Reevaluation Waiver Screen

To create a Notice of Reeval Waiver document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

2. Click on the drop-down box located above the textbox.

Explanation of why the dist	rict proposes or refuses to take the action:
~	
Review Existing Data	

Figure 3-226 Notice of Reevaluation SWaiver Screen Statements Section Drop-down

Explanation of why the district proposes or refuses to take the action:	
×	
19 🛇	
The IEP team has determined that reevaluation is not needed in order to establish Bruce's continued	<u> </u>
	-

Figure 3-225 Notice of Reevaluation Waiver Screen Statements Section Populated

- 3. Select the desired key-word stem in the drop-down list.
- 5. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria				3	
Last Name	First N	Vame	Middle Name		
Smith	С				
Search Results					
Find Result				4	
Line Last Name		First Name		Middle Name	
1 Smith		Christine			
2 Smith		Jk			

Figure 3-227 Find: Staff Screen

- 6. Enter user (initials) to signify that Procedural Safeguards were provided to parent.
- 7. Click next to **This document was prepared by:.** The Find: Staff screen displays.
- 8. Enter all or part of staff Last Name, First Name.
- 9. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 10. Click line of staff name. Line highlights.
- 11. Click again or click set. Find: Staff screen closes and staff name displays.
- 12. Click Save

The document can be <u>printed</u>, <u>validated</u> and <u>finalized</u>. All finalized documents for this student will move to Historical Docs and the student will be moved to Annual Review process for completion of the student's review.

GENAZ 16 – NOTICE OF REFERRAL (REEVAL)

The Notice of Referral (Reeval) is located in the Reevaluation Process.



Note: The Notice of Referral (Reeval) has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Referral contains one tab:

• Prior Written Notice

VPrior Written Notice	
Student Name: Akins, Shawn E. Document: GENAZ 16 Description: Notice of Referral Prior Written Notice	
Document Name	Document Date
Notice of Referral	6
Description of Actions Proposed or Refused	G
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Identification The evaluation team has received a referral for a possible comprehensive evaluation of your child.	
Statements	G
Explanation of why the district proposes or refuses to take the action:	
	.4
Description of each evaluation procedure, assessment, record or report used as a basis for the proposed or	refused action:
	t
Description of other options considered and why those options were rejected:	
Description of the factors relevant to the actions proposed or refused are:	-11
Implementation of Decision	Q
This decision is proposed to be implemented on:	
Parents of a student and the student have protection under procedural safeguards in accordance with Federal school psychologist or call the Special Education office if you want a copy of the procedural safeguards. Procedural Safeguards provided to parent(s) (initials) This document was prepared by:	Law. Contact the
* Admin User	
Case Manager Phone	

Figure 3-228 Notice of Referral Reevaluation Screen

To create a Notice of Referral document:

1. Enter the Document Date (MMDDYY) or click and select date. This should reflect the date the document was created.

The Statements section contains four description areas, where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

v	
Educational Disability Suspected	

Figure 3-229 Notice of Referral Reevaluation Screen Statements Section Drop-down

2. Click on the drop-down box located above the textbox.

Explanation of why the district proposes or refuses to take the action:	
×	
19 O	
suspects that Harry may have an educational disability.	<u> </u>
	_

Figure 3-230 Notice of Referral Reevaluation Screen Statements Section Populated

- 3. Select the desired key-word stem in the drop-down list.
- The statement associated with the key-word stem selected will appear in the textbox. Use [™] to spellcheck. Use [♥] for more space.
- 5. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 6. Enter user (initials) to signify that Procedural Safeguards were provided to parent.
- 7. Click next to **This document was prepared by:.** The Find: Staff screen displays.
- 8. Enter all or part of staff Last Name, First Name.
- 9. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 10. Click line of staff name. Line highlights.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria					٢
Last Name	First N	lame	Middle Name		
Smith	С				
Search Results					
Find Result					٢
Line Last Name		First Name		Middle Name	
1 Smith		Christine			
2 Smith		Jk			

Figure 3-231 Find: Staff Screen

11. Click again or click set. Find: Staff screen closes and staff name displays.

GENAZ 17 – NOTICE OF REEVALUATION DECISION

The Notice of Reevaluation Decision is located in the Reevaluation Process.



Note: The Notice of Reevaluation Decision has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Reevaluation Decision contains one tab:

• Prior Written Notice

VPrior Written	Notice			
Student Name: Aaron, la	n Docum	ent: GENAZ 17 Description: Notice of Re	evaluation	Decision
Prior Written Notice				
Document Name				
Notice of Reevaluation De	ecision			
Document Date				
Decision				
Current Decision: Fligibl	le for Eval	lation	_	Change Decision To "Not Elizable for Evaluation"
			-	Change Decision To Not Eligible for Evaluation
Description of Actions Pro	oposed or	Refused	DISTRICT	- Evoluction
The Multidisciplinary Eva	aluation Te	am (MET) has decided to collect	additional	l data on your child.
Statements				۵
Explanation of why the o	district pro	poses or refuses to take the action	n:	
	~			
圏の				
				ui.
Description of each evaluation	uation pro	cedure, assessment, record or rep	ort used	as a basis for the proposed or refused
action:				
	~			
1 S				
Description of other optic	ons consid	lered and why those options were	rejected:	
	~			
19 🔉				
Description of the factors	s relevant	to the actions proposed or refused	are:	
	~			
19 📀				
Implementation of Desirie				
This decision is proposed	d to be im	nlemented on:	{	
Parante of a student and	the stude	at have protection under procedur	al cafaqu	ande in accordance with Foderal I aw
Contact the school psyc	hologist o	r call the Special Education office	if you wa	int a copy of the procedural safeguards.
Procedural Safeguards p	rovided to	parent(s)		
	(initials)		
This document was prep	ared by:			
+				
Admin User				
Case Manager	(22	Case Manager Phone		
User, Admin	~	401-123-45/0		

Figure 3-232 Notice of Reevaluation Decision Screen

To create a Notice of Reevaluation Decision document:

- 1. Enter the Document Date (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. The Notice of Evaluation opens in Evaluate mode. To change the decision click Change Decision To "Not Evaluate". Current Decision will display Not Evaluate.
- 3. The Current Decision can be changed back to Evaluate by clicking Change Decision To "Evaluate"

Based on the decision made above the document will display the appropriate text in the Statement fields and drop-down selections.

There are four statement areas for the explanations of action taken. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly into the textboxes.

4. Click on the drop-down box located above the textbox.

Explanation of why the district proposes or refuses to take the action:					
Disability not suspected					
Adequate educational performance					

Figure 3-233 Notice of Reevaluation Decision Screen Sentence Stem Drop-down

- 5. Select the desired key-word stem in the drop-down list.
- 6. The statement associated with the key-word stem selected will appear in the textbox. The statement can then be edited and spell checked if desired.

Explanation of why the district proposes or refuses to take the action:	
▼	
🕎 📀	
Information reviewed by district and parent(s) does not suggest that Harry has a suspected educational disability.	

Figure 3-234 Notice of Reevaluation Decision Screen Inserted Statement

- 7. Enter the **This decision is proposed to be implemented on:** date (MMDDYY) or click and select date.
- 8. Enter (initials) to signify that the Procedural Safeguards were provided to parent.
- 9. Click next to the **This document was prepared by:** to select the staff name. The Find: Staff screen displays.

10. Enter all or part of staff Last Name, First Name.

Find Close Select Clear Selection			
Find: Staff			
Find Criteria			4
Last Name	First Name	Middle Name	
Smith	С		
Search Results			
Find Result			6
Line Last Name	First Name	N	liddle Name
1 Smith	Christine		
2 Smith	Jk		

Figure 3-235 Find: Staff Screen

11. Click **Find** or press ENTER. Search Results displays a list of matching criteria.

12. Click line of staff name. Line highlights.

13. Click again or click set. Find: Staff screen closes and staff name displays.

14. Click Save

GENAZ 18 – NOTICE OF TRIENNIAL

The Notice of Triennial is located in the Reevaluation Process.



Note: The Notice of Triennial has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Triennial contains one tab:

• Prior Written Notice

✓Prior Written Notice	
Student Name: Akins, Shawn E. Document: GENAZ 18 Description: Notice of Triennial Prior Written Notice	
Document Name	Document Date
Notice of Triennial	🕼
Description of Actions Proposed or Refused	G
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Identification The evaluation team has received a referral for a possible comprehensive evaluation of your child.	
Statements	G
Explanation of why the district proposes or refuses to take the action:	
	.4
Description of each evaluation procedure, assessment, record or report used as a basis for the proposed or re	fused action:
<u> </u> 一 王	
	.di
Image: Second of other options considered and why those options were rejected. Image: Second of other options considered and why those options were rejected. Image: Second of other options considered and why those options were rejected.	
	a
Description of the factors relevant to the actions proposed or refused are:	
	a
Implementation of Decision	
This decision is proposed to be implemented on:	
Parents of a student and the student have protection under procedural safeguards in accordance with Federal La school psychologist or call the Special Education office if you want a copy of the procedural safeguards. Procedural Safeguards provided to parent(s)	aw. Contact the
This document was prepared by:	
Admin User	
Case Manager Case Manager Phone	

Figure 3-236 Notice of Triennial Screen

To create a Notice of Triennial document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

2. Click on the drop-down box located above the textbox.

Explanation of why the dist	trict proposes or refuses to take the action:
~	
Requires Services	
	Y

Figure 3-237 Notice of Triennial Screen Statements Section Drop-down

3. Select the desired key-word stem in the drop-down list.

Explanation of why the district proposes or refuses to take the action:	
The IEP team has determined that Harry requires the services listed on the attached IEP.	
	T

Figure 3-238 Notice of Triennial Screen Statements Section Populated



Tip: When entering, editing or viewing information in a textbox, grab in the bottom right corner, to resize the box. The box can be adjusted larger to view more of the information or smaller to provide more room on the screen.

- 5. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 6. Enter user (initials) to signify that Procedural Safeguards were provided to parent.
- 7. Click next to **This document was prepared by:.** The Find: Staff screen displays.

Find Close Select Clear Selection				
Find: Staff				
Find Criteria				۵
Last Name	First Name		Middle Name	
Smith	С			
Search Results				
Find Result				۵
Line Last Name	ne Fi			Middle Name
1 Smith	C	Christine		
2 Smith	J	Jk		

Figure 3-239 Find: Staff Screen

- 8. Enter all or part of staff Last Name, First Name.
- 9. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 10. Click line of staff name. Line highlights.
- 11. Click again or click set. Find: Staff screen closes and staff name displays.
- 12. Click Save

The document can be <u>printed</u>, <u>validated</u> and <u>finalized</u>.

GENAZ 19 – NOTICE OF TEST INTENT

The Notice of Intent to Test is located in the Reevaluation Process.

Note: The Notice of Test Intent has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Test Intent provides the user with two options:

- **Notice of Test Intent** The student will remain in the process. If this option is selected, the Notice of Intent to Test will work as other PWN's and remain in the student's process documents until the IEP is finalized, at which point the document will move to Historical Docs along with the other created and finalized documents.
- Notice of NO Test Intent The student will remain in the process. If this option is selected, the Notice of Test Intent will work as other PWN's and remain in the student's process documents until the IEP is finalized or the decides the student is Not Eligible for services, at which point the document will move to Historical Docs along with the other created and finalized documents.

The Notice of Test Intent contains one tab:

• Prior Written Notice

Prior Written Notice	
Student Name: Aaron, Ian Document GENAZ 19 Description Notice of Test Intent	
Prior Written Notice	
Document Name	Document Date
Notice of Test Intent	CP .
Decision	9
Current Decision: Intent to Test	Change Decision To "Intent Not to Test"
Description of Actions Proposed or Refused	ç
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Evaluation	
The Multidisciplinary Evaluation Team (MET) has decided that standardized testing is nec	essary as part of lan's reevaluation.
Statements	G
Explanation of why the district proposes or refuses to take the action:	
ET Q	
	al
Description of each evaluation procedure, assessment, record or report used as a basi	s for the proposed or refused action:
EI O	
ΣI α	
	.1
Description of other options considered and why those options were rejected	
图 0	
Provide a different set and the the endowed as a first days	
Description of the factors relevant to the actions proposed or relused are.	
×	
団つ	
	a
Implementation of Decision	0
This decision is proposed to be implemented on	
Parents of a student and the student have protection under procedural safeguards in acc	ordance with Federal Law. Contact the
Discardural Salamunda provided to executive	ona servyreros.
Procedural Saleguaros provodo to parent(s)	
(fearing)	
this document was prepared by: e	
Admin User	
Case Manager Phone	
~	

Figure 3-240 Notice of Test Intent Screen

To create a Notice of Test Intent document

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. The Notice of Test Intent opens in Intent to Test mode. To change the decision click Change Decision To "Intent Not to Test". Current Decision will display Intent Not to Test.
- 3. The Current Decision can be changed back to Intent to Test by clicking Change Decision To "Intent to Test"

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

4. Click on the drop-down box located above the textbox.

Explanation of why the distric	t proposes or refuses to take the action:
×	
Standardized Testing Needed	
I	

Figure 3-241 Notice of Test Intent Screen Sentence Stem Drop-down

5. Select the desired key-word stem in the drop-down list.

Description of each evaluation procedure, assessment, record or report used as a basis	for the proposed or refused action:
19 🛇	
Prior evaluation report(s), current IEP, progress reports, input from district staff and parent(s).	<u> </u>
	v

Figure 3-242 Notice of Test Intent Screen Sentence Stem Completed

- 7. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 8. Enter (initials) to signify that Procedural Safeguards were provided to parent.
- 9. Click next to **This document was prepared by:.** The Find: Staff screen displays.

Find Close Select Clear Selection				
Find: Staff				
Find Criteria				٩
Last Name	First Name		Middle Name	
Smith	С			
Search Results				
Find Result				٨
Line Last Name	Line Last Name			Middle Name
1 Smith		Christine		
2 Smith		Jk		

Figure 3-243 Find: Staff Screen

- 10. Enter all or part of staff Last Name, First Name.
- 11. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 12. Click line of staff name. Line highlights.
- 13. Click again or click set. Find: Staff screen closes and staff name displays.
- 14. Click Save

GENAZ 20 – NOTICE OF TERMINATION

The Notice of Termination is located in the Reevaluation Process.

The Notice of Termination provides two options:

- **Terminate the student from PART of special education services.** If this option is selected, the Notice of Termination will work as other PWN's and remain in the student's process documents until the IEP is finalized, at which point the document will move to Historical Docs along with the other created and finalized documents.
- **Terminate the student from ALL special education services.** If this option is selected, upon finalizing the Notice of Termination, the student will be removed from all active special education processes. Any document created and finalized up to and including the Notice of Termination will move to the student's Historical Docs tab.

(See: Documents With Unique Functionality)



Note: The Notice of Termination has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Termination contains one tab:

• Prior Written Notice

VPrior Written Notice	
Student Name: Aaron, Ian Document: GENAZ 20 Description: Notice of Termination	
Prior Written Notice	
Document Name	
Notice of Termination	
Document Date	
Decision	٩
Current Decision: Terminate Part of Services	Change Decision To "Terminate All Services"
Description of Actions Proposed or Refused	0
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Ide	entification
The evaluation team has received a referral for a possible comprehensive evaluation	on of your child.
Statements	Q
Explanation of why the district proposes or refuses to take the action:	
×	
Description of each evaluation procedure, assessment, record or report used as a	a basis for the proposed or refused action:
×	
Description of other options considered and why those options were rejected:	***
Description of other options considered and why those options were rejected.	
	.4
Description of the factors relevant to the actions proposed or refused are:	
	it.
Inclose antation of Parisian	2
This decision is proposed to be implemented on	9
Parents of a student and the student have restortion under procedural safeguards	in accordance with Federal Law Contact the
school psychologist or call the Special Education office if you want a copy of the p	rocedural safeguards.
Procedural Safeguards provided to parent(s)	
(initials)	
This document was prepared by:	
Admin User	
Care Manager Disea	
V V V	

Figure 3-244 Notice of Termination Screen

To create a Notice of Termination document

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. The Notice of Termination opens in Terminate Part Services mode. To change the decision click <u>Change Decision To "Terminate All Services</u>". Current Decision will display **Terminate All Services**.
- 3. The Current Decision can be changed back to Terminate Part Services by clicking <u>Change Decision To "Terminate Part of Services"</u>.

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

- 4. Click on the drop-down box located above the textbox.
- 5. Select the desired key-word stem in the drop-down list.

Explanation of why the distric	t proposes or refuses to take the action:
✓	
Standardized Testing Needed	

Figure 3-245 Notice of Termination Screen Sentence Stem Drop-down

6. The statement associated with the key-word stem selected will appear in the textbox. Use

Ito spellcheck. Use I for more space.

- 7. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 8. Enter user (initials) to signify that Procedural Safeguards were provided to parent.
- 9. Click next to **This document was prepared by:.** The Find: Staff screen displays.

Figure 3-246 Notice of Termination Screen Sentence Stem Completed				
Find: Staff				
Find Criteria				6
Last Name	First I	Name	Middle Name	
Smith	С			
Search Results				
Find Result				6
Line Last Name		First Name		Middle Name
1 Smith		Christine		
2 Smith		Jk		

Figure 3-247 Find: Staff Screen

10. Enter all or part of staff Last Name, First Name.

11. Click **Find** or press ENTER. Search Results displays a list of matching criteria.

12. Click line of staff name. Line highlights.

13. Click again or click set. Find: Staff screen closes and staff name displays.

14. Click Save

The document can be printed, validated and finalized.

If Terminating a Student from *Part of Services*, validate and finalize the document.

If Terminating a Student from ALL Special Education Services, continue to the next step:

TERMINATING A STUDENT FROM ALL SPECIAL EDUCATION SERVICES:

1. Click the Finalize button.

If any documents for this student are NOT yet finalized or if the student has a draft IEP, a Process Move Errors window will appear.

VProcess Move Errors			» 🕹		
Please resolve all errors	listed below to proceed	with the process move.			
General Errors	General Errors 🔇				
Line Error Message	Line Error Message				
1 Not allowed to have	1 Not allowed to have an IEP.				
Document Errors				۵	
Line Document ID	Document Name	Error Message	Delete	Finalize	
Referesh Error List					

Figure 3-248 Notice of Termination Process Move Error List

2. All documents must be finalized or deleted and the draft IEP must be deleted before proceeding.

Upon fixing any Process Move Errors and finalizing, an Exit Process screen displays.

Student Exit From	m Special Ed	
You are about to fields below, and request.	exit the student from Special Ed. If you are sure you want to exit student, type in the click the Exit from Special Ed button. Otherwise click the Cancel button to cancel this	
Exit Date	Exit Reason Exit Explanation	
07/05/2012		
Exit from Spec	ial Ed Cancel	

Figure 3-249 Student Exit From Special Ed Screen

- 3. Using the drop-down menu select the appropriate **Exit Reason** and type in the **Exit Explanation**.
- 4. Click Exit from Special Ed.

After successfully finalizing the Termination notice, the student will be removed from the user's Portfolio view. All finalized documents will appear in the student's Historical Docs tab. (Click on the student icon to view). If the student is ever referred for special education in the future, they can be manually moved to the Initial or Reevaluation process.)

GENAZ 21 – NOTICE OF CONTINUED PLACEMENT

The Notice of Continued Placement is located in the Reevaluation Process.



Note: The Notice of Continued Placement has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Continued Placement contains one tab:

• Prior Written Notice

VPrior Written Notice	
Student Name: Akins, Shawn E. Document: GENAZ 21 Description: Notice of Continued Placement	
Prior Written Notice	
Document Name Do	cument Date
Notice of Continued Placement	
Description of Actions Proposed or Refused	()
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Identification	
The evaluation team has received a referral for a possible comprehensive evaluation of your child.	
Statements	٩
Explanation of why the district proposes or refuses to take the action:	
	_
<i>ا</i> د	el de la companya de
Description of each evaluation procedure, assessment, record or report used as a basis for the proposed or refus	ed action:
v	
h.	đ
Description of other options considered and why those options were rejected:	
	-
	d .
Description of the factors relevant to the actions proposed or refused are:	
V	
	đ
Implementation of Decision	9
This decision is proposed to be implemented on:	
Parents of a student and the student have protection under procedural safeguards in accordance with Federal Law. school psychologist or call the Special Education office if you want a copy of the procedural safeguards.	Contact the
Procedural Safeguards provided to parent(s)	
(initials)	
This document was prepared by:	
Admin User	
Case Manager Case Manager Phone	
× ·	

Figure 3-250 Notice of Continued Placement Screen

To create a Notice of Continued Placement document:

1. Enter the Document Date (MMDDYY) or click and select date. This should reflect the date the document was created.

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

Explanation of why the dist	rict proposes or refuses to take the action:	
~		
Student requires Special Ed]
	·	1

Figure 3-252 Notice of Continued Placement ScreenStatements Section Drop-down

- 2. Click on the drop-down box located above the textbox.
- 3. Select the desired key-word stem in the drop-down list.
- 4. The statement associated with the key-word stem selected will appear in the textbox. Use

Explanation of why the district proposes or refuses to take the action:	
🕎 🛇	
The IEP team found that Harry requires Special Education services in order to receive an appropriate education.	4

Figure 3-253 Notice of Continued Placement Screen Statements Section Populated

Ito spellcheck. Use I for more space.

- 5. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 6. Enter user (initials) to signify that Procedural Safeguards were provided to parent.
- 7. Click next to **This document was prepared by:.** The Find: Staff screen displays.

Find Close Select	Clear Selection	
Find: Staff		
Find Criteria		۵
Last Name	First Name	Middle Name
Smith	С	
Search Results		
Find Result		۵
Line Last Name	First Name	Middle Name
1 Smith	Christine	
2 Smith	Jk	

Figure 3-251 Find: Staff Screen

- 8. Enter all or part of staff Last Name, First Name.
- 9. Click Find or press ENTER. Search Results displays a list of matching criteria.

10. Click line of staff name. Line highlights.

- 11. Click again or click set. Find: Staff screen closes and staff name displays.
- 12. Click Save

GENAZ 22 - NOTICE OF IEP (REEVAL)

The Notice of IEP (Reeval) is located in the Reevaluation Process.



Note: The Notice of IEP has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of IEP contains one tab:

• Prior Written Notice

Prior Written Notice	
Student Name: Akins, Shawn E. Document: GENAZ 22 Description: Notice of IEP Prior Written Notice	
Document Name	Document Date
Notice of IEP	
Description of Actions Proposed or Refused	Q
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Identification	
The evaluation team has received a referral for a possible comprehensive evaluation of your child.	
Statements	٥
Explanation of why the district proposes or refuses to take the action:	
	at
Description of each evaluation procedure, assessment, record or report used as a basis for the proposed or a report used as a basis for the proposed as a basis for the propos	refused action:
	4
Description of other options considered and why those options were rejected:	
Description of the factors relevant to the actions proposed or refused are:	
	4
Implementation of Decision	Q
This decision is proposed to be implemented on: Parents of a student and the student have protection under procedural safeguards in accordance with Federal school psychologist or call the Special Education office if you want a copy of the procedural safeguards. Procedural Safeguards provided to parent(s) (initials) This document was prepared by:	Law. Contact the
Admin User	
Case Manager Case Manager Phone	

To create a Notice of IEP document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

2. Click on the drop-down box located above the textbox.

Explanation of why the dis	trict proposes or refuses to take the action:
~	
Requires Services	
	<u>×</u>

Figure 3-255 Notice of IEP Reevaluation Screen Statements Section Drop-down

3. Select the desired key-word stem in the drop-down list.

Explanation of why the district proposes or refuses to take the action:	
×	
The IEP team has determined that Harry requires the services listed on the attached IEP.	<u> </u>
	T
1	

Figure 3-256 Notice of IEP Reevaluation Screen Statements Section Populated

4. The statement associated with the key-word stem selected will appear in the textbox. Use I to spellcheck. Use ♥ for more space.



Tip: When entering, editing or viewing information in a textbox, grab difference in the bottom right corner, to resize the box. The box can be adjusted larger to view more of the information or smaller to provide more room on the screen.

- 5. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 6. Enter user (initials) to signify that Procedural Safeguards were provided to parent.
- 7. Click next to **This document was prepared by:.** The Find: Staff screen displays.

Find Close Sele	ct Clear Selection		
Find: Staff			
Find Criteria			۵
Last Name	First Name	Middle Name	
Smith	С		
Search Results			
Find Result			۵
Line Last Name	First Name	м	iddle Name
1 Smith	Christine		
2 Smith	Jk		

Figure 3-257 Find: Staff Screen

- 8. Enter all or part of staff Last Name, First Name.
- 9. Click **Find** or press ENTER. Search Results displays a list of matching criteria.

10. Click line of staff name. Line highlights.

- 11. Click again or click set. Find: Staff screen closes and staff name displays.
- 12. Click Save .

GENAZ 23 – NOTICE OF TRANSFER

The Notice of Transfer is located in the Transfer Process. The Notice of Transfer in the Transfer Process is intended for special education students who have transferred from another district.



The Notice of Transfer contains one tab:

• Prior Written Notice

Prior Written Notice	
Student Name: Akins, Shawn E. Document: GENAZ 23 Description: Notice of Transfer Prior Written Notice	
Document Name	Document Date
Notice of Transfer	
Description of Actions Proposed or Refused	Q
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Identification	
The evaluation team has received a referral for a possible comprehensive evaluation of your child.	
Statements	0
Explanation of why the district proposes or refuses to take the action:	
Description of each evaluation procedure, assessment, record or report used as a basis for the proposed or	refused action:
	2
Description of other options considered and why those options were rejected	411
	at .
Description of the factors relevant to the actions proposed or refused are:	
×	
	.d
Implementation of Decision	0
This desistant is proceed to be implemented on [75]	
Departs of a student and the student have protection under monordural coferenced in accordance with Endered	I not Contact the
school psychologist or call the Special Education office if you want a copy of the procedural safeguards.	Law. Contact the
Procedural Safeguards provided to parent(s)	
(initials)	
This document was prepared by:	
*	
Casa Mananar Dhone	
Case manager critine	

Figure 3-258 Notice of Transfer Screen

To create a Notice of Transfer document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

Explanation of why the district prop	poses or refuses to take the action:
~	
-fbs	
Implement current IEP as written	
Information may require modification	
Reevaluation is needed	

Figure 3-259 Notice of Transfer Screen Statements Section Drop-down

- 2. Click on the drop-down box located above the textbox.
- 3. Select the desired key-word stem in the drop-down list.

Explanation of why the district proposes or refuses to take the action:	
🕎 📀	
The available IEP is current and can be implemented as written.	×

Figure 3-260 Notice of Transfer Screen Statements Section Completed

- The statement associated with the key-word stem selected will appear in the textbox. Use [™] to spellcheck. Use [●] for more space.
- 5. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 6. Enter user (initials) to signify that Procedural Safeguards were provided to parent.
- 7. Click next to **This document was prepared by:.** The Find: Staff screen displays.
- 8. Enter all or part of staff Last Name, First Name.
- 9. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 10. Click line of staff name. Line highlights.
- 11. Click again or click seet. Find: Staff screen closes and staff name displays.

Find Close Select	Clear Selectio	on			
Find: Staff					
Find Criteria					۵
Last Name	First Nar	me	Middle Name		
Smith	С				
Search Results					
Find Result					٢
Line Last Name	Fi	irst Name		Middle Name	
1 Smith	Ch	hristine			
2 Smith	Jk	(

12. Click Save

Figure 3-261 Find: Staff Screen

GENAZ 24 – TRANSFER IEP

The Transfer IEP document is located in the Transfer Process.

The Transfer IEP allows the user to determine which process to transfer the student to and creates an IEP document within Synergy SE. The Annual Review and Reevaluation Dates as well as the student's disability are entered into this document. Those fields are populated into the student's Synergy SE student record.

The Transfer IEP contains six tabs:

- Cover
- Goals
- Services
- LRE
- Medicaid
- Attachments
- Cover Tab

Transfer IEP						
Student Name: Abbatacola, Emily	L. Student ID: 501001608	Gender: Female Birth D	ate: 04/29/1999 Grade: 07	IEP Status: Draft	Transfer IEP	
Cover Goals Services LRE M	edicaid Attachments					
Dates						0
Re-evaluation Due Date IEP	Date IEP R 25/2012 📅 05/24	Review Due Date 4/2013 📴	Process Name Transfer		Display "I	DRAFT
Interpreter Needed						
Eligibility						()
Primary Eligibility						
Secondary Eligibility						
Autism	Developmental Delay	Emotion	al Disability			
Hearing Impaired	Language Impairment	MD/Sev	ere Sensory Impairment			
Mild Intellectual Disability	Moderate Intellectual E	Disability 🛄 Multiple	Disabilities			
Orthopedic Impairment	Other Health Impairme	nt Prescho	ol Severe Delay			
Severe Intellectual Disability	Specific Learning Disa	bility Speech	Disability			
Speech Language Impairment	Traumatic Brain Injury	🛄 Visual Ir	npairment			
Program Recommended						0
Program Recommended						
IEP Team Members						٢
Student Consulted/Present						
<u> </u>						
Refresh Participants from Team						
Parent Participants						6
Line Parent Name	Relation Type	Educational Rights	Contact Allowe	d	Consulted/Present	
Abbatacola, David	Father	Yes	Yes		*	
2 Abbatacola, Jill	Mother	Yes	Yes		*	
Staff Participants						Add 🙆
X Line Staff Name	Role	4	Consulted/Present	e Ind	licate Parent Agreen	nent 🍦
□ 1 <u>User, Admin</u> ← Case	Manager	~	~			
Other Participants						Add 🚳
🗙 Line Name 🔤 Title	e 🔤 Role 🔤	Consulted/Pre:	sent 🔤	Indicate Pa	rent Agreement	¢

Figure 3-262 Transfer IEP Screen Cover Tab

To create a Transfer IEP document:

COVER TAB

1. Insert the **Re-evaluation Due Date**, the **IEP Date**, and the **IEP Review Date** (MMDDYY) or click and select date.

- 2. Checking **Display "DRAFT**" will display the word DRAFT on all pages of the IEP. Make sure to uncheck this box prior to finalizing or it will display on the finalized IEP.
- 3. Click Add to Document effort to schedule the IEP Meeting. A new row displays.
- 4. Enter **Date** (MMDDYY) or click 🗐 and select date.
- 5. Type the **Description** of the effort into the textbox provided.
- 6. If needed, check a on the line of the documentation record to remove. The row is removed.
- 7. Indicate if **Interpreter Needed** by selecting **Yes** or **No** from the drop-down provided. If yes is selected, a staff member with the Role of Interpreter must be added.
- 8. Select the **Primary Eligibility** indicated on the out of district IEP from drop down box. Check all applicable **Secondary Eligibilities**.
- 9. Enter the **Program Recommended** for this student.
- 10. Click **Student Consulted/Present** drop-down and select the appropriate option. Selecting either option will place the student in the Participants section of the printable document. If the field is left blank the student will not be included in the Participants list.
- 11. On the Parent Participants section, click the **Consulted/Present** drop-down and select the appropriate option. The Parent Participants section will display the Parent/Guardians for the student as they appear in Synergy SIS (or other district SIS). Selecting from the Consulted/Present dropdown will place the specific parent in the Participants section of the printable document. If the drop-down is left blank the parent will not be included in the Participants list.

The Staff Participants section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List.

Staff Names displaying will be included as either consulted or present, however changes may be made including additional staff names added.

- 12. If the staff members **Role** is different for this IEP meeting, click the drop-down and make the appropriate selection.
- 13. Click the **Consulted/Present** drop-down and select the appropriate option, for each staff participant. If the field is left blank, the staff member will not appear in the Participant Section of the Printable IEP.

Change current staff participant names:

Staff Participants		Add 🔇
X Line Staff Name	Role	\ominus Consulted/Present 🖨
Green, Ton	Case Carrier	×
2 User, Admin (+	Special Ed Teacher 🛛 👻	×

Figure 3-263 Transfer IEP Screen Cover Tab Staff Section Change/Add

- 14. Click next to the **Staff Name** to change. The Find: Staff screen displays.
- 15. Enter all or part of staff Last Name, First Name.
- 16. Click **Find** or press ENTER. Search Results displays a list of matching criteria.
- 17. Click line of staff name. Line highlights.

18. Click again or click <u>seet</u>. Find: Staff screen closes and staff name displays.

19. Click the Role dropdown and select the staff role.

Add	staff	names:
-----	-------	--------

Find Close Select	Clear Sele	ection		
Find: Staff				
Find Criteria				٩
Last Name	First N	lame	Middle Name	
Smith	С			
Search Results				
Find Result				٨
Line Last Name		First Name		Middle Name
1 Smith		Christine		
2 Smith		Jk		

Figure 3-264 Find: Staff Screen

- 20. Click Add on the Staff Participants bar. A new line is added to the grid.
- 21. Repeat the procedure above.
- 22. If needed, check 🔲 on the line of the **Staff Name** to remove. The row is removed.

The Other Participants section will allow for participant names that are not available in the Staff directory.

- 23. Click the Add button on the Other Participants bar. A new row will be added.
- 24. Enter the Name, Title and Role of the participant.
- 25. Click the **Consulted/Present** drop-down and select the appropriate option, for each participant.



Note: Staff roles of District Representative and Individual to Interpret Results are required fields. The IEP will display a validation error when finalizing if Staff Participants have not been added with those roles.

GOALS TAB

Goals added to this IEP will be available in the student's Progress Report once this IEP is finalized.

Transfer IEP			«
Student Name: Abbatacola, Emily L. stu Cover Goals Services LRE Medicaid	dent ID: 501001608 Gender: Female Birth Date: 04/29/1999 Grade: 07 IEF Attachments	9 Status: Draft Transfer IEP	
Progress Report Frequency			9
×			
1			
Grading Periods			Add 🔇
X Line View Order	Grading Period Label	Grading Period	9
1	Progress Period 3		
2	Progress Period 2		
3	Progress Period 1	P	
4	Progress Period 4	P	
			G
Category Add N	lew Blank Goal		
<u> </u>			
To add a blank goal grid, click the Add Net	w Blank Goal button.		
Goals		Add	Show Detail
X Line Category Category	iption Pre score date 🔶 Pre score	Applies To E	sy â
Move Category Up Move Category Down			

Figure 3-265 Transfer IEP Screen Goals Tab

1. Add the Grading Periods dates for Progress Reports.

Progress reports on goals will be sent home in accordance with the grading periods					
×	Line	Grading Period Label	Grading Period		
	1	1st Grading Period	09/30/2010 🔛		
	2	2nd Grading Period	11/24/2010		

Figure 3-266 Transfer IEP Screen Goals Tab Progress on Goals

- 2. Click the Add button on the grading Periods bar. A new line displays.
- 3. Label the Grading Period as desired, (1st Grading Period, 1st Grading Quarter, etc.)
- 4. Enter the date for the **Grading Periods** (MMDDYY) or click P and select date.
- 5. If needed, check on the line of the **Grading Periods** record to remove. The row is removed.

ADDING GOALS

Goals can be added to the IEP in five ways:

- New Blank Goal
- Goal Library
- Personal Goal Library
- Goal Builder
- Standard Goal Library

NEW BLANK GOAL

- 1. Select the goal Category from the drop-down box.
- 2. Click Add New Blank Goal. A new row is now added to the Goals section.

						٥
Category	Add New Blank Goal					
To add a blank goal g To add a goal from th	grid, click the Add New Blank Goal button. e Goal Library, click the Add button.					
Goals				Add	Show	/ Detail 🔇 🔇
★ Line Category ⇒	Description	Pre score date 🔶	Pre score			Applies To Esy 🖨
1 Reading		P	F		4.5	
Move Category Up	Move Category Down					

Figure 3-267 Transfer IEP Screen Goals Tab Goals Tab Add New Blank Goal

- 3. Type the goal in the **Description** textbox. Use 🖤 to spellcheck. Use 📀 for more space.
- 4. Add the **Goal Pre score date** (MMDDYY) or click IP and select date.
- 5. Type the **Pre score** information.
- If this goal will apply to ESY place a check in the Applies To ESY column. By placing a checkmark in this area, the goal will then be imported into appropriate fields the ESY Progress Report and ESY Addendum – GENAZ 505.
- 7. Repeat above directions to add additional goals.
- 8. If needed, check 🔲 on the line of the **Goal** record to remove. The row is removed.
- 9. Click on the line of the goal. The line highlights.

Goals			Add	Hide Detail 🔇
Line	Category	Description 🐺 📀	Date	
1 Reading			<u>^</u>	
			Pre-score	
			-	
		Add to Personal Goal Library		
		Short-Term Objectives/Benchmarks		Add 🔇
		X Line Description	By Date	🔶 View Order 🖨
			×	

Figure 3-268 IEP Screen Goals Tab Detail View

- 10. Click the **Show Detail** button. The detail view displays on the right.
- 11. Click the Add button on the Short-term Objectives/Benchmarks bar. A new line is added..
- 12. Enter the Short-Term Objectives/Benchmarks information in the **Description** textbox. Use ^I to spellcheck. Use ^I for more space.
- 13. Insert the **By Date**, (MMDDYY) or click and select date when the student will meet the Short-Term Objective/Benchmark.
- 14. Type a number to indicate **View Order** you would like the Short-Term Objective/Benchmark to appear.
- 15. Repeat above directions to add additional Short-Terms Objectives.
- 16. If needed, check on the line of the **Short-Terms Objective** to remove. The row is removed.
- 17. Click the Hide Detail button to close the detailed view.

GOAL LIBRARY

	6
Category Add New Blank Goal	
To add a blank goal grid, click the Add New Blank Goal button. To add a goal from the Goal Library, click the Add button.	
Goals	Add Show Detail 🐼
X Line Category 🖨 Description	Pre score date ⇒ Pre score Applies To Esy ⇒
Reading	
Move Category Up Move Category Down	

Figure 3-269 IEP Screen Goals Tab Add Goal

- 1. Click the Add button on the Goals bar. The Goal Library Search screen opens.
- 2. Click the Category drop-down and select.
- 3. Click the **Sub Category** drop-down and select.
- 4. Click the **Find** button. The goals matching the criteria selected displays.

Fin	Find Close Assign Status: Ready						
Go	Goal Library Search						
Goa	Goals						
Sele	ction Crit	eria	۵				
Cate	gory	St	ub Category Show from Goal Library Personal Only				
Read	ling	✓ R	teading - Grade 1				
Goa	1		(Q)				
Line	Category	Sub Category	Goal				
1	Reading	Reading - Grade 1	[STUDENT] will demonstrate improved knowledge of literature by identifying four organizational features of expository text when given (state conditions) scoring (state criteria) as measured quarterly (by your method of evaluation) R:01 S3 C1 PO3 Alt 1				
2	Reading	Reading - Grade 1	[STUDENT] will demonstrate improved knowledge of literature by determining which picture/icon matches a story, heard or read, when given two pictures/icons to select from scoring (state criteria) as measured quarterly (by your method of evaluation) R:01 S2 C1 PO1 Alt 3				
3	Reading	Reading - Grade 1	[STUDENT] will demonstrate improved knowledge of literature by following a 1-step direction when given tactile symbols or pictures scoring (state criteria) as measured quarterly (by your method of evaluation) R:01 S3 C2 PO1 Alt 2				
4	Reading	Reading - Grade 1	[STUDENT] will demonstrate improved knowledge of literature by demonstrating understanding that print materials (objects/partial objects, tactile symbols) are read left to right, with top to bottom progression, when given (state conditions) scoring (state criteria) as measured quarterly (by your method of evaluation) R:01 S3 C1 PO3 Alt 3				

Figure 3-270 IEP Screen Goals Tab Assign Goal

- 5. Click anywhere on the line of the appropriate goal. The line highlights.
- 6. Click the **Assign** button to add the selected goal to the student's IEP. A pop-up window displays containing the goal and stating that the goal has been added successfully to the IEP.
- 7. Click **OK.**
- 8. The Goal Library Search screen will remain open, allowing for additional goals to be added. When all goals have been added, close this window. The selected goals will populate in the IEP.
- 9. The goals are contained in editable textboxes. Edit the criteria as necessary. Use 🖾 to spellcheck. Use ◊ for more space.
- 10. Add Pre score date and Pre score in textboxes provided.
- Place a check in the Applies to ESY column checkbox, if this goal should apply to ESY. The selected goal will be imported into the ESY Progress Report and the ESY Addendum – GENAZ 505.
- 12. Click on the line of the goal. The line highlights.

Goals			Add	Hide I	Detail	0
Line Category	Description 🅎 📀	Date				
1 Reading		^				
		Pre-so	ore			
		-				
	Add to Personal Goal Library					
	Short-Term Objectives/Benchmarks			Ad	d	0
	X Line Description		By Date	🔶 View	Order	₽
		4		•		

Figure 3-271 IEP Screen Goals Tab Detail View

- 13. Click the Show Detail button. The detail view displays on the right.
- 14. Click the Add button on the Short-term Objectives/Benchmarks bar. A new line is added..
- 15. Enter the Short-Term Objectives/Benchmarks information in the **Description** textbox. Use ^I to spellcheck. Use ^I for more space.
- 16. Insert the **By Date**, (MMDDYY) or click and select date when the student will meet the Short-Term Objective/Benchmark.
- 17. Type a number to indicate **View Order** you would like the Short-Term Objective/Benchmark to appear.
- 18. Repeat above directions to add additional Short-Terms Objectives.
- 19. If needed, check on the line of the **Short-Terms Objective** to remove. The row is removed.
- 20. Click the Hide Detail button to close the detailed view.

PERSONAL GOAL LIBRARY

Before adding a goal from your Personal Goal Library you must first add goals to your library. Goals are added to your Library after you have added commonly used goals to you IEP.

- 1. To add goals to your Personal Goal Library, open an IEP you have already completed with the desired goals:
- 2. Click on the line of the goal. The row highlights.
- 3. Click the Show Detail button. The detail view displays on the right.
- 4. Click Add to Personal Goal Library . The Goal Personal Library window opens allowing you to edit the goal selected. State Standards and Benchmarks may be added in this section to allow for easier Goal adding.

Goals					H	ide Detail	
Line Category	State Standard Number						
1 Speech - Articulation							
	Description 🕎 🥥		Da	ate			
	Henry will demonstrate improved intelligibility of speech by producing	▲ 0 ²	/22/2012 🕎				
	consonant blends to reduce the occurrence of the phonolo	gical process	= Pr	e-score			
	and no model with a score of 80% accuracy as measured	by quarterly	- 60	0%			
	Add to Personal Goal Library						
	Short-Term Objectives/Benchmarks					Add	0
	X Line Description			By Date	۱ 🖨	/iew Orde	
	270% ■ 1			03/22/2012	1	I	

Figure 3-272 IEP Screen Goals Tab Add to Personal Goal Library

5. Click Save

Once you have added goals to your Personal Goal Library they are available for use.

			٥		
Category Add New Blank Goal					
To add a blank goal grid, click the Add New Blank Goal button. To add a goal from the Goal Library, click the Add button.					
Goals Add Show Detail 🤇					
X Line Category ⇔ Description	Pre score date ⇔ Pre score		Applies To Esy 🖨		
Reading	Image: A start of the start	A T			
Move Category Up Move Category Down					

Figure 3-273 IEP Screen Goals Tab Personal Goal Library

- 6. Click the **Add** button on the Goals bar. The Goal Library Search screen opens.
- 7. Click the **Category** drop-down list and select.

	-					
Find Close Assign	Status: Ready 🕢					
Goal Library Search						
Goals						
Selection Criteria	۵					
Category Sub (Category Show from Goal Library Personal Only					
Speech - Articulatior 💙						
Goal						
Line Category Sub Category	Goal					
1 Speech - Articulation	[Student] will demonstrate improved intelligibility of speech by producing consonant+vowel+consonant (CVC) combinations in simple sentences when given a stimulus statement with no model from the SLP with a score of 80% accuracy as measured by quarterly teacher created assessment. AZ Academic Standards LS-F 1,2,3.					
Figure 3-274 IEP Screen Goals Tab Goal Library Personal Only						
Windows Internet Explorer						
Goal [STUDENT] will demonstrate increased numerical operations when given a combination of coins and bills to determine if there is ?enough money? or ?not enough money? to make the purchase when given (state condition) scoring (state criteria) as measured quarterly by (your method of evaluation) M:9-12 51 C2 PO2 Alt 3 has been successfully assigned to IEP.						
OK						

Figure 3-275 IEP Screen Goals Tab Goal Added Successfully

- 8. Click on the Show from Goal Library Personal Only checkbox.
- 9. Click **Find**. The goals matching the criteria selected displays
- 10. Select the appropriate goal by highlighting the goal statement anywhere in the row.
- 11. Click Assign to add the selected goal to the student's IEP.

A pop-up window displays containing the goal stating that the goal has been added successfully to the IEP.

- 12. Click **OK.** The Goal Library Search Window will remain open allowing for additional goals to be added.
- 13. When all goals have been added, close this window. The selected goals will populate in the IEP.
- 14. The goals are contained in editable textboxes. Edit the criteria as necessary.
- 15. Add Pre score date and Pre score in textboxes provided.
- Place a check in the Applies to ESY column if this goal should apply to ESY. The selected goal will be imported into the ESY Progress Report and the ESY Addendum – GENAZ 505.
- 17. Click on the line of the goal. The line highlights.
| Goals | | | | Add | Hide [| Detail | 0 |
|---------------|----------------------------------|---|----------|---------|--------|--------|---|
| Line Category | Description 🅎 📀 | D | ate | | | | |
| 1 Reading | | - | | | | | |
| | | P | re-score | | | | |
| | | - | | | | | |
| | Add to Personal Goal Library | | | | | | |
| | Short-Term Objectives/Benchmarks | | | | Ad | d (| 0 |
| | X Line Description | | | By Date | 🔶 View | Order | |
| | | | * | | | | |

Figure 3-276 IEP Screen Goals Tab Detailed View

- 18. Click the Show Detail button. The detail view displays on the right.
- 19. Click the Add button on the Short-term Objectives/Benchmarks bar. A new line is added..
- 20. Enter the Short-Term Objectives/Benchmarks information in the **Description** textbox. Use [™] to spellcheck. Use [◇] for more space.
- 21. Insert the **By Date**, (MMDDYY) or click and select date, of when the student will meet the Short-Term Objective/Benchmark.
- 22. Type a number to indicate **View Order** you would like the Short-Term Objective/Benchmark to appear.
- 23. Repeat above directions to add additional Short-Terms Objectives.
- 24. If needed, check on the line of the **Short-Terms Objective** to remove. The row is removed.
- 25. Click the Hide Detail button to close the detailed view.

GOAL BUILDER

- 1. Select the goal **Category** using the available categories in the drop-down box.
- 2. Type in the **Timeframe** for the goal.
- 3. Type in the **Condition** for the goal.
- 4. Type in the **Behavior** for the goal.
- 5. Type in the **Criterion.**

Category	-	Add New Goal					
limetrame 🗒 🔾		Conditions 🗑 🔾		Behavior 🗑 🧿		Criterion.	
By 6 months from now,	-	given time to practice their skills	*	Craig's staff will be able to write	-	to the satisfaction of District and	×
	-1		1	measuracie goars	-1	ADE orandards 100 % of the time.	-1

Figure 3-277 IEP Screen Goals Tab Goal Builder

6. Click the **Add New Goal** button. The goal builder automatically combines the entered information into a complete goal in the Goals Section.

G	ioa	ls	Add Sh	ow Detail 🔕				
×	<		Category 🖨	Description	Baseline Date 🔅	Baseline		Applies To Esy ©
r	-		My New Area of Need	OBY 6 months from now, given time to practice their skills, Craig's staff will be able to write measurable goals, to the satisfaction of District and ADE Standards 100 % of the time.		0	3	

Figure 3-278 IEP Screen Goals Tab Goal Builder Completed

- 7. Add **Baseline Date** (MMDDYY) or click P and select date.
- 8. Enter **Baseline** in the textbox provided.

- Place a check in the Applies to ESY column if this goal should apply to ESY. The selected goal will be imported into the ESY Progress Report and the ESY Addendum – GENAZ 505.
- 10. If needed, check 🔲 on the line of the **Goal** to remove. The row is removed.
- 11. Click on the line of the goal. The line highlights.

Goals			Add	Hide D	etail 🔇
Line Category	Description 🎬 📀	Date			
1 Reading		*			
		Pre-sco	re		
		-			
	Add to Personal Goal Library				
	Short-Term Objectives/Benchmarks			Add	1 🔇
	X Line Description		By Date	😂 View	Order 🍣
		*		F	

Figure 3-279 IEP Screen Goals Tab Detailed View

- 12. Click the Show Detail button. The detail view displays on the right.
- 13. Click the Add button on the Short-term Objectives/Benchmarks bar. A new line is added..
- 14. Enter the Short-Term Objectives/Benchmarks information in the **Description** textbox. Use [™] to spellcheck. Use [◇] for more space.
- 15. Insert the **By Date**, (MMDDYY) or click and select date, of when the student will meet the Short-Term Objective/Benchmark.
- 16. Type a number to indicate **View Order** you would like the Short-Term Objective/Benchmark to appear.
- 17. Repeat above directions to add additional Short-Terms Objectives.
- 18. If needed, check is on the line of the **Short-Terms Objective** to remove. The row is removed.
- 19. Click the **Hide Detail** button to close the detailed view.

Add a goal from the Standa	rd Goal Library: Select Standard Type, Grade, and	Need Area and click the Add Standard Goal Button	٥
Standard Type	Grade Need Area	Add Standard Goal	
State Standards	💙 03 💙 Reading	· · · · · · · · · · · · · · · · · · ·	
Goals			Show Detail 🔕
🗙 Line Category 👙	State Standard Number 🔤 Description	Pre score date 👌 Pre score 🔶	Applies To Esy 🛛 😂
Move Category Up M	ove Category Down		

Figure 3-280 IEP Screen Goals Tab Standard Goal Library

STANDARD GOAL LIBRARY

- 1. From the Standard Type drop-down select the standard area for the goal.
- 2. Select the **Grade** level of the standard to add using the drop-down.
- 3. Select the **Need Area** from the drop-down.
- 4. Click the Add Standard Goal button. The Standard window will open.

5. Click on next to the desired standard. The performance objectives display below and turns to .



- 6. Click on the desired performance objective.
- 7. Check the goals desired in the Add column.
- 8. Click Add Goals.

View	Order		
Code	•	Standard Description 🕎 📀	
1778		Compare and order positive fractions, decimals, and percents.	*
Add	J Goals		•
Line	Description		Add
1	[Student] will demonstrate team work skills, by co displaying conduct befitting a citizen of the class marks forschool weeks, as measured by te daily.	ompleting school projects on time, with integrity, while , given a teacher directed activity, scoring pass sacher observation and a [Student] behavior check sheet,	
2	kdjfsdkfjsal;dkfj;sldkfj		
3	[Student] will demonstrate technological literacy, (e.g. microfiche headings and numbering; headii electronic media, library, interlibrary catalog data pass marks forschool weeks, as measured sheet, daily.	by using organizational features of electronic information ngs for accessing nested information in hypertext media, a bases), given a teacher directed activity, scoring b by teacher observation and a [Student] behavior check	

Figure 3-282 IEP Screen Goals Tab Add Goals

- A pop-up message displays for each added goal letting you know that the goal(s) has/have been successfully assigned to the IEP. Click the OK button to close the message.
- 10. Close the **Standard** screen. The goals have now been added and are ready for editing.

Ad	d a g	al from the Sta	ndard Goal Library: Select Sta	ndard Type, Grade, and Need Area and click the Add Standard Goal Button			6
Sta	ndar	Туре	Grade 1	leed Area Add Standard Goal			
			¥ 10 ¥	×			
Go	als						Show Detail 🔇
×	Lin	Category 🌲	State Standard Number 🛛 🔶	Description	Pre score date 🖨	Pre score d 😓	Applies To Esy 🍦
		Math	1778	Adam will demonstrate team work skills, by completing school projects on time, with integrity, while displaying conduct betiting a citizen of the class, given a teacher directed activity, scoring pass marks for school weeks, as measured by teacher observation and a Adam -	P		
		Math	1778	Adam will demonstrate technological literacy, by using organizational features of electronic information (e.g. micrófiche headings and numbering: headings for accessing nested information in hypertext media, electronic media, library, interlibrary catalog data bases), given a	P		

Figure 3-283 IEP Screen Goals Tab Goals Added

Goals will automatically be sorted by Category. The order of categories can be changed.

11. Click the line number of a goal. The goal highlights.

×	Line	Category	Description	
-	1	Alternate Academic Stds - Math	Harry will demonstrate increased numerical operations when given a combination of coins and bills to determine if there is ?enough money? or ?not enough money? to make the purchase when given (state condition) scoring (state criteria) as measured quarterly by (your	*
	2	Alternate Academic Stds - Math	Harry will demonstrate increased data analysis with appropriate graphical representation by using labels, titles, and organized data provided to construct a graph scoring (state criteria) as measured quarterly (by your method of evaluation) M:9-12 S2 C1 PO2 Alt 2	4
	3	Alternate Academic Stds - Math	Harry will demonstrate increased data analysis with appropriate graphical representation by using labels, titles, and organized data provided to construct a graph scoring (state criteria) as measured quarterly (by your method of evaluation) M:9-12 S2 C1 PO2 Alt 2	4
	4	Speech - Voice	Harry will demonstrate an improved awareness of vocal quality by generating a list of substitute (nonvocal) behaviors to use in given situation when given a stimulus question and situational context by the teacher with a score of () accuracy as measured by a	4
	5	Speech - Articulation	Harry will demonstrate improved intelligibility of speech by producing understandable utterances containing no more than ()% unintelligible words when given a trained listener and stimulus pictures/objects related to a structured classroom activity with a score	•
M	fove C	ategory Up Move Category Do	unintelligible words when given a trained listener and stimulus pictures/objects related to a structured classroom activity with a score	

Figure 3-284 IEP Screen Goals Tab Sort

- 12. Click **Move Category Up** or **Move Category Down** to move the goal to the top or bottom of the Goals list.
- 13. Click Save .

SERVICES TAB

Services will display the type, location and duration of special education services provided to the student. If the service is a Medicaid Billable service it will calculate the service hours.



Figure 3-285 Transfer IEP Screen Services Tab

- 1. Click the Add button to add a new special education service. A new row displays.
- 2. Click the Provider Role drop-down box and select the appropriate provider.
- 3. Click the **Location** drop-down box and select the appropriate location.
- 4. Enter the **Amount of Time** using quarter hour increments in the **Hours** textbox. (i.e., 2.25, 5.50, 3.75, etc.)
- 5. Select the correct Frequency Unit using the options in the frequency drop-down box.
- 6. Enter **Date of Initiation On/About** (MMDDYY) or click and select date.
- 7. Enter **Duration of Service** (MMDDYY) or click and select date. If left blank, upon saving, the Duration of Service automatically populates the date, calculated for the next IEP (1 year minus 1 day).

S	eci	al	Educatio	n Services										
			View 👝	Specially Designed Instruction		Drovidor Dolo		Location		Am	ount of Time		Date of	
		le	Order 🗢			Provider Role		Location		Hours 🔶	Frequency Unit	\bigcirc	On/About	
		1		Advocacy Skills	-	Special Ed Te	~	Special Ed Class	~	2.50	per week	*	07/06/2012	P
	Figure 2 200 /FD Sarage Services Tab Durations (Sarajas													

Figure 3-286 IEP Screen Services Tab Durationof Service

If the service added is Medicaid billable the Medicaid Hours Per Year will automatically calculate and be entered into the Medicaid Column.

- 8. Click line of Specially Designed Instruction. Line highlights.
- 9. Click again or click Show Detail. The detailed view displays on right.
- 10. Select the **Detail Description Code** using the drop-down statement box.
- 11. Type in the **Detail Description**. Use 🕎 to spellcheck. Use 🛇 for more space.

Spe	cial Education Services						Add	Hide Detail 🔕
Line	Specially Designed Instruction	Provider Role	Location		Hours	Frequency	Unit	
1	Functional Communication (SLI)	Special Ed Te 💙	Special Ed C	Classroom	2.50	per week	*	
		Date of Initiation 07/06/2012	On/About D	uration of S 7/05/2013	ervice	~		

Figure 3-287 IEP Screen Services Tab Specifically Designed Instruction

12. Click **Hide Detail** to close the detailed view.

Related Services

- 13. Click the drop-down in the Related Service box and complete the statement.
- 14. If the student is not in need of Related Services, move on to the Transportation section.

Rel	lat	te d	Se	rvic	е													
The	The team considered the need for related services and determined that the student																	
is ir	s in need of related services.																	
Re	la	te d	Se	ervio	es												A	dd 🛛 Show Detail 🤅
×		Lin	e	Vie Ore	ew ier	₽	Relat Servio	ed es	¢	Provider Role		Location 🔶	Amo Hours ⊜	unt of Time Frequency Unit	Date of Initiation On/About	Duration of Service		Medicaid Hours Per Year

Figure 3-288 IEP Screen Services Tab Related Service Statement

- 15. If the student requires Related Services, click Add on the Related Services bar.
- 16. Click the Related Service drop-down and select.

17. Click the Provider Role drop-down box and select.



Figure 3-289 IEP Screen Services Tab Related Service

- 18. Click the Location drop-down and select.
- 19. Enter the **Amount of Time** using quarter hour increments in the **Hours** textbox. (i.e., 2.25, 5.50, 3.75, etc.)
- 20. Select the correct Frequency Unit using the options in the frequency drop-down box.
- 21. Enter **Date of Initiation On/About** (MMDDYY) or click IP and select date.
- 22. Enter **Duration of Service** (MMDDYY) or click and select date. If left blank, upon saving, the Duration of Service automatically populates the date, calculated for the next IEP (1 year minus 1 day). Enter the Amount of Time using quarter hour increments in the Hours textbox. (i.e., 2.25, 5.50, 3.75, etc.)

If the related service is Medicaid billable, the Medicaid Hours Per Year will automatically populate, based upon the Amount of Time selected and the Duration of Service.

Amo	ount of Time	of Time Date of		Duration of		Medicaid	
Hours 🔶	Frequency Unit	⊜	On/About		Service		Year
0.50	per day	~	07/05/2012	P	07/04/2013	P	128.00

Figure 3-290 IEP Screen Services Tab Medicaid Hours Per Year

23. Click the Services Justifications drop-down and select. The statement will populate the textbox below. Custom statements may be added directly to the textbox, also.



Figure 3-291 IEP Screen Services Tab Services Justifications

- 24. After reading the text in the transportation section, answer **Yes** or **No** to each statement using the drop-downs. If **No** is selected, continue to the Services Tab. If **Yes** is selected to either statement, additional fields display.
- 25. In the second section, select Yes or No from The student requires... drop-down.



Figure 3-292 IEP Screen Services Tab Transportation Section

- 26. Check if the **Student requires transportation in an adapted vehicle**. If selected, either type in a **Description** of the necessary vehicle adaptations or select the appropriate statements from drop-down box. As many adaptations may be selected as needed using the drop-down statements.
- 27. Check if the **Student has behavioral problems and must be transported separately from non-disabled students**. If selected, either type in a **Description** of the behavioral concerns or select the appropriate statements from drop-down box. As many behavioral concerns may be selected as needed using the drop-down statements.

These are Medicaid Billable items that, if selected, will reflect on the Consent to Claim Medicaid Reimbursement that prints with the IEP.

LRE TAB

(Least Restrictive Environment)

∀Transfer IEP	(**
Student Name: Abbatacola, Emily L. Student ID: 601001608 Gender: Female Birth Date: 04/29/1999 Grade: 07 IEP : Cover Goals Services LRE Medicaid Attachments	Status: Draft Transfer IEP
Check box of educational options selected for primary placement and write a rationale for selected option. The	following options were selected:
Elementary and Secondary	Q
	×
Rationale for LRE selection:	Q
v	
a. Progress in the general curriculum is impacted by the disability? 🕎 🛇	
	.11
Are services to be provided at the neighborhood school?	
b. Potential harmful effects of the placement: 🕎 🛇	
E	io opicomento 🖾 🔿
C. Explain to what extent the student will not participate with non-disabled peers in academic and non-academ	ic environments 😰 🔾

Figure 3-293 Transfer IEP Screen LRE Tab

PRESCHOOL STUDENTS

If the student is in grade Preschool, the Least Restrictive Environment can be selected for both preschool services and elementary services.

1. Select the appropriate LRE statement from the **Pre School** drop-down list.

Pre School	
	~
Home at least 360 minutes per week.	
Inside Regular Early Childhood Program 40-79% of the time.	
Inside Regular Early Childhood Program at least 80% of the time.	
Inside Regular Early Childhood Program less than 40% of the time.	
Driveta School placament aprolled by parant/c)	_

Figure 3-294 IEP Screen LRE Tab Pre School Statement Pre School Drop-down

2. Select the appropriate LRE statement from the **Elementary and Secondary** drop-down list.

Elementary and Secondary	
	~
Correctional Facilities with code A.	
Correctional Facilities with code B.	
Correctional Facilities with code C.	
Homebased/homebound/hospital program.	
Inside Regular Class 80% or more of the day	

Figure 3-295 IEP Screen LRE Tab Pre School Statement Elementary and Secondary Drop-down

ELEMENTARY AND SECONDARY STUDENTS

Elementary and Secondary				
	~			
Correctional Facilities with code A.				
Correctional Facilities with code B.				
Correctional Facilities with code C.				
Homebased/homebound/hospital program.				
Inside Regular Class 80% or more of the day				

Figure 3-296 IEP Screen LRE Tab Elementary and Secondary Statement Drop-down

- 3. Select the appropriate LRE statement from the **Elementary and Secondary** drop-down list.
- 4. Select the appropriate statement from the drop-down list under **Rationale for LRE selection:.** This will populate the textbox below which can be edited.

Rationale for LRE selection	deficits in math problem solving			
	deficits in attention			
a. Progress in the general (deficits in classroom behavior	y? 🕎 🛇		
	deficits in compliance	<u> </u>		
	deficits in emotional factors			
	deficits in following directions			

Figure 3-297 IEP Screen LRE Tab A.

5. Select if the services will be provided at the student home school or not using the dropdown statement box. If **No** is selected, an additional box displays asking for an explanation of why.

Potential harmful effects of the placement

6. Select the appropriate effect from the drop-down list. This will populate the textbox below which can be edited.



Figure 3-298 IEP Screen LRE Tab B.

7. Select the extent the student will not participate from the drop-down list. This will populate the textbox below which can be edited.

×	
c. Explain to what extent the student will not participate with non-disabled peers in academic and no	on-academic environments 🕎 🔇
A	
Ψ	
Figure 3-299 IEP Screen LRE Tab C.	

8. Click Save

MEDICAID TAB

The Medical section provides a list of items pertaining to services provided by Health Assistants.

Transfer IEP	
Student Name: Abbatacola, Emily L. Student ID: 501001608 Gender: Female Birth Date: 04/29/1999 Grade: 07 IEP Status: Draft Transfer IEP	
Cover Goals Services LRE Medicaid Attachments	
Medicaid DSC Health Related Services	Ģ
Complete all areas as needed	
(includes all Health Aides assisting students that have Health Related Needs stated on the IEP. One-on-one and/or extensive individualized aide service must also be thoroughly described and listed as a Related or Supplemental Service)	ðS
Assistance with Personal Care/Activities of Daily Living	G
A health aide will assist with Student's ADL needs, including those listed below, for for the duration of the IEP.	
Eating/Feeding	
li.	
Grooming:	
b.	
Tressing .	
10. 	
Use of Assistive Devices: Reference to the need for assistive devices and type of items MUST be included in Present Level statement and/or Goals	
mo.	
a	
Mohiltor	
intointy.	
0 1	
- 10 - 10	
Toileting:	
×	
ib.	
Transfers:	
2	
Posttoning:	
× ·	

Figure 3-300 Transfer IEP Screen Medicaid Tab

- 9. Check the appropriate boxes and enter any pertinent information in the textboxes provided. Use 🖾 to spellcheck. Use 🛇 for more space.
- 10. Click Save

If any Personal Care/ADL Services have been added to the student's Services Tab they will reflect in this section.



Figure 3-302 IEP Screen Medical Tab Personal ADL Services Populated.

ATTACHMENTS TAB

The Attachments tab allows for the attachment of documents to the MET Report (such as Compuscore printouts of testing, supporting documentation from service providers. etc.) Documents included here will print at the back of the MET Report as a single document, but will not have continuous page numbers or headings.



Figure 3-303 Transfer IEP Screen Attachments Tab

- 1. Click the Add button to add an attachment. A new window opens.
- Click the Browse button and select the file you wish to upload.

Attach document						
Steps To Upload Image:						
1) Click Browse and select the file you wish to upload						
2) Click Upload						
Browse						
Upload						

Figure 3-304 Attach Document Screen

3. Click Upload.

The name of the document displays in the **Comment** column. The type of document, Word or PDF, displays in the **Document** column.

We	Word Document Attachments						
×	Line Print Order	Comment	Document				
	1 1	MED CERT					

Figure 3-305 IEP Screen Attachments Tab Attachments List

4. The Print Order is the order the document will be printed following the MET report. This may be changed by typing in a different order.



Note: Attachments must be in Word or PDF format.

FINALIZE THE TRANSFER IEP

Caution: To guard against documents moving to Historical Docs before their time, only the student's Case Carrier should Finalize the IEP, unless the school district has designated another user to be in charge of finalizing.

When the IEP is finalized, all existing documents, including a copy of the IEP, will be sent to Historical Docs. The student will be moved to the next appropriate process. The next process is usually the Annual Review, unless the student's next Triennial Reevaluation date is due in less than 6 months, in which case they would be moved to the Reeval process.

1. Click the **Finalize** button in the Action Bar of the document.

Menu 🔻 🍏	Save	Undo	Delete	Validate This IEP	Print Preview		Finalize	Status: Ready 😂 📴
				Figur	e 3-306 IEP Fi	naliz	e Buttor	1

If the Validation process has not yet been completed, it will be forced to run now. Once the document has been successfully validated, the Finalize process will begin.

If any active documents for this student HAVE NOT been finalized the Process Move Errors window displays.

VProcess Move Errors								
Please resolve all errors listed below to proceed with the process move.								
General Errors				٨				
Line Error Message	•							
Document Errors				٨				
Line Document ID	Document Name	Error Message	Delete	Finalize				
1 GENAZ 03	Parent Input	All process documents must be finalized or deleted	×	0				
2 GENAZ 01 Referral All process documents must be finalized or deleted X 😁								
Refresh Error List								

Figure 3-307 IEP Process Move Errors List

Active documents must be either finalized or deleted before advancing through the finalizing process.

- 2. To finalize, click the **yellow icon** associated with the document. The document will open allowing it to be finalized.
- 3. To delete, click on the "X" in the Delete column. The document will be deleted. The Delete option is a district security option and some users may not have access to the delete option.
- 4. Once all documents have been deleted or finalized, click Referesh Error List

5. When the list displays no more **Document Errors** the window can be closed.

Please resolve all errors li	Please resolve all errors listed below to proceed with the process move.							
General Errors				٨				
Line Error Message								
Document Errors				۵				
Line Document ID	Document Name	Error Message	Delete	Finalize				
Referesh Error List								

Figure 3-308 IEP Process Move Errors List Cleared

6. Click Finalize again from the action bar in the IEP.

Prior to the completion of the Finalize process a window prompt displays confirming the Finalization of the IEP.

7. Type **Yes** in the textbox provided.

Confirm making IEP Finalized
You are finalizing this IEP. This means that all participants have signed off on this IEP. You will not be able to undo this action once it is complete. Any changes to goals or services will be handled through the Addendum process. If you are sure you want to make this IEP current, type the word YES in the space provided below, and then click the Continue button below.
Confirm Current
Continue Cancel

Figure 3-309 IEP Confirm IEP FInalize Message

- 8. Click **Continue.** A printable version of the IEP will display.
- 9. Close or print the finalized IEP.

The following events will have occurred:

The student will have been moved to the next appropriate process, most likely the Annual Review process.

The finalized documents are available in Historical Docs with a working copy of the IEP available (yellow icon).

The Progress Report has been created containing the student's goals from the finalized IEP.

The Reevaluation Date and Annual Review Date have been updated and appear in the date columns.

GENAZ 25 – NOTICE OF REFERRAL (PRESCHOOL)

The Notice of Referral (Preschool) is located in the Preschool Process.



Note: The Notice of Referral (Preschool) has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Referral (Preschool) contains one tab:

• Prior Written Notice

Prior Written Notice	
Student Name: Akins, Shawn E. Document: GENAZ 25 Description: Notice of Referral Prior Written Notice	
Document Name	Document Date
Notice of Referral	1 6
Description of Actions Proposed or Refused	9
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: Identification	
The evaluation team has received a referral for a possible comprehensive evaluation of your child.	
Statements	0
Explanation of why the district proposes or refuses to take the action:	
Description of each evaluation procedure, assessment, record or report used as a basis for the proposed or re	etused action.
ET 0.	
	_
	.4
Description of other options considered and why those options were rejected:	
	4
Description of the factors relevant to the actions proposed or refused are:	
Description of the lactor's fellerant to the actions proposed of fellosed are.	
<u>×</u>	
	.tt.
Implementation of Decision	0
This decision is proposed to be implemented on	
Parents of a student and the student have protection under procedural safeguards in accordance with Federal L	aw. Contact the
school psychologist or call the Special Education office if you want a copy of the procedural safeguards.	
Procedural Safeguards provided to parent(s)	
(initials)	
This document was prepared by:	
*	
Admin User	
Case Manager Case Manager Phone	
ĽM	

Figure 3-310 Notice of Referral (Preschool) Screen

To create a Notice of Referral document:

1. Enter the Document Date (MMDDYY) or click and select date. This should reflect the date the document was created.

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

2. Click on the drop-down box located above the textbox.



Figure 3-311 Notice of Referral (Preschool) ScreenStatements Section Drop-down

3. Select the desired key-word stem in the drop-down list.



Figure 3-312 Notice of Referral (Preschool) ScreenStatements Section Populated

- 5. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 6. Enter user (initials) to signify that Procedural Safeguards were provided to parent.
- 7. Click next to **This document was prepared by:.** The Find: Staff screen displays.
- 8. Enter all or part of staff Last Name, First Name.
- 9. Click find or press ENTER. Search Results displays a list of matching criteria.
- 10. Click line of staff name. Line highlights.

Find Close Select Clear Selection			
Find: Staff			
Find Criteria		G	
Last Name	First Name	Middle Name	
Smith	С		
Search Results			
Find Result		G	
Line Last Name	First Name	Middle Name	
1 Smith	Christine		
2 Smith	Jk		

Figure 3-313 Find: Staff Screen

11. Click again or click seet. Find: Staff screen closes and staff name displays.

The document can be printed, validated and finalized.

GENAZ 26 – NOTICE OF EVALUATION DECISION (PRESCHOOL)

The Notice of Evaluation Decision (Preschool) is located in the Preschool Process.

The Notice of Evaluation Decision (Preschool) provides the user with two options:

- **Decision to Evaluate:** If the option to evaluate the student is selected, the document will be created and finalized and the student will remain in the Initial process.
- Decision to NOT Evaluate: If the option to NOT evaluate the student is selected, the document will be created and finalized and the student will be exited from Synergy SE. The notice and all other previously created documents will move to the student's historical documents.

(See: Documents With Unique Functionality)



Note: The Notice of Evaluation Decision (Preschool) has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Evaluation Decision (Preschool) contains one tab:

• Prior Written Notice

√Prior Written Notice	
Student Name: Sabin, Heather R. Document: GENAZ 26 Description: Not	ice of Evaluation Decision
Prior Written Notice	
Document Name	Document Date
Notice of Evaluation Decision	I 57
Decision	0
Current Decision: Evaluate	Change Decision To "Not Evaluate"
Description of Actions Proposed or Refused	Q
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT: The Multidisciplinary Evaluation Team (MET) has decided to collect additional	Evaluation data on your child.
Statements	Q
Explanation of why the district proposes or refuses to take the action:	
	.4
Description of each evolution procedure, accessment, record or report used a	as a basis for the proposed or refused action:
Description of each evaluation procedure, assessment, record of report used a	as a basis for the proposed of refused action.
	-11
Description of other options considered and why those options were rejected:	
Y	
	.H.
Description of the factors relevant to the actions proposed or refused are:	
v	
	.4
Implementation of Decision	6
This decision is proposed to be implemented on:	
Parents of a student and the student have protection under procedural safegua school psychologist or call the Special Education office if you want a copy of	ards in accordance with Federal Law. Contact the the procedural safeguards.
Procedural Safeguards provided to parent(s)	
(initials)	
This document was prepared by:	
*	
Admin User	
Case Manager Case Manager Phone	
User, Admin	

Figure 3-314 Notice of Evaluation (Preschool) Screen

To create Notice of Evaluation Decision (Preschool) document:

- 1. Enter the Document Date (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. The Notice of Evaluation opens in Evaluate mode. To change the decision click Change Decision To "Not Evaluate". Current Decision will display Not Evaluate.
- 3. The Current Decision can be changed back to Evaluate by clicking Change Decision To "Evaluate"

Based on the decision made above the document will display the appropriate text in the Statement fields and drop-down selections.

There are four statement areas for the explanations of action taken. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly into the textboxes.

4. Click on the drop-down box located above the textbox.

oses or refuses to take the action:	
	A
	-
p	poses or refuses to take the action:

Figure 3-315 Notice of Evaluation (Preschool) Screen Sentence Stem Drop-down

5. Select the desired key-word stem in the drop-down list.

Explanation of why the district proposes or refuses to take the action:	
×	
19 S	
Information reviewed by district and parent(s) does not suggest that Harry has a suspected educational disability.	4

Figure 3-316 Notice of Evaluation (Preschool) Screen Inserted Statement

- 6. The statement associated with the key-word stem selected will appear in the textbox. The statement can then be edited and spell checked if desired.
- 7. Enter the **This decision is proposed to be implemented on:** date (MMDDYY) or click and select date.
- 8. Enter (initials) to signify that the Procedural Safeguards were provided to parent.
- Click
 next to the This document was prepared by: to select the staff name. The Find: Staff screen displays.

Find Close Select Clear Selection			
Find: Staff			
Find Criteria			۵
Last Name	First Name	Middle Name	
Smith	С		
Search Results			
Find Result			۵
Line Last Name	First Name	M	liddle Name
1 Smith	Christine		
2 Smith	Jk		

Figure 3-317 Find: Staff Screen

- 10. Enter all or part of staff Last Name, First Name.
- 11. Click **Find** or press ENTER. Search Results displays a list of matching criteria.

12. Click line of staff name. Line highlights.

If the option selected on this Notice was to *NOT* Evaluate, all previously created documents for this student will move to the Historical Documents tab and the student will be removed from your

Portfolio. If the student is ever referred for another evaluation they can be pulled back into the Initial Process.

Once finalized, a Student Exit from Special Ed screen will display.

- 13. The **Exit Date** will default to the current date and can be changed using the Calendar Icon.
- 14. Select the **Exit Reason** from the statements available in the drop-down box and type in the **Exit Explanation**.
- 15. Click the **Exit from Special Ed** button. A **Cancel** button is available if you are not ready to exit the student, yet. If the cancel option is selected, the document will remain not finalized and in the *In Progress* state.

Exit Process	
You have indicated the stu special ed because they a please type in the fields b	dent is not eligible for special ed for this disability. Is the student continuing in re eligible for another disability? If you are sure you want to exit from special elow.
Exit Date Exit Rea	sonExit Explanation
07/05/2012	
Continue in Special Ed	Exit from Special Ed Cancel

Figure 3-318 Exit Process Screen Exit from Special Ed

GENAZ 27 – NOTICE OF PLACEMENT (PRESCHOOL)

The Notice of Placement (Preschool) is located in the Preschool Process.



Note: The Notice of Placement (Preschool) has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Notice of Placement (Preschool) contains one tab:

• Prior Written Notice

Prior Written Notice	e	
Student Name: Akins, Shawn E. Prior Written Notice	Document: GENAZ 27 Description: No	otice of Placement
Document Name		Document Date
Notice of Placement		
Description of Actions Proposed of	r Refused	(
DESCRIPTION OF ACTIONS PR	OPOSED OR REFUSED BY THE	DISTRICT: Identification
The evaluation team has received	a referral for a possible comprehe	ensive evaluation of your child.
Statements		(
Explanation of why the district pro-	oposes or refuses to take the action	on:
10 C		
Description of each evaluation pro	cedure, assessment, record or re	port used as a basis for the proposed or refused action:
×		
Description of all as antions areas	decad and when these antiper sure	it.
Description of other options cons	idered and why those options were	e rejected.
Description of the factors relevant	to the actions proceed as refere	-11 -
Description of the factors relevant	to the actions proposed or refuse	o are.
¥		
		ii.
Implementation of Decision		(
This decision is proposed to be in	nplemented on:	
Parents of a student and the stud school psychologist or call the Sp	ent have protection under procedur pecial Education office if you want	ral safeguards in accordance with Federal Law. Contact the a copy of the procedural safeguards.
Procedural Safeguards provided to	o parent(s)	
	(initials)	
This document was prepared by		
*		
Admin User	Care Manager Diverse	
Case manager	Case Manager Phone	

Figure 3-319 Notice of Placement (Preschool) Screen

To create a Notice of Placement document:

1. Enter the Document Date (MMDDYY) or click and select date. This should reflect the date the document was created.

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.



Figure 3-321 Notice of Placement (Preschool) Screen Statements Section Populated

- 2. Click on the drop-down box located above the textbox.
- 3. Select the desired key-word stem in the drop-down list.
- 5. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 6. Enter user (initials) to signify that Procedural Safeguards were provided to parent.
- 7. Click next to **This document was prepared by:.** The Find: Staff screen displays.
- 8. Enter all or part of staff Last Name, First Name.

Find Close Select (Clear Selection		
Find: Staff			
Find Criteria			٩
Last Name	First Name	Middle Name	
Smith	С		
Search Results			
Find Result			3
Line Last Name	First Name	Mid	dle Name
1 Smith	Christine		
2 Smith	Jk		

Figure 3-322 Find: Staff Screen

- 9. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 10. Click line of staff name. Line highlights.
- 11. Click again or click seet. Find: Staff screen closes and staff name displays.
- 12. Click Save

The document can be printed, validated and finalized.

GENAZ 28 - NOTICE OF IEP (PRESCHOOL)

The Notice of IEP (Preschool) is located in the Preschool Process.



Note: The Notice of IEP (Preschool) has been created from the Prior Written Notice template in Synergy SE. The wording of the example below may differ as each school district has the ability to create and edit Prior Written Notices to meet their individual district needs.

The Notice of Notice of IEP (Preschool) contains one tab:

• Prior Written Notice

Prior Written Notice	
Student Name: Akins, Shawn E. Document: GENAZ 28 Description: Notice of IEP Prior Written Notice	
Document Name	Document Date
Notice of IEP	1 6
Description of Actions Proposed or Refused	9
DESCRIPTION OF ACTIONS PROPOSED OR REFUSED BY THE DISTRICT. Identification	
The evaluation team has received a referral for a possible comprehensive evaluation of your child.	
Statements	٥
Explanation of why the district proposes or refuses to take the action:	
	All antions
Description of each evaluation procedure, assessment, record or report used as a basis for the proposed or n	elused action:
	h.
Description of other options considered and why those options were rejected:	
Description of the factors relevant to the actions proposed or refused are:	
<u> </u>	
	4
	. It.
Implementation of Decision	0
This decision is proposed to be implemented on	
Darante of a student and the student have restartion under respectival selections in accordance with Federal I	aw Contact the
school psychologist or call the Special Education office if you want a copy of the procedural safeguards.	an. conductore
Procedural Safeguards provided to parent(s)	
(initials)	
This document was prepared by:	
Admin User	
Case Manager Case Manager Phone	
M	

Figure 3-323 Notice of IEP (Preschool) Screen

To create a Notice of IEP document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

The Statements section contains four description areas where explanations for actions taken are entered. Drop-down key-word stems may be available, based on individual district decisions. If no stems are available in the drop-downs, text can be added directly to the textboxes.

Explanation of why the dist	rict proposes or refuses to take the action:
~	
Requires Services	

Figure 3-324 Notice of IEP (Preschool) Screen Statements Section Drop-down

2. Click on the drop-down box located above the textbox.

Explanation of why the district proposes or refuses to take the action:	
×	
🕎 📀	
The IEP team has determined that Harry requires the services listed on the attached IEP.	<u> </u>
	-

Figure 3-325 Notice of IEP (Preschool) Screen Statements Section Populated

- 3. Select the desired key-word stem in the drop-down list.
- 5. The Implementation of Decision section contains a date field that reflects the implementation date. Enter the **date** (MMDDYY) or click and select date.
- 6. Enter user (initials) to signify that Procedural Safeguards were provided to parent Click + next to This document was prepared by:. The Find: Staff screen displays.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria			۵		
Last Name	First Name	Middle Name			
Smith	С				
Search Results					
Find Result			٨		
Line Last Name	First Name	м	liddle Name		
1 Smith	Christine				
2 Smith	Jk				

Figure 3-326 Find: Staff Screen

- 7. Enter all or part of staff Last Name, First Name.
- 8. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 9. Click line of staff name. Line highlights.
- 10. Click again or click set. Find: Staff screen closes and staff name displays.
- 11. Click Save

The document can be printed, validated and finalized.

ELIGIBILITY DETERMINATION DOCUMENTS

The list of Eligibility Determination documents can be accessed by clicking on the "E" icon in the Initial, Reevaluation or Preschool Process.

Note: Eligibility Determination documents have been created from the Eligibility Determination Template in Synergy SE. The wording of the examples below may differ as each school district has the ability to create and edit these documents to meet their individual district needs.

GENAZ 56	Eligibility Determination	Autism
GENAZ 57	Eligibility Determination	Emotional Disability
GENAZ 58	Eligibility Determination	Hearing Impairment
GENAZ 59	Eligibility Determination	Intellectual Disability
GENAZ 60	Eligibility Determination	Multiple Disabilities / SSI
GENAZ 61	Eligibility Determination	Other Health Impairment
GENAZ 63	Eligibility Determination	Orthopedic Impairment
GENAZ 64A	Eligibility Determination	Developmental Delay
GENAZ 64	Eligibility Determination	Preschool Severe Delay
GENAZ 65	Eligibility Determination	Specific Learning Disability
GENAZ 66	Eligibility Determination	Speech/Language Impairment
GENAZ 67	Eligibility Determination	Traumatic Brain Injury
GENAZ 68	Eligibility Determination	Visual Impairment
GENAZ 69	Eligibility Determination	Non Eligible Child

GENAZ 56 – ELIGIBILITY DETERMINATION - AUTISM

The Eligibility Determination – Autism contains one tab:

• Eligibility Determination

Eligibility Determination	
Sudart Name Abbett Bills C	
Student Name Abbolt, Dirly C. Document GENAZ 06 Description Englishity Determination - Autom	
Eligibility Determination	Document Date
Eligibility Determination - Autism	
There has been a lack of instruction in reading and math The student is limited English proficient	
if either response is "Yes", provide an explanation. 🕎 🛇	
	а
A student being considered for eligibility for Special Education under the category of AUTISM DR criteria, as indicated by a checkmark.	SADILITY must meet all of the following eligibility
Eligibility Criteria	
Evidence, by assessment team consensus, that the student meets the DSM-IV criteria for t must complete the checklist on the back of this form.)	he presence of Autistic Disorder. (The team
Eligibility Criteria	
The student shows delays or abnormal functioning in at least ONE of the following areas, wi	th onset generally prior to 3 years of age:
social interaction language as used in social communication, or symbolic or imaginative play.	
Eligibility Criteria	
The symptoms have persisted more than 6 months	
The symptoms are to a degree to be developmentally deviant.	
The symptoms meet criteria cross-situationally, as rated by at least 2 persons.	
More than one instrument was used to make the diagnostic decision; and the assessment t comprehensiveness of the assessment. Input from a medical doctor or appropriate clinician may	earn feels confident regarding the validity and be necessary.
Other diagnoses were considered and ruled out as a major factor in explaining current symp better explained as part of another mental disorder. The student symplectic disorder is a student of the student of	tomotology. Symptoms are not considered
The adverse effects of the impairment on advirational padormance are not correctable without	t Special Education
Elinibility Decision	
Decision	
	×
SOURCES OF DATA USED TO MAKE THIS DECISION. (Check those used) Grades Grades School Records Medical Report Psychoeducational Evaluation	s (Date)
Classroom Teacher(s) Report Group Achievement Test Individual Achievement Tests	
Classroom Observations	
Other 🗒 🔉	
11.	

Figure 3-327 Eligibility Determination - Autism Screen

To create an Eligibility Determination – Autism document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Respond to the statements by selecting **Yes** or **No** from the drop-downs.
- 3. If either response is **Yes**, provide an explanation in the textbox. Use ^I to spellcheck. Use ^I of or more space.

The Eligibility Criteria contain checkboxes that determine if the student meets the criteria for eligibility.

4. Based on the criteria selected, indicate the decision of whether the student **is** or **is not** eligible using the drop-down selection.

Eligibility Decision	
Decision	
	×
This student is eligible for Special Education as a child with a disability, in the category of AUTISM	
This student is NOT eligible for Special Education in any of the above categories	

Figure 3-328 Eligibility Determination - Autism Screen Drop-down

- 5. Check the Sources of Data Used to Make this Decision.
- 6. Enter the current IEP (Date) (MMDDYY) or click IP and select date.
- 7. Add any Other source of data used to make this decision that might apply.
- 8. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.

Participants					G
Student Is Participant					
Parent Participants					G
Line Parent Name	Relatio	n	Educational Rights	Contact Allowed	Participant
1 Aaron, Kathleen	Mother		Yes	Yes	
2 Aaron, Phillip	Father		Yes	Yes	
Staff Participants	Staff Participants Add				
X Line Staff Name			Role		e
Admin User+		Case Carrier/Special Education	n ≚		
Other Participants					Add 🕻
X Line N	ame	0		Job Title	e
Contact					G
Contact Person Phone					
User, Admin 🕑					

Figure 3-329 Eligibility Determination - Autism Screen Participants

9. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Staff				
X	Line	Staff Name	Role	
	1	Green, Tom	Case Carrier 👻	
	2	User, Admin ←	Teacher Specialist	

Figure 3-330 Eligibility Determination - Autism Screen Staff Section Change/Add

Change current staff names:

1. Click - next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria			۵		
Last Name	First Name	Middle Name			
Smith	С				
Search Results					
Find Result			٨		
Line Last Name	First Name	м	iddle Name		
1 Smith	Christine				
2 Smith	Jk				

Figure 3-331 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click find or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click <u>seet</u>. Find: Staff screen closes and staff name displays.

Staf	Staff		Orient./Mobility Specialist	
X	Line	Staff Name	Role	Other
	1	Green, Tom	Case Carrier	Physical Therapist
	2	User, Admin +	Teacher Specialist	På y chologist
	3	Smith, John +		Reader
				O - h I N

Figure 3-332 Eligibility Determination - Autism Screen Staff Section Role Selection

6. Click the **Role** drop-down and select the staff role.

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check 🔲 on the line of the staff name to remove. The row is removed.

The Other Participants section will allow for participant names that are not available in the Staff directory.

- 1. Click the Add on the Other Participants bar. A new row will be added.
- 2. Enter the Name and Job Title of the participant.
- 3. If needed, check is on the line of the staff name to remove. The row is removed. Use row to spellcheck. Use of for more space.
- 4. The Contact Person drop-down displays staff member names from the Staff Participants list. Select the appropriate staff participant's name to display as the **Contact Person**.
- 5. Enter that person's **Phone** number.

The final section contains the DSM-IV Diagnostic Criteria for Autism Spectrum Disorder. Based on selections checked, the student is given a score that will provide an overview and explanation of the student's Autism eligibility.

DSM-IV Diagnostic Criteria
DSM-IV Diagnostic Criteria for Autism Spectrum Disorder
A. A total of SIX (or more) items from (1), (2), and (3), with at least two from (1), and one each from (2) and (3):
DSM-IV Criteria
(1) qualitative impairment in social interaction, as manifested by at least TWO of the following:
(a) marked impairment in the use of multiple non-verbal behaviors such as eye-to-eye gaze, facial expression, body postures, and gestures to regulate social interaction
(b) failure to develop peer relationships appropriate to developmental level
c) a lack of spontaneous seeking to share enjoyment, interests, or achievements with other people (e.g., by a lack of showing, bringing, or pointing out objects of interest)
d) lack of social or emotional reciprocity
Total: 0
DSM-IV Criteria
(2) qualitative impairments in communication as manifested by at least ONE of the following:
(a) delay in, or total lack of, the development of spoken language (not accompanied by an attempt to compensate through a native modes of communication such as gesture or mime)
b) individuals with adequate speech, marked impairment in the ability to initiate or sustain a conservation with others
c) stereotyped and repetitive use of language or idiosyncratic language
(d) lack of varied, spontaneous make-believe play or social imitative play appropriate to developmental level
Total: 0
DSM-IV Criteria
(3) restricted repetitive and stereotyped patterns of behavior, interests, and activities, as manifested by at least ONE of the following:
(a) encompassing preoccupation with one or more stereotyped and restricted patterns of interest that is abnormal either in intensity or focus (b) apparently inflexible adherence to specific, non-functional routines or rituals
(c) stereotyped and repetitive motor mannerisms (e.g., hand or finger flapping or twisting, or complex whole-body movements) (d) persistent preoccupation with parts of objects
Total:
Grand Total: 0

Figure 3-333 Eligibility Determination - Autism Screen DSM-IV Diagnostic Criteria

- 1. Check the statements that apply. The Total box at the bottom, displays the amount of items selected.
- 2. Click Save

The document can be printed, validated and finalized.

GENAZ 57 – ELIGIBILITY DETERMINATION - EMOTIONAL DISABILITY

The Eligibility Determination - Emotional Disability contains one tab:

• Eligibility Determination

VEligibility Determination	
Student Name: Saager, Philip T. Document: GENAZ 57 Description: Eligibility Determination - Emotional Disturbance	
Eligibility Determination	
Document Name	Document Date
Eligibility Determination - Emotional Disturbance	F
There has been a lack of instruction in reading and math	
The student is limited English proficient	
lf either response is "Yes", provide an explanation: 🕎 🛇	
	.4
A student being considered for eligibility for Special Education under the category of EMOTIONAL DISABI emotional condition/disorder, whereby the child exhibits one or more of the following characteristics, as inc	.ITY must show evidence of an ficated by a checkmark:
Eligibility Criteria	٩
An inability to learn which cannot be explained by intellectual, sensory or health factors.	
An inability to build and maintain satisfactory interpersonal relationships with peers and teachers.	
Inappropriate types of behavior or feelings under normal circumstances.	
A general pervasive mood of unhappiness or depression.	
A tendency to develop physical symptoms associated with personal or school problems.	
Emotional disorder will include children who are diagnosed with Schizophrenia.	
Eligibility Criteria	٩
This student must also meet all of the following criteria:	
Verification of an emotional condition/disorder by a psychiatrist. licensed psychologist, or a certified s	chool psychologist.
The above condition(s) is/are not caused by social maladiustment.	
The condition has existed for a long period of time.	
The condition adversely affects the child's educational performance.	
The adverse effects of the condition on educational performance are not correctable without Special E	ducation.
Eligibility Decision	
Decision	
	×
SOURCES OF DATA USED TO MAKE THIS DECISION: (Check those used) IEP (Data	ate)
Grades Parent Report Work Samples	
School Records Medical Reports Psychoeducational Evaluations	
Classroom Teacher(s) Report Coroup Achievement Test Individual Achievement Tests	
Classroom Observations	
Other 🕎 🔾	
Let a set	

Figure 3-334 Eligibility Determination - Emotional Disability Screen

To create an Eligibility Determination - Emotional Disability document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Respond to the statements by selecting **Yes** or **No** from the drop-downs.

The Eligibility Criteria sections contain checkboxes that determine if the student meets the criteria for eligibility.

- 4. Based on the criteria selected, indicate the decision of whether the student **is** or **is not** eligible using the drop-down selection.
- 5. Check the Sources of Data Used to Make this Decision.
- 6. Enter the **current IEP (Date)** (MMDDYY) or click and select date.
- 7. Add any **Other** source of data used to make this decision that might apply.

Participants					٩
Student Is Participant					
Parent Participants					Ģ
Line Parent Name	Relation	n	Educational Rights	Contact Allowed	Participant
Aaron, Kathleen	Mother		Yes	Yes	
2 Aaron, Phillip	Father		Yes	Yes	
Staff Participants					Add 🗳
X Line Staff Name			Role		÷
Admin User +		Case Carrier/Special Education	n 🞽		
Other Participants					Add 🕻
X Line Name		0	doL	Title	9
Contact					0
Contact Person Phone					
User, Admin 💌					

Figure 3-335 Eligibility Determination - Emotional Disability Screen Participants

- 8. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.
- 9. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Sta	Staff						
X	Line	Staff Name	Role				
	1	Green. Tom	Case Carrier 💌				
	2	User, Admin	Teacher Specialist 👻				

Figure 3-336 Eligibility Determination - Emotional DisabilityScreen Staff Role Selection

Change current staff names:

1. Click • next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection									
Find: Staff									
Find Criteria					۵				
Last Name	First N	Vame	Middle Name						
Smith	Smith C								
Search Results									
Find Result					۵				
Line Last Name		First Name		Middle Name					
1 Smith		Christine							
2 Smith		Jk							

Figure 3-337 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click find or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click <u>seet</u>. Find: Staff screen closes and staff name displays.

Sta	ff		Orient./Mobility Specialist	
X	Line	Staff Name	Role	Other
	1	Green, Tom	Case Carrier	Physical Therapist
	2	User, Admin 🗲	Teacher Specialist	Pš y chologist
	3	Smith, John ←		Reader
				Calcard Numan

Figure 3-338 Eligibility Determination - Emotional Disability Screen Staff Section Role Selection

6. Click the **Role** drop-down and select the staff role.

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check a on the line of the staff name to remove. The row is removed.

The Other Participants section will allow for participant names that are not available in the Staff directory.

- 1. Click the Add on the Other Participants bar. A new row will be added.
- 2. Enter the **Name** and **Job Title** of the participant.
- 3. If needed, check is on the line of the staff name to remove. The row is removed. Use to spellcheck. Use of for more space.
- 4. The Contact Person drop-down displays staff member names from the Staff Participants list. Select the appropriate staff participant's name to display as the **Contact Person**.
- 5. Enter that person's **Phone** number.
- 6. Click Save
- 7. The document can be printed, validated and finalized.

GENAZ 58 – ELIGIBILITY DETERMINATION - HEARING IMPAIRMENT

The Eligibility Determination – Hearing Impairment contains one tab:

• Eligibility Determination

					(
VEligibility Determination					~
Student Name: Abbott, Billy C. Document	GENAZ 58 Descrip	tion: Eligibility Determinat	tion - Hearing Impairment		
Eligibility Determination					
Document Name				Document Date	
Eligibility Determination - Hearing Impairm	ent			1 7	
There has been a lack of instruction in rea	ading and math	*			
The student is limited English profisiont	-	v			
	1 ··· (RE) (%)				
If either response is "Yes", provide an exp	lanation: 🕎 🥥				
				.4	
Determination of a HEARING IMPAIRMEN	IT is based upon	the student meeting a	Il of the following eligibility cr	iteria, as indicated by a	checkmark:
Eligibility Criteria					
Current audiological report indicating	a loss of hearing	acuity (within one yea	r).		
The impairment adversely affects the	child's educationa	al performance, as det	ermined by an evaluation of o	communication/language	proficiency.
The adverse effects of the impairment	, on educational p	performance, are not c	orrectable without Special E	ducation.	
Eligibility Decision					
Decision					
				~	
SOURCES OF DATA USED TO MAKE T	HIS DECISION: (Check those used)	IEP (Date)		
Grades Pare	ent Report	Work Samples	, , , , , , , , , , , , , , , , , , ,		
School Records	lical Reports	Psvchoeducati	ional Evaluations		
Classroom Teacher(s) Report 🔲 Grou	up Achievement T	est 🔲 Individual Achie	evement Tests		
Classroom Observations					
Other 🕎 🥥					
Participanta					
Student Is Participant					_
Parent Participants					
Line Parent Name	Relation		Educational Rights	Contact Allowed	Participant
1 Aaron, Kathleen	Mother		Yes	Yes	
2 Aaron, Phillip	Father		Yes	Yes	
Staff Participants					Add 🙆
X Line Staff Name			Role		¢
1 Admin User	Case C	arrier/Special Education	n 🔽		
Other Participants	I				Add
X Line Name		∂	Jot	o Title	4
Contest		~1			~
Contact Person Phone					
User, Admin					

Figure 3-339 Eligibility Determination - Hearing Impairment Screen

To create an Eligibility Determination – Hearing Impairment document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Respond to the statements by selecting **Yes** or **No** from the drop-downs.
- 3. If either response is **Yes**, provide an explanation in the textbox. Use ^I to spellcheck. Use ^I of or more space.

The Eligibility Criteria sections contain checkboxes that determine if the student meets the criteria for eligibility.

- 4. Based on the criteria selected, indicate the decision of whether the student **is** or **is not** eligible using the drop-down selection.
- 5. Check the Sources of Data Used to Make this Decision.
- 6. Enter the current IEP (Date) (MMDDYY) or click P and select date.
- 7. Add any Other source of data used to make this decision that might apply.

Π	Participants						۵
	Student Is Participant						
	Parent Participants						<u></u>
	Line Parent Name	Relatio	•	Educational Rights	Contact Allowed	Participa	int
	1 Aaron, Kathleen	Mother		Yes	Yes		
	2 Aaron, Phillip	Father		Yes	Yes		
ľ	Staff Participants						
	X Line Staff Name			Role			
	Admin User +		Case Carrier/Special Education	in 👱			
l	Other Participants					Add] 0
	X Line Name		0	JoL	Title		0
l	Contact						٩
	Contact Person Phone						
	User, Admin 👱						

Figure 3-340 Eligibility Determination - Hearing Impairment Screen Participants

- 8. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.
- 9. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Sta	Staff						
X	X Line Staff Name Role						
	1 Green, Tom	Case Carrier 🗸 🗸					
	2 User, Admin ←	Teacher Specialist					

Figure 3-341 Eligibility Determination - Hearing Impairment Screen Staff Role Selection

Change current staff names:

1. Click - next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection									
Find: Staff									
Find Criteria			۵						
Last Name	First Name	Middle Name							
Smith	С								
Search Results									
Find Result			٨						
Line Last Name	First Name		Middle Name						
1 Smith	Christine								
2 Smith	Jk								

Figure 3-342 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click **Find** or press **ENTER**. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click <u>seet</u>. Find: Staff screen closes and staff name displays.

Stat	ff		Orient./Mobility Specialist	
\mathbf{X}	Line	Staff Name	Role	Other
	1	Green, Tom	Case Carrier	Physical Therapist
	2	User, Admin (+	Teacher Specialist	P ày chologist
	3	Smith, John ←		Reader
			School Nureo	

Figure 3-343 Eligibility Determination - Hearing Impairment Screen Staff Section Role Selection

6. Click the **Role** drop-down and select the staff role.

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check 🔲 on the line of the staff name to remove. The row is removed.

The Other Participants section will allow for participant names that are not available in the Staff directory.

- 1. Click the **Add** on the Other Participants bar. A new row will be added.
- 2. Enter the Name and Job Title of the participant.
- 3. If needed, check is on the line of the staff name to remove. The row is removed. Use row to spellcheck. Use of for more space.
- 4. The Contact Person drop-down displays staff member names from the Staff Participants list. Select the appropriate staff participant's name to display as the **Contact Person**.
- 5. Enter that person's **Phone** number.
- 6. Click Save .
- 7. The document can be <u>printed</u>, <u>validated</u> and <u>finalized</u>.

GENAZ 59 – ELIGIBILITY DETERMINATION - INTELLECTUAL DISABILITY

The Eligibility Determination – Intellectual Disability contains one tab:

• Eligibility Determination

VEligibility Determination									
Student Name: Sabin, Heather R. Do	cument: GENAZ 59 De	escription: Eligibil	lity Determination - Intellectua	l Disability					
Eligibility Determination									
Document Name	isability			Docu	ment Date				
There has been a lack of instruction in	reading and math		*						
The student is limited English proficien	t		~						
If either response is "Yes", provide an e	explanation: 🕎 父								
				th.					
In determining the presence of a MENT student, one of the following eligibility of	AL DISABILITY, or criteria must be met	continued pres t, as indicated	ence of a MENTAL DISA by a checkmark:	BILITY for the abov	/e named				
Eligibility Criteria					6				
Disability Classification									
Eligibility Criteria					G				
The significant impairment of gener environment, such that the student red	ral intellectual funct uires Special Educ	tioning adverse ation, or conti	ly affects the student's p nues to require Special E	erformance in the e ducation and relate	educational ed services.				
Eligibility Decision					6				
Decision									
				~					
Grades Parent Report Work Samples School Records Medical Reports Psychoeducational Evaluations Classroom Teacher(s) Report Group Achievement Test Individual Achievement Tests Classroom Observations Other ∰ ♥									
		.:							
Participants					6				
Student Is Participant									
Parent Participants					Ğ				
Line Parent Name	Relation		Educational Rights (Contact Allowed	Participant				
2 Sabin, Judith	Mother		res f Ves Y	es 'es					
Staff Participante					Adr				
X Line Staff Name			Role						
1 Cissy Horn +	Special Ed T	eacher	¥						
2 Admin User	Admin User Case Carrier/Special Education V								
Other Participants					Add 6				
X Line Name		∂	Job T	itle					
Contact					Ø				
Contact Person Phone									

Figure 3-344 Eligibility Determination - Intellectual Disability Screen

To create an Eligibility Determination – Intellectual Disability document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Respond to the statements by selecting **Yes** or **No** from the drop-downs.
- 3. If either response is **Yes**, provide an explanation in the textbox. Use ^I to spellcheck. Use ◊ for more space.

The Eligibility Criteria sections contain checkboxes that determine if the student meets the criteria for eligibility.

- 4. Click Disability drop-down and make appropriate selection.
- 5. Based on the criteria selected, indicate the decision of whether the student **is** or **is not** eligible using the drop-down selection.
- 6. Check the Sources of Data Used to Make this Decision.
- 7. Enter the current IEP (Date) (MMDDYY) or click P and select date.
- 8. Add any **Other** source of data used to make this decision that might apply.

Participants										
Student Is Participant										
Parent Participants										
Line Parent Name		Relatio	n	Educational Rights	Contact Allowed	Participa	ant			
Aaron, Kathleen		Mother	1	Yes	Yes					
2 Aaron, Phillip		Father		Yes	Yes					
Staff Participants Add										
X Line Staff Name			Role							
Admin User +			Case Carrier/Special Education	n 🜱						
Other Participants						Add				
X Line	Name		e		Job Title		1			
Contact							(
Contact Person	Phone									
User, Admin	~									

Figure 3-345 Eligibility Determination - Intellectual Disability Screen Participants

- 9. Check Student to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.
- 10. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Staff					
X	Line	Staff Name	Role		
	1	Green, Tom	Case Carrier		
	2	User, Admin +	Teacher Specialist		

Figure 3-346 Eligibility Determination - Intellectual Disability Screen Staff Role Selection

Change current staff names:
1. Click + next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection			
Find: Staff			
Find Criteria			۵
Last Name	First Name	Middle Name	
Smith	С		
Search Results			
Find Result			۵
Line Last Name	First Name	N	liddle Name
1 Smith	Christine		
2 Smith	Jk		

Figure 3-347 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click find or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click set. Find: Staff screen closes and staff name displays.

Staf	Staff			Orient./Mobility Specialist
×	Line	Staff Name	Role	Other
	1	Green, Tom	Case Carrier	Physical Therapist
	2	User, Admin 🗲	Teacher Specialist	Pš y chologist
	3	Smith, John +	•	Reader
		1		School Nurso

Figure 3-348 Eligibility Determination - Intellectual Disability Screen Staff Section Role Selection

6. Click the **Role** drop-down and select the staff role.

Add staff names:

- 1. Click **Add** on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check a on the line of the staff name to remove. The row is removed.

- 1. Click the Add on the Other Participants bar. A new row will be added.
- 2. Enter the Name and Job Title of the participant.
- 3. If needed, check is on the line of the staff name to remove. The row is removed. Use to spellcheck. Use of for more space.
- 4. The Contact Person drop-down displays staff member names from the Staff Participants list. Select the appropriate staff participant's name to display as the **Contact Person**.
- 5. Enter that person's Phone number.
- 6. Click Save .
- 7. The document can be printed, validated and finalized.

GENAZ 60 – ELIGIBILITY DETERMINATION - MULTIPLE DISABILITIES / SSI

The Eligibility Determination - Multiple Disabilities / SSI contains one tab:

• Eligibility Determination

VEligibility Determination		¢		
Student Name: Cooper, Jake D. Document: GENAZ 60 Descrip	tion: Eligibility Determination - Multiple Disa	bilites / SSI		
_ Eligibility Determination				
Document Name		Document Date		
Eligibility Determination - Multiple Disabilites / SSI				
There has been a lack of instruction in reading and math	×			
The student is limited English proficient	~			
If either response is "Yes", provide an explanation: 🕎 🥥				
		×		
A student being considered for eligibility for Special Educat eligibility criteria under two or more of the following conditio	ion under the category of MULTIPLE I ns, as indicated by a checkmark:	DISABILITIES must meet		
Eligibility Criteria		6		
F Hearing Impairment (HI)				
Moderate Intellectual Disability (MOID)				
Visual Impairment (VI)				
Eligibility Criteria		G		
OR: A child with one disability listed above is also a child w	ith at least one concurrently existing c	ondition of:		
Mild Intellectual Disability (MIID)				
Emotional Disability (ED), or				
Specific Learning Disability (SLD).				
Eligibility Criteria		6		
A student being considered for Special Education under the eligibility criteria under MULTIPLE DISABILITIES and under	e category of MD/SEVERE SENSORY ONE of the following:	IMPAIRMENT must meet		
Severe Visual Impairment or Hearing Impairment in com ED requiring private or public intensive therapeutic placem	bination with another severe disability ent); or ent	(MD, MIID, OI, A, SID,		
Eligibility Criteria				
The student must also meet all of the following criteria:				
Medical verification, as required for VI, HI, TBI, or OI.				
The impairment adversely affects the child's educationa	I performance.			
The adverse effects of the impairment on educational p	erformance are not correctable without	ut Special Education.		
Eligibility Decision		6		
Decision				
		<u> </u>		
Grades	Work Samples			
School Records	Psychoeducational Evaluation	tions		
Classroom Teacher(s) Report Group Achievement Test				
Classroom Observations Speech/Language Eva	aluation			
IEP (Date)				
Other 🕎 📀				
	A			
	*			

Figure 3-349 Eligibility Determination - Multiple Disabilities / SSI Screen

To create an Eligibility Determination - Multiple Disabilities / SSI document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Respond to the statements by selecting Yes or No from the drop-downs.
- 3. If either response is **Yes**, provide an explanation in the textbox. Use 🕎 to spellcheck. Use 📀 for more space.

The Eligibility Criteria sections contain checkboxes that determine if the student meets the criteria for eligibility.

- 4. Based on the criteria selected, indicate the decision of whether the student **is** or **is not** eligible using the drop-down selection.
- 5. Check the Sources of Data Used to Make this Decision.
- 6. Enter the current IEP (Date) (MMDDYY) or click 🗒 and select date.
- 7. Add any Other source of data used to make this decision that might apply.

Participants								۵
Student Is Participant								
Parent Participants								G
Line Parent Name		Relatio	n		Educational Rights	Contact Allowed	Particip	ant
1 Aaron, Kathleen		Mother			Yes	Yes		
2 Aaron, Phillip		Father			Yes	Yes		
Staff Participants							Add	
X Line Staff Name					Role			0
Admin User	+		Case Carrie	r/Special Educatio	in 🚩			
Other Participants							Add	0
X Line	Name			0		Job Title		0
Contact								0
Contact Person	Phone							
User, Admin	~							

Figure 3-350 Eligibility Determination - Multiple Disabilities / SSI Screen Participants

- 8. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.
- 9. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Sta	Staff				
\mathbf{X}	Line Staff Name	Role			
	1 <u>Green, Tom</u> ←	Case Carrier			
	2 User, Admin 🔶	Teacher Specialist 🗸 🗸			

Figure 3-351 Eligibility Determination - Multiple Disabilities / SSI Screen Staff Role Selection

Change current staff names:

1. Click - next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection			
Find: Staff			
Find Criteria		Q	
Last Name	First Name	Middle Name	
Smith	С		
Search Results			
Find Result		Q	
Line Last Name	First Name	Middle Name	
1 Smith	Christine		
2 Smith	Jk		

Figure 3-352 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click **Find** or press **ENTER**. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click set. Find: Staff screen closes and staff name displays.

Staf	Staff			Orient./Mobility Specialist
X	Line	Staff Name	Role	Other
		Green, Tom	Case Carrier	Physical Therapist
	2	<u>User, Admin</u>	Teacher Specialist	Ps y chologist
	3	Smith, John +		Reader
			-	School Nurso -

Figure 3-353 Eligibility Determination - Multiple Disabilities / SSI Screen Staff Section Role Selection

6. Click the **Role** drop-down and select the staff role.

Add staff names:

- 1. Click **Add** on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check a on the line of the staff name to remove. The row is removed.

- 1. Click the Add on the Other Participants bar. A new row will be added.
- 2. Enter the Name and Job Title of the participant.
- 3. If needed, check 🔲 on the line of the staff name to remove. The row is removed. Use 🕎 to spellcheck. Use 🛇 for more space.
- 4. The Contact Person drop-down displays staff member names from the Staff Participants list. Select the appropriate staff participant's name to display as the **Contact Person**.
- 5. Enter that person's **Phone** number.
- 6. Click Save
- 7. The document can be printed, validated and finalized.

GENAZ 61 – ELIGIBILITY DETERMINATION - OTHER HEALTH IMPAIRMENT

The Eligibility Determination – Other Health Impairment contains one tab:

Eligibility Determination

VEligibility Determination	(«
Student Name: Abbott, Billy C. Document: GENAZ 61 Description: Eligibility Determination - Other Health Impairm	ent
Eligibility Determination	
Document Name	Document Date
Eligibility Determination - Other Health Impairment	
There has been a lack of instruction in reading and math	
The student is limited English proficient	
lf either response is "Yes", provide an explanation: 🕎 🎱	
A student being considered for eligibility for Special Education under the category of OTHER HEALTH II following eligibility criteria, as indicated by a checkmark:	VIPAIRMENT must meet all of the
Eligibility Criteria	٥
The health impairment is documented by a doctor of medicine.	
Eligibility Criteria	Q
Chronic or acute diagnosis of (enter description above) causes one or more of the following: limited strength limited vitality limited alertness	.a
Eligibility Criteria	٩
The impairment adversely affects the child?s educational performance.	ial Education.
Eligibility Decision	4
Decision	×
SOURCES OF DATA USED TO MAKE THIS DECISION: (Check those used) Grades Parent Report Work Samples School Records Medical Reports Psychoeducational Evaluations Classroom Teacher(s) Report Group Achievement Test Individual Achievement Tests Other	(Date)

Figure 3-354 Eligibility Determination - Other Health Impairment Screen

To create an Eligibility Determination – Other Health Impairment document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Respond to the statements by selecting **Yes** or **No** from the drop-downs.
- 3. If either response is **Yes**, provide an explanation in the textbox. Use [™] to spellcheck. Use [◊] for more space.

The Eligibility Criteria sections contain checkboxes that determine if the student meets the criteria for eligibility.

- 4. Check the box if this health impairment is documented by a doctor of medicine.
- 5. Enter the description in the textbox of the chronic or acute diagnosis which cause the following items (on the screen).
- 6. Based on the criteria selected, indicate the decision of whether the student **is or is not** eligible using the drop-down selection.
- 7. Check the Sources of Data Used to Make this Decision.
- 8. Enter the current **IEP (Date)** (MMDDYY) or click IP and select date.
- 9. Add any **Other** source of data used to make this decision that might apply.

	Participants						
	Student Is Participant						
I	Parent Participants						_ ()
I	Line Parent Name	Relation	n	Educational Rights	Contact Allowed	Participa	nt
I	1 Aaron, Kathleen	Mother		Yes	Yes		
	2 Aaron, Phillip	Father		Yes	Yes		
ľ	Staff Participants					Add] 🔾
	X Line Staff Name			Role			
	Admin User +		Case Carrier/Special Education	n ≚			
ľ	Other Participants					Add] 0
	X Line Name		0	Job	Title		٢
ľ	Contact						٩
	Contact Person Phone						
	User, Admin 👱						
Ľ							

Figure 3-355 Eligibility Determination - Other Health Impairment Screen Participants

- 10. Check Student to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.
- 11. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Sta	Staff				
X	Line	Staff Name	Role		
	1	Green, Tom	Case Carrier 💌		
	2	User, Admin ←	Teacher Specialist		

Figure 3-356 Eligibility Determination - Other Health Impairment Screen Staff Role Selection

Change current staff names:

1. Click - next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection				
Find: Staff				
Find Criteria			۵	
Last Name	First Name	Middle Name		
Smith	С			
Search Results				
Find Result			٨	
Line Last Name	First Name	M	liddle Name	
1 Smith	Christine			
2 Smith	Jk			

Figure 3-357 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click find or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click <u>sect</u>. Find: Staff screen closes and staff name displays.

Stat	Staff			Orient./Mobility Specialist
$\left \times \right $	Line	Staff Name	Role	Other
	1	Green, Tom	Case Carrier	Physical Therapist
	2	User, Admin 🗲	Teacher Specialist	P åy chologist
	3	Smith, John ←		Reader
				School Mussa-

Figure 3-358 Eligibility Determination - Other Health Impairment Screen Staff Section Role Selection

6. Click the Role drop-down

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check is on the line of the staff name to remove. The row is removed.

- 1. Click the **Add** on the Other Participants bar. A new row will be added.
- 2. Enter the Name and Job Title of the participant.
- 3. If needed, check is on the line of the staff name to remove. The row is removed. Use to spellcheck. Use of for more space.
- 4. The Contact Person drop-down displays staff member names from the Staff Participants list. Select the appropriate staff participant's name to display as the **Contact Person**.
- 5. Enter that person's **Phone** number.
- 6. Click Save .
- 7. The document can be printed, validated and finalized.

GENAZ 63 – ELIGIBILITY DETERMINATION - ORTHOPEDIC IMPAIRMENT

The Eligibility Determination – Orthopedic Impairment contains one tab:

• Eligibility Determination

						¢
Student Name: Sabin, Heather R. Documer	t: GENAZ 63 Descri	ption: Eligibility Determinati	on - Orthopedic Impairme	ent		
Eligibility Determination						
Document Name Eligibility Determination Orthogodia Impairs	aant			Docur	ment Date	
Eligibility Determination - Orthopedic Impair	nent					
There has been a lack of instruction in readi	ng and math	*				
The student is limited English proficient		~				
If either response is "Yes", provide an explan	nation: 🕎 🔇					
				.4		
Determination of OPTHOPEDIC IMPAIRMEN	IT is based upon	the student meeting all	of the following eligib	ility critoris	as indicated by a check	mark:
Fligibility Criteria	in is based upon	the student meeting an	or the following eligib	inty criteria	a, as indicated by a check	contraction of the second s
						1
I he student has an impairment caused	by congenital and	omaly, disease, or other	r causes such as cere	ebral palsy	, amputations, burns, etc.	
L The student has an ORTHOPEDIC IMP	AIRMENT. The ph	ysical disability is docu	imented by a doctor o	of medicine	l.	
The impairment adversely affects the ch	ild?s educational	performance.				
L The adverse effects of the impairment of	n educational per	formance are not correc	table without Special	Education		
Eligibility Decision						6
Decision						
SOURCES OF DATA USED TO MAKE THIS	S DECISION: (Ch	eck those used)	IEP (Da	ate)		
Grades	Report	Work Samples				
School Records Medica	al Reports	Psychoeducationa	l Evaluations			
Classroom Teacher(s) Report Group	Achievement Tes	t 🛄 Individual Achiever	nent Tests			
Classroom Observations						
Other 🕎 🕥						
		.41				
Participants						G
Student Is Participant						
Parent Participants	((((
Line Parent Name	Relation		Educational Rights		Contact Allowed	Participant
Sabin, Brian	Father		Yes		Yes	
Z Sabin, Judith	Mother		res		res	
Staff Participants						Add
X Line Staff Name			Ro	le		Ę
Admin User (Case C	arrier/Special Education	¥			
2 <u>Cissy Horn</u> ←	Special	Ed Teacher	*			
Other Participants						Add
X Line Name		Ð		Job	Title	4
Contact						Ğ
Contact Person Phone						
User, Admin 💌						

Figure 3-359 Eligibility Determination - Orthopedic Impairment Screen

To create an Eligibility Determination - Orthopedic Impairment document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Respond to the statements by selecting **Yes** or **No** from the drop-downs.
- 3. If either response is **Yes**, provide an explanation in the textbox. Use ^I to spellcheck. Use ^I of or more space.

The Eligibility Criteria contain checkboxes that determine if the student meets the criteria for eligibility.

Eligibility Decision		
Decision		
	~	
This student is eligible for Special Education as a child with a disability, in the category of AUTISM		
This student is NOT eligible for Special Education in any of the above categories		

Figure 3-360 Eligibility Determination - Orthopedic Impairment Screen Eligibility Decision Drop-down

- 4. Based on the criteria selected, indicate the decision of whether the student **is** or **is not** eligible using the drop-down selection.
- 5. Check the Sources of Data Used to Make this Decision.
- 6. Enter the current IEP (Date) (MMDDYY) or click IP and select date.
- 7. Add any Other source of data used to make this decision that might apply.

Participants O							
Student Is Participant							
Parent Participants							G
Line Parent Name		Relation	1	Educational Rights	Contact Allowed	Part	icipant
1 Aaron, Kathleen		Mother		Yes	Yes	1	
2 Aaron, Phillip		Father		Yes	Yes	1	
Staff Participants						Ad	d 🕻
X Line Staff Name				Role			
Admin User +			Case Carrier/Special Educatio	n ≚			
Other Participants						Ad	d 🕻
X Line	Name		0		Job Title		0
Contact							G
Contact Person	Phone						
User, Admin 🛛 👻							

Figure 3-361 Eligibility Determination - Orthopedic Impairment Screen Participants

- 8. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.
- 9. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Sta	ff			Add
X	Line	Staff Name	Role	
	1	Green, Tom	Case Carrier 💌	
	2	User, Admin +	Teacher Specialist 💌	

Figure 3-362 Eligibility Determination - Orthopedic Impairment Screen Staff Section Change/Add

Change current staff names:

1. Click + next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection						
Find: Staff						
Find Criteria		6				
Last Name	First Name	Middle Name				
Smith	С					
Search Results						
Find Result		<u>۵</u>				
Line Last Name	First Name	Middle Name				
1 Smith	Christine					
2 Smith	Jk					

Figure 3-363 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click **Find** or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click set. Find: Staff screen closes and staff name displays.

Stat	ff		Orient./Mobility Specialist	
X	Line	Staff Name	Role	Other
	1	Green, Tom	Case Carrier	Physical Therapist
	2	User, Admin +	Teacher Specialist	Ps y chologist
	3	Smith, John ←		Reader
				School Musea -

Figure 3-364 Eligibility Determination - Orthopedic Impairment Screen Staff Section Select Role

6. Click the **Role** drop-down and select the staff role.

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.

3. If needed, check 🔲 on the line of the staff name to remove. The row is removed.

The Other Participants section will allow for participant names that are not available in the Staff directory.

- 1. Click the **Add** on the Other Participants bar. A new row will be added.
- 2. Enter the Name and Job Title of the participant.
- 3. If needed, check on the line of the staff name to remove. The row is removed. Use where to spellcheck. Use of for more space.
- 4. The Contact Person drop-down displays staff member names from the Staff Participants list. Select the appropriate staff participant's name to display as the **Contact Person**.
- 5. Enter that person's **Phone** number.
- 6. Click Save

The document can be printed, validated and finalized.

GENAZ 64A – ELIGIBILITY DETERMINATION - DEVELOPMENTAL DELAY

The Eligibility Determination – Developmental Delay contains one tab:

• Eligibility Determination

VEligibility Determination						4
Student Name: Cooper, Jake D. Document G	ENAZ 64A Description	Eligibility Determination - Dev	elopmental Delay			
Eligibility Determination						
Document Name			Doc	ument Date		
Eligibility Determination - Developmental Delay						
There has been a lack of instruction in read	ing and math	*				
The student is limited English proficient		~				
If either response is "Yes", provide an explai	nation: 🗐 🕥					
1 21 1			*			
			-			
A child with a DEVELOPMENTAL DELAY me	ets eligibility for Sp	ecial Education under one	of the following	categories, as indicated by	a checkmark:	
Eligibility Criteria						0
The child is at least three years of age b	ut less than ten vea	ars of age				_
Eligibility Criterio		lie of ugo.				
Performance on a norm-referenced test me	asures at least 1.5.	but not more than 3.0 stan	dard deviations	below the mean for children	of the same a	age
in two or more of the following areas:						9-
Cognitive development						
Social and emotional development						
Physical development						
Adaptive development						
Eligibility Criteria						()
The results of the norm-referenced measurements and/or surveys	sure(s) are corrobo	rated by information from o	other sources in	cluding parent input, judgme	ent-based	
Eligibility Criteria						<u>(</u>
The child was evaluated in all of the area	as of development li	sted above which taken t	ogether compri	se a comprehensive develo	omontal	_
assessment.	as of development i	steu above, which, taken t	ogenier, compri	se a comprenensive develop	Jinemai	
Eligibility Criteria						0
Parent has been provided with a written	notice (PWN) regar	ding this decision that mee	ts the requirem	ent under the IDEA.		
Eligibility Decision			· · ·			
Decision						
				~		
SOURCES OF DATA USED TO MAKE THIS	DECISION: (Check	those used)				
Grades Parent	Report	Work Samples				
School Records Medica	I Reports	Psychoeducational	Evaluations			
Classroom Observations	Achievement Test	ion	ent rests			
IFP (Date)	- Lungungo Li uluu					
	A					
	-					
Participants						0
Student Is Participant						
Parent Participants				1		0
Line Parent Name	Relation	Educa	tional Rights	Contact Allowed	Participa	int
Cooper, Dan	⊢ather Mether	Yes		Yes		
Cooper, Debra	wother	res		Tes		
Staff Participants					Add	
	Case Manage		Role			
Autim Usel 🕈	Case Manage	•				1.0
Other Participants				1-1-20-	Add	
Name Name				Job Title		Ā
Contact						٨
User Admin						

Figure 3-365 Eligibility Determination - Developmental Delay Screen

To create an Eligibility Determination – Developmental Delay document:

1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.

- 2. Respond to the statements by selecting **Yes** or **No** from the drop-downs.
- 3. If either response is **Yes**, provide an explanation in the textbox. Use [™] to spellcheck. Use [◊] for more space.

The Eligibility Criteria contain checkboxes that determine if the student meets the criteria for eligibility.



Figure 3-366 Eligibility Determination - Developmental Delay Screen Eligibility Decision Drop-down

- 4. Based on the criteria selected, indicate the decision of whether the student **is** or **is not** eligible using the drop-down selection.
- 5. Check the Sources of Data Used to Make this Decision
- 6. Enter the current IEP (Date) (MMDDYY) or click IP and select date.
- 7. Add any **Other** source of data used to make this decision that might apply.

Participants Q						
Student Is Participant						
Parent Participants						0
Line Parent Name	Relation		Educational Rights	Contact Allowed	Particip	ant
1 Aaron, Kathleen	Mother		Yes	Yes		
2 Aaron, Phillip	Father		Yes	Yes		
Staff Participants					Add	0
X Line Staff Name			Role			\$
Admin User +	c	Case Carrier/Special Educatio	n <u>~</u>			
Other Participants					Add	0
X Line Name		0	Jo	b Title		0
Contact						٩
Contact Person Phone						
User, Admin 🞽						

Figure 3-367 Eligibility Determination - Developmental Delay Screen Participants

- 8. Check **Studen**t to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.
- 9. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Staff				
X Line Staff Name	Role			
☐ 1 Green, Tom ←	Case Carrier			
2 User, Admin 4	Teacher Specialist 👻			

Figure 3-368 Eligibility Determination – Developmental Delay Screen Staff Section Change/Add

Change current staff names:

1. Click + next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria			٩		
Last Name	First Name	Middle Name			
Smith	С				
Search Results					
Find Result			٨		
Line Last Name	First Name		Middle Name		
1 Smith	Christine				
2 Smith	Jk				

Figure 3-369 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click **Find** or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click set. Find: Staff screen closes and staff name displays.

Staf	ff		Orient./Mobility Specialist	
×	Line	Staff Name	Role	Other
	1	Green, Tom	Case Carrier	Physical Therapist
	2	User, Admin (Teacher Specialist	Ps y chologist
	3	Smith, John +		Reader
				School Nurse

Figure 3-370 Eligibility Determination - Developmental Delay Screen Staff Section Select Role

6. Click the **Role** drop-down and select the staff role.

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check 🔲 on the line of the staff name to remove. The row is removed.

The Other Participants section will allow for participant names that are not available in the Staff directory.

- 1. Click the Add on the Other Participants bar. A new row will be added.
- 2. Enter the Name and Job Title of the participant.
- 3. If needed, check is on the line of the staff name to remove. The row is removed. Use is to spellcheck. Use of for more space.
- 4. The Contact Person drop-down displays staff member names from the Staff Participants list. Select the appropriate staff participant's name to display as the **Contact Person**.
- 5. Enter that person's **Phone** number.
- 6. Click Save

The document can be printed, validated and finalized.

GENAZ 64 – ELIGIBILITY DETERMINATION - PRESCHOOL SEVERE DELAY

The Eligibility Determination - Preschool Severe Delay contains one tab:

• Eligibility Determination

VEligibility Determination	(«
Student Name: Cooper, Jake D. Document: GENAZ 64 Description: Eligibility Determination - Preschool Severe	Delay
Eligibility Determination	
Document Name	Document Date
Eligibility Determination - Preschool Severe Delay	
There has been a lack of instruction in reading and math	
The student is limited English proficient	
If either response is "Yes", provide an explanation 🕎 🥥	
A SEVERELY DEVELOPMENTALLY DELAYED child means a child who meets eligibility for Special Ec following categories, as indicated by a checkmark.	ducation under one of the
Eligibility Criteria	٩
Freschool Severe Delay (PSD) means performance on a norm-referenced test that measures mo deviations below the mean for children of the same chronological age in ONE or more area.	re than three standard
Eligibility Criteria	0
Significant delay is demonstrated in the following area(s)	
Cognitive development	
C Social or emotional development	
C Physical development	
C Adaptive development	
Communication development	
Elioibility Criteria	0
Delay is NOT due to limited English proficiency.	
Eligibility Criteria	0
Child must exhibit both of the following:	
The impairment adversely affects the child's education performance.	1
The adverse effects on educational performance are not correctable without Special Education	
Special Rule	٩
The results of the norm-referenced measure must be corroborated by information from comprehensi and from parental input, if available. If there is a discrepancy between the measures, the evaluation t based upon a preponderance of the information presented.	ve developmental assessment leam shall determine eligibility
Eligibility Decision	0
Decision	1001
	~
SOURCES OF DATA USED TO MAKE THIS DECISION: (Check those used)	
Grades Parent Report Work Samples	
School Records Medical Reports Psychoeducational Evaluations	
Classroom Teacher(s) Report C Group Achievement Test	
Classroom Observations CSpeech/Language Evaluation	
IEP (Date)	Ĩ.
Other 🗒 🧿	
· · · · · · · · · · · · · · · · · · ·	

Figure 3-371 Eligibility Determination - Preschool Severe Delay Screen

To create an Eligibility Determination - Preschool Severe Delay document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Respond to the statements by selecting **Yes** or **No** from the drop-downs.

The Eligibility Criteria contain checkboxes that determine if the student meets the criteria for eligibility.

4. Based on the criteria selected, indicate the decision of whether the student **is** or **is not** eligible using the drop-down selection.



- 5. Check the Sources of Data Used to Make this Decision.
- 6. Enter the current IEP (Date) (MMDDYY) or click P and select date.
- 7. Add any Other source of data used to make this decision that might apply. the MET

Participants O							
Student Is Participant							
Parent Participants					Ģ		
Line Parent Name	Relation	n	Educational Rights	Contact Allowed	Participant		
1 Aaron, Kathleen	Mother		Yes	Yes			
2 Aaron, Phillip	Father		Yes	Yes			
Staff Participants					Add 🕻		
K Line Staff Name			Role		ę		
Admin User +		Case Carrier/Special Educatio	n 🔁				
Other Participants					Add 🕻		
X Line Name		0	Job	Title	9		
Contact					G		
Contact Person Phone							
User, Admin 💌							

Figure 3-373 Eligibility Determination - Preschool Severe Delay Screen Participants

conference. If the checkbox is left blank the name will not be included as a participant.

8. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Staff					
X	Line	Staff Name	Role		
	1	Green, Tom	Case Carrier 👻		
	2	<u>User, Admin</u> ←	Teacher Specialist 👻		

Figure 3-374 Eligibility Determination - Preschool Severe Delay Screen Staff Section Change/Add

Change current staff names:

1. Click • next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection						
Find: Staff						
Find Criteria				٨		
Last Name	First N	Vame	Middle Name			
Smith	С					
Search Results						
Find Result				٨		
Line Last Name		First Name		Middle Name		
1 Smith		Christine				
2 Smith		Jk				

Figure 3-375 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click **Find** or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click <u>seet</u>. Find: Staff screen closes and staff name displays.

Staff			Orient./Mobility Specialist	
×	Line	Staff Name	Role	Other
	1	Green, Tom	Case Carrier	Physical Therapist
	2	User, Admin 🗲	Teacher Specialist	Ps y chologist
	3	Smith, John +		Reader
				School Mussa_

Figure 3-376 Eligibility Determination - Preschool Severe Delay Screen Staff Section Select Role

6. Click the **Role** drop-down and select the staff role.

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check 🔲 on the line of the staff name to remove. The row is removed.

The Other Participants section will allow for participant names that are not available in the Staff directory.

- 1. Click the **Add** on the Other Participants bar. A new row will be added.
- 2. Enter the Name and Job Title of the participant.
- 4. The Contact Person drop-down displays staff member names from the Staff Participants list. Select the appropriate staff participant's name to display as the **Contact Person**.
- 5. Enter that person's **Phone** number.
- 6. Click Save

The document can be printed, validated and finalized.

GENAZ 65 – ELIGIBILITY DETERMINATION - SPECIFIC LEARNING DISABILITY

The Eligibility Determination - Specific Learning Disability contains one tab:

• Eligibility Determination

✓Eligibility Determination	
Student Name: Abbott, Billy C. Document: GENAZ 65 Description: Eligibility Determination - Specific Learni	ing Disability
Eligibility Determination	
Document Name	Document Date
Eligibility Determination - Specific Learning Disability	
If either response is "Yes", provide an explanation: 🕎 📀	.#
A student being considered for eligibility for Special Education under the category of SPECIFIC LE of the following criteria, as indicated by a checkmark:	ARNING DISABILITY must meet all
Eligibility Criteria	Q
 The student continues to have significant difficulty progressing in the regular curriculum, desp time. There is a significant discrepancy between intellectual ability and achievement in one or more 	ite structured interventions over of the following areas:
Eligibility Criteria	
Area of Qualification	
Basic Reading Skill Written Expression Reading Comprehension Oral Expression Mathematics Calculation Listening Comprehension Mathematics Reasoning Reading Fluency	
Characteristics of an information processing disorder are documented on the Information Proc discussed.	essing Worksheet & have been
Eligibility Criteria	<u></u>
The multidisciplinary evaluation team has determined that the discrepancy:	
 Is not primarily the result of a visual, hearing, or motor disability, mental retardation, emotiona cultural, or economic disadvantage. Is not primarily the result of limited English proficiency, or Is not primarily the result of a lack of instruction in reading or math. 	l disturbance, environmental,
Eligibility Criteria	۵
The impairment adversally affects the child's adversional parformance	
The adverse effects of the impairment on educational performance are not correctable without	Special Education
Finibility Decision	
Decision	
	~
SOURCES OF DATA USED TO MAKE THIS DECISION: (Check those used) Grades Parent Report Work Samples School Records Medical Reports Psychoeducational Evaluations Classroom Teacher(s) Report Group Achievement Test Individual Achievement Tests Classroom Observations Other P	IEP (Date)

Figure 3-377 Eligibility Determination - Specific Learning Disability Screen

To create an Eligibility Determination - Specific Learning Disability document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Respond to the statements by selecting **Yes** or **No** from the drop-downs.
- 3. If either response is **Yes**, provide an explanation in the textbox. Use ^I to spellcheck. Use ◊ for more space.

The Eligibility Criteria sections contain checkboxes that determine if the student meets the criteria for eligibility.

- 4. Based on the criteria selected, indicate the decision of whether the student **is** or **is not** eligible using the drop-down selection.
- 5. Check the Sources of Data Used to Make this Decision.
- 6. Enter the current **IEP (Date)** (MMDDYY) or click and select date.

Participants					
Student Is Participant Student Dec	cision V				
Parent Participants					6
Line Parent Name	Relation	Agree/Disagree	Educational Rights	Contact Allowed	Participant
1 Aaron, Kathleen	Mother	~	Yes	Yes	
2 Aaron, Phillip	Father	*	Yes	Yes	
Staff Participants					Add 🔇
X Line Staff Name		Role	Ş	Agree/Disagr	ee 🔶
1 <u>Admin User</u> ←	Case Carrier/Special Educa	ition 🔽		*	
Other Participants					Add 🔇
X Line Name	\ominus 🛛 Job Title	\bigcirc	Agre	ee/Disagree	Ş
Contact					(
Contact Person Phor	пе				
User, Admin 💌					

Figure 3-378 Eligibility Determination - Specific Learning Disability Screen Participants

- 7. Add any Other source of data used to make this decision that might apply.
- 8. Check **Studen**t to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.
- 9. Click the **Student Decision** drop-down and select whether the student **Agrees** or **Disagrees** with this eligibility determination.
- 10. Repeat this step for each parent participant, using the drop-down under the **Agree/Disagree** column.
- 11. Check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Change current staff names:

1. Click • next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection						
Find: Staff						
Find Criteria			٥			
Last Name	First Name	Middle Name				
Smith	Smith C					
Search Results						
Find Result			۵			
Line Last Name	First Name		Middle Name			
1 Smith	Christine					
2 Smith	Jk					

Figure 3-379 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click Find or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click <u>sect</u>. Find: Staff screen closes and staff name displays.

Staf	f			Orient./Mobility Specialist
$ \mathbf{X} $	Line	Staff Name	Role	Other
	1	Green, Tom	Case Carrier	Physical Therapist
	2	User, Admin (+	Teacher Specialist	Ps y chologist
	3	Smith, John +		Reader
				School Mussa-

Figure 3-380 Eligibility Determination - Specific Learning Disability Screen Staff Section Role Selection

- 6. Click the Role drop-down and select the staff role.
- 7. Click the **Agree/Disagree** dropdown and select whether the staff participant **Agrees** or **Disagrees** with this eligibility determination.

To add an additional staff participant:

- 1. Click **Add** on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check is on the line of the staff name to remove. The row is removed.

- 4. Click the Add on the Other Participants bar. A new row will be added.
- 5. Enter the Name and Job Title of the participant.
- 6. Click the **Agree/Disagree** dropdown and select whether the other participant **Agrees** or **Disagrees** with this eligibility determination.
- 7. If needed, check is on the line of the staff name to remove. The row is removed. Use to spellcheck. Use of for more space.
- 8. The Contact Person drop-down displays staff member names from the Staff Participants list. Select the appropriate staff participant's name to display as the **Contact Person**.
- 9. Enter that person's Phone number.
- 10. Click Save

11. The document can be printed, validated and finalized.

GENAZ 66 – ELIGIBILITY DETERMINATION - SPEECH/LANGUAGE IMPAIRMENT

The Eligibility Determination - Speech/Language Impairment contains one tab:

•	Eligibility	Determination
---	-------------	---------------

✓Eligibility Determination	«					
Student Name: Cooper, Jake D. Document: GENAZ 66 Description: Eligibility Determination - Speech/Language	Impairment					
Eligibility Determination						
Document Name	Document Date					
Eligibility Determination - Speech/Language Impairment						
There has been a lack of instruction in reading and math						
The student is limited English proficient						
If either response is "Yes", provide an explanation: 🕎 🛇						
*						
*						
A LANGUAGE IMPAIRMENT is a communication disorder characterized by difficulty in the comprehensis spoken language, as determined by evaluation, to the extent that it adversely affects the child's education performance. The determination is based on the following eligibility requirements.	sion or use of ational					
Eligibility Criteria	0					
LANGUAGE: A student must exhibit impairment in one or more of the following: expressive language syntax, verbal expression, alternative/augmentative communication); receptive language (e.g. unders reasoning, word meaning); pragmatic language (functional use of language in school).	ge (e.g. grammar, standing, verbal					
A SPEECH DISABILITY is a communication disorder that interferes with the student's verbal expression intelligibility, as determined by evaluation, to the extent that it adversely affects the child's educational determination is based on the following eligibility requirements:	n and speech I performance. The					
Eligibility Criteria	٥					
SPEECH: (A student must exhibit one or more of the following, as indicated by a checkmark)						
Impairment in articulation (the production of speech sounds) and intelligibility						
Impairment in communication fluency, such as stuttering						
A student must exhibit both of the following:	<u></u>					
The impairment adversely affects the child's educational performance						
The adverse effects of the impairment on educational performance.	Special Education.					
Eligibility Decision						
Decision (Language Impaired)						
	~					
Decision (Speech Impaired)						
SOURCES OF DATA USED TO MAKE THIS DECISION: (Check those used)						
School Records Medical Reports Psychoeducational Evaluations						
Classroom Teacher(s) Report Group Achievement Test						
Classroom Observations						
IEP (Date)						
Other 🕎 🥥						
A						
*						

Figure 3-381 Eligibility Determination - Speech/Language Impairment Screen

To create an Eligibility Determination - Speech/Language Impairment document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Respond to the statements by selecting **Yes** or **No** from the drop-downs.

3. If either response is **Yes**, provide an explanation in the textbox. Use **1** to spellcheck. Use **2** for more space.

The Eligibility Criteria sections contain checkboxes that determine if the student meets the criteria for eligibility.

- 4. Based on the criteria selected, indicate the decision of whether the student **is** or **is not** eligible using the drop-down selection.
- 5. Check the Sources of Data Used to Make this Decision.
- 6. Enter the current **IEP (Date)** (MMDDYY) or click **P** and select date.
- 7. Add any **Other** source of data used to make this decision that might apply.

Participants O						
Student Is Participant						
Parent Participants						6
Line Parent Name	Relation	1	Educational Rights	Contact Allowed	Participa	nt
1 Aaron, Kathleen	Mother		Yes	Yes		
2 Aaron, Phillip	Father		Yes	Yes		
Staff Participants					Add] 🔾
Line Staff Name			Role			¢
Admin User +		Case Carrier/Special Educatio	n 🗠			
Other Participants					Add] 0
X Line Name		0	Jot	Title		9
Contact						۵
Contact Person Phone						
User, Admin 💌						

Figure 3-382 Eligibility Determination - Speech/Language Impairment Screen Participants Section

- 8. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.
- 9. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

S	ta	ff			Add
>	ĸ	Line	Staff Name	Role	
Γ		1	Green, Tom	Case Carrier 💌	
Γ		2	User, Admin +	Teacher Specialist	

Figure 3-383 Eligibility Determination - Speech/Language Impairment Screen Staff Role Selection

Change current staff names:

1. Click - next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection				
Find: Staff				
Find Criteria			۵	
Last Name	First Name	Middle Name		
Smith	С			
Search Results				
Find Result			۵	
Line Last Name	First Name	1	Middle Name	
1 Smith	Christine			
2 Smith	Jk			



- 2. Enter all or part of staff Last Name, First Name.
- 3. Click **Find** or press **ENTER**. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click <u>sect</u>. Find: Staff screen closes and staff name displays.

Line Staff Name Role Other □ 1 Green, Tom ← Case Carrier Physical Therapist □ 2 User, Admin ← Teacher Specialist Psychologist	Sta	ff		Orient./Mobility Specialist	
Image: Image	×	Line	Staff Name	Role	Other
□ 2 User, Admin ← Teacher Specialist Psychologist □ 2 Smith John ← Reader		1	Green, Tom	Case Carrier	Physical Therapist
Reader		2	<u>User, Admin</u> ←	Teacher Specialist	P ày chologist
		3	<u>Smith, John</u> ←		Reader

Figure 3-385 Eligibility Determination - Speech/Language Impairment Screen Staff Section

6. Click the Role drop-down and select the staff role.

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check 🔲 on the line of the staff name to remove. The row is removed.

- 1. Click the Add on the Other Participants bar. A new row will be added.
- 2. Enter the Name and Job Title of the participant.
- 3. If needed, check is on the line of the staff name to remove. The row is removed. Use to spellcheck. Use of for more space.
- 4. The Contact Person drop-down displays staff member names from the Staff Participants list. Select the appropriate staff participant's name to display as the **Contact Person**.
- 5. Enter that person's **Phone** number.
- 6. Click Save .
- 7. The document can be printed, validated and finalized.

GENAZ 67 – ELIGIBILITY DETERMINATION - TRAUMATIC BRAIN INJURY

The Eligibility Determination - Traumatic Brain Injury contains one tab:

• Eligibility Determination

VEligibility Determination						
Student Name: Sabin, Heather R. Docume	Student Name: Sabin, Heather R. Document: GENAZ 67 Description: Eligibility Determination - Traumatic Brain Injury					
Eligibility Determination						
Document Name			Document Date			
Eligibility Determination - Traumatic Brain Ir	ijury					
There has been a lack of instruction in read	ing and math 💌					
The student is limited English proficient	×					
If either response is "Yes", provide an expla	nation: 🕎 📀					
L	ns an acquired injury to the brain cau	sed by an external physical f	force, resulting in total or	nartial		
functional disability or psychosocial impair	nent, or both, that adversely affects a	student's educational perform	mance. This term applies	to open or		
closed head injuries resulting in mild, mode category of TRAUMATIC BRAIN INJURY IM	rate or severe impairment. A student PAIRMENT must meet all of the follo	being considered for eligibilit wing eligibility criteria, as ind	y for Special Education u icated by a checkmark:	nder the		
Eligibility Criteria				۵		
The brain injury caused by an external	physical force resulted in total or par	tial functional disability or psy	chosocial impairment or	both		
The brain injury does not include conce	mital (cerebral nalsy) or degenerative	(multiple sclerosis) or birth in	niury			
Medical certification of educational imp	lications of impairment is on file	(maniple selenosis) or birth in	ijury.			
The impairment adversely affects the c	hild's educational performance					
The adverse effects of the impairment of	in educational performance are not co	prectable without Special Ed	lucation			
Elizibility Decision	in educational performance are not el	Silicetable without opecial Ed				
Decision						
Decision			¥			
SOURCES OF DATA LISED TO MAKE THI	S DECISION: (Check these used)	IED (Data)				
	+ Denest					
Cabaol Departe	al Deport	ional Evoluationa				
	Ashievement Test					
Classroom Teacher(s) Report C Group	Achievement Test Individual Ach	evement lests				
Classroom Observations						
Participants				٥		
Student Is Participant						
Parent Participants	Palatian	Educational Diable	Contract Allowed	Destisionst		
1 Sabin Brian	Father			Participant		
2 Sabin, Judith	Mother	Vas	Ves			
		103	105			
Staff Participants		Pole		Add 🕥		
	Case Carrier/Special Education			\forall		
2 Cissy Horn +	Special Ed Teacher	~				
Other Participants		lob	Title	Add 🔕		
Name Name		100				
Contact				۵		
Contact Person Phone						

Figure 3-386 Eligibility Determination - Traumatic Brain Injury Screen

To create an Eligibility Determination - Traumatic Brain Injury document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Respond to the statements by selecting **Yes** or **No** from the drop-downs.

3. If either response is **Yes**, provide an explanation in the textbox. Use 🖾 to spellcheck. Use \bigcirc for more space.

The Eligibility Criteria sections contain checkboxes that determine if the student meets the criteria for eligibility.

- 4. Based on the criteria selected, indicate the decision of whether the student **is** or **is not** eligible using the drop-down selection.
- 5. Check the Sources of Data Used to Make this Decision.
- 6. Enter the current **IEP (Date)** (MMDDYY) or click **P** and select date.
- 7. Add any **Other** source of data used to make this decision that might apply.

Participants O							
Student Is Participant							
Parent Participants						9	
Line Parent Name	Relation	n	Educational Rights	Contact Allowed	Par	ticipant	
Aaron, Kathleen	Mother		Yes	Yes			
2 Aaron, Phillip	Father		Yes	Yes			
Staff Participants	Staff Participants Add G						
K Line Staff Name			Role				
Admin User +		Case Carrier/Special Educatio	n 🞽				
Other Participants					A	5d 🕻	
X Line Name		0		Job Title		ę	
Contact						G	
Contact Person Phone							
User, Admin 👱							

Figure 3-387 Eligibility Determination - Traumatic Brain Injury Screen Participants

- 8. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.
- 9. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Stat	f		Add
X	Line Staff Name	Role	
	1 <u>Green, Tom</u> ←	Case Carrier	
	2 <u>User, Admin</u> ←	Teacher Specialist	

Figure 3-388 Eligibility Determination - Traumatic Brain Injury Screen Staff Role Selection

Change current staff names:

1. Click - next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection					
Find: Staff					
Find Criteria			٨		
Last Name	First Name	Middle Name			
Smith	С				
Search Results					
Find Result			٨		
Line Last Name	First Name		Middle Name		
1 Smith	Christine				
2 Smith	Jk				

Figure 3-389 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click find or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click <u>seet</u>. Find: Staff screen closes and staff name displays.

Stat	ff		Orient./Mobility Specialist	
×	Line	Staff Name	Role	Other
	1	Green, Tom	Case Carrier	Physical Therapist
	2	<u>User, Admin</u> ←	Teacher Specialist	Pš y chologist
	3	Smith, John ←		Reader
				School Nureo

Figure 3-390 Eligibility Determination - Traumatic Brain Injury Screen Staff Section Role Selection

6. Click the **Role** drop-down and select the staff role.

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check 🔲 on the line of the staff name to remove. The row is removed.

- 1. Click the Add on the Other Participants bar. A new row will be added.
- 2. Enter the Name and Job Title of the participant.
- 3. If needed, check 🔲 on the line of the staff name to remove. The row is removed. Use 🕎 to spellcheck. Use 🛇 for more space.
- 4. The Contact Person drop-down displays staff member names from the Staff Participants list. Select the appropriate staff participant's name to display as the **Contact Person**.
- 5. Enter that person's **Phone** number.
- 6. Click Save
- 7. The document can be <u>printed</u>, <u>validated</u> and <u>finalized</u>.

GENAZ 68 – ELIGIBILITY DETERMINATION - VISUAL IMPAIRMENT

The Eligibility Determination - Visual Impairment contains one tab:

• Eligibility Determination

VEligibility Determination						
Student Name: Sabin, Heather R. Docum	ent: GENAZ	68 Description: Eligibility Determ	ination - Visual Imp	airment		
Eligibility Determination						
Document Name				Docu	ment Date	
Eligibility Determination - Visual Impairme	nt				P	
There has been a lack of instruction in rea	ding and n	nath 🔽				
The student is limited English proficient		~				
If either response is "Yes", provide an exp	lanation: 🕅	N O				
A VISUAL IMPAIRMENT is an impairment	in vision t	nat, even with correction, adv	erselv affects a o	child's educational	performance. The	term includes
both partial sight and blindness. Partial si	ght is defin	ed as 20/70 or less in the be	tter eye, with co	rrection. Legal blir	idness is defined a	as 20/200 or
less in the better eye, with correction, or a criteria, as indicated by a checkmark:	a field of vis	ion no greater than 20 degre	es. This determin	nation is based up	on all the following	g eligibility
Eligibility Criteria						
The student has had a current ophtha	Imologic e	aluation to establish that a d	lisorder is preser	nt whether it is pro	paressive and the	severity of the
impairment.	interegie e			in million in to pro	grocorro, and the	coroney or and
The impairment adversely affects the	child?s edu	cational performance.				
The adverse effects of the impairment	, on educa	ional performance are not co	prrectable without	t Special Education	on.	
Eligibility Decision						0
Decision						
				~		
SOURCES OF DATA USED TO MAKE T	HIS DECIS	ION: (Check those used)		IEP (Date)		
Grades	ent Report	Work Samples				
School Records Med	ical Report	s Psychoeducati	onal Evaluations			
Classroom Teacher(s) Report Grou	p Achieve	ment Test 🛄 Individual Achie	evernent Tests			
Classroom Observations				J		
		.4				
Student Is Participant						<u></u>
Parent Participants						G
Line Parent Name	Relation		Educational Rights	i Contac	t Allowed	Participant
1 Sabin, Brian	Father		Yes	Yes		
2 Sabin, Judith	Mother		Yes	Yes		
Staff Participants						Add 🔇
X Line Staff Name			-	Role		¢
Cissy Horn	S	pecial Ed Teacher	*			
Admin User	C	ase Carrier/Special Education				
Other Participants						Add 🔇
Line Name		♦		Job Title		÷
Contact						0
Contact Person Phone						
User, Admin						

Figure 3-391 Eligibility Determination - Visual Impairment Screen

To create an Eligibility Determination - Visual Impairment document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Respond to the statements by selecting **Yes** or **No** from the drop-downs.
- 3. If either response is **Yes**, provide an explanation in the textbox. Use [™] to spellcheck. Use [◊] for more space.

The Eligibility Criteria sections contain checkboxes that determine if the student meets the criteria for eligibility.

- 4. Based on the criteria selected, indicate the decision of whether the student **is** or **is not** eligible using the drop-down selection.
- 5. Check the Sources of Data Used to Make this Decision.
- 6. Enter the current **IEP (Date)** (MMDDYY) or click 🗐 and select date.
- 7. Add any **Other** source of data used to make this decision that might apply.

I	Participants					6
	Student Is Participant					
I	Parent Participants					G
I	Line Parent Name	Relatio	n	Educational Rights	Contact Allowed	Participant
I	Aaron, Kathleen	Mother		Yes	Yes	
I	2 Aaron, Phillip	Father		Yes	Yes	
I	Staff Participants					Add 🕻
I	X Line Staff Name			Role		
I	Admin User +		Case Carrier/Special Educatio	n 🗠		
I	Other Participants					Add 🕻
I	X Line Name		0	Job	Title	0
I	Contact					G
I	Contact Person Phone					
1	User, Admin 👱					
12						

Figure 3-392 Eligibility Determination - Visual Impairment Screen Participants Section

- 8. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.
- 9. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added.

Sta	ff			Add
X	Line	Staff Name	Role	
	1	Green, Tom	Case Carrier 👻	
	2	User, Admin +	Teacher Specialist 👻	

Figure 3-393 Eligibility Determination - Visual Impairment Screen Staff Role Selection

Change current staff names:

1. Click - next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection				
Find: Staff				
Find Criteria			۵	
Last Name	First Name	Middle Name		
Smith	С			
Search Results				
Find Result			۵	
Line Last Name	First Name	1	Middle Name	
1 Smith	Christine			
2 Smith	Jk			



- 2. Enter all or part of staff Last Name, First Name.
- 3. Click find or press ENTER. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.
- 5. Click again or click <u>set</u>. Find: Staff screen closes and staff name displays.

Stat	ff		Orient./Mobility Specialist	
$ \mathbf{X} $	Line	Staff Name	Role	Other
	1	Green, Tom	Case Carrier	Physical Therapist
	2	User, Admin 🗲	Teacher Specialist	Ps y chologist
	3	Smith, John +		Reader
				Cabaal Nuraa

Figure 3-395 Eligibility Determination - Visual Impairment Screen Staff Section Role Selection

6. Click the **Role** drop-down and select the staff role.

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check is on the line of the staff name to remove. The row is removed.

- 1. Click the Add on the Other Participants bar. A new row will be added.
- 2. Enter the Name and Job Title of the participant.
- 3. If needed, check is on the line of the staff name to remove. The row is removed. Use to spellcheck. Use of for more space.
- 4. The Contact Person drop-down displays staff member names from the Staff Participants list. Select the appropriate staff participant's name to display as the **Contact Person**.
- 5. Enter that person's **Phone** number.
- 6. Click Save .
- 7. The document can be printed, validated and finalized.

GENAZ 69 – ELIGIBILITY DETERMINATION - NON ELIGIBLE CHILD

Eligibility Determination - Non Eligible Child contains one tab:

• Eligibility Determination

VEligibility Determination - Non-Eligible Child							
Student Name: Sabin, Heather R. Document: GENAZ 69 Description: Eligibility Determination - Non-Eligible Child							
Eligibility Determination							
Document Name						Document D	ate
Eligibility Determination - Non-Eligible Child							
Date of eligibility decision:							
The determination of eligibility for special	educati	ion is based on an eval	luation p	oursuant A.R.S.	15-766 and the fo	llowing requirem	ents: 🥥
The student was evaluated in all area	s relat	ed to the suspected d	disability	у.			
There has been a lack of instruction in re	eading	and math	~				
The student is limited English proficient			~				
If the response to one or both of the two	items	above is "Yes," provid	le an ex	oplanation: 🕎	٥		
leam decision regarding the presence of a	a disab	llity:		==.			<u> </u>
The student does not meet the criteri	a as a	child with a disability	under	the IDEA.			
Note: A student shall not be determined reading, (including the essential compon	to be a ents of	a child with a disability freading instruction),	y if the lack of	determinant fa appropriate ins	ctor is a lack of struction in math	appropriate instru 1, or limited Engli	iction in sh proficiency.
Parent has been provided with a writt	en noti	ce (PWN) regarding t	his dec	ision that mee	ts the requireme	ent under the IDE	A.
Team members who participated in this de	ecision	included:					Q
Student Is Participant							
Parent Participants							Q
Line Parent Name	Relation	1		Educational Rigi	nts Cont	act Allowed	Participant
2 Sabin, Judith	Mother			Vec	Yes		
	mourier			165	163		
Staff Participants					Dele		Add
Circle Stain name Role C					\bigtriangledown		
Admin User Case Carrier/Social Education							
Other Participante							
X Line Name		¢			Job Title		

Figure 3-396 Eligibility Determination - Non Eligible Child Screen

To create an Eligibility Determination - Non Eligible Child document:

- 1. Enter the **Document Date** (MMDDYY) or click and select date. This should reflect the date the document was created.
- 2. Respond to the statements by selecting **Yes** or **No** from the drop-downs.
- 3. If either response is **Yes**, provide an explanation in the textbox. Use ^I to spellcheck. Use ^I of or more space.

The Eligibility Criteria sections contain checkboxes that determine if the student meets the criteria for eligibility.

- 4. Based on the criteria selected, indicate the decision of whether the student **is** or **is not** eligible using the drop-down selection.
- 5. Check the Sources of Data Used to Make this Decision.
- 6. Enter the current **IEP (Date)** (MMDDYY) or click **P** and select date.

7. Add any Other source of data used to make this decision that might apply.

Participants								
Student Is Participant								
Parent Participants							0	
Line Parent Name	Relation	1	Educational Rights	Contact Allowed	Participant			
1 Aaron, Kathleen	Mother		Yes	Yes	Yes			
2 Aaron, Phillip	Father		Yes	Yes				
Staff Participants Add G							0	
K Line Staff Name	X Line Staff Name Role						\$	
□ 1 Admin User ← Case Carrier/Special Education								
Other Participants Add Q								
X Line Hame		0	J	ob Title			\$	
Contact							۵	
Contact Person Phone								
User, Admin 💌								

Figure 3-397 Eligibility Determination - Non Eligible Child Screen Participants Section

- 8. Check **Student** to include the student's name as a participant. If the checkbox is left blank the name will not be included as a participant.
- 9. On the Parents section, check **Participant**, to include each parent/guardian name as a participant. If these are left blank, the names will not be included as participants.

The Staff section displays the staff members who have been added to the student's Team List. Names can be added or removed from the staff section of this document without affecting the student's Team List. If a Staff name is added to this document, the name will display on this document only and not on the student's Team List. Staff Names displaying will be included as participants, however changes may be made including additional staff names added. Change current staff names:

Staff					
\mathbf{X}	Line	Staff Name	Role		
	1	Green, Tom	Case Carrier 💌		
	2	<u>User, Admin</u> ←	Teacher Specialist		

Figure 3-398 Eligibility Determination - Non Eligible Child Screen Staff Role Selection

1. Click - next to the **Staff Name** to change. The Find: Staff screen displays.

Find Close Select Clear Selection						
Find: Staff						
Find Criteria				٨		
Last Name	First N	Vame	Middle Name	E. C.		
Smith	С					
Search Results						
Find Result				٩		
Line Last Name		First Name		Middle Name		
1 Smith		Christine				
2 Smith		Jk				

Figure 3-399 Find: Staff Screen

- 2. Enter all or part of staff Last Name, First Name.
- 3. Click **Find** or press **ENTER**. Search Results displays a list of matching criteria.
- 4. Click line of staff name. Line highlights.

5. Click again or click <u>sect</u>. Find: Staff screen closes and staff name displays.

Staf	f		Orient./Mobility Specialist	
X	Line	Staff Name	Role	Other
		Green, Tom	Case Carrier	Physical Therapist
	2	User, Admin (Teacher Specialist	Ps y chologist
	3	Smith, John +		Reader
				School Muso-

Figure 3-400 Eligibility Determination - Non Eligible Child Screen Staff Section Role Selection

6. Click the **Role** drop-down and select the staff role.

Add staff names:

- 1. Click Add on the Staff bar. A new line is added to the grid.
- 2. Repeat the procedure above.
- 3. If needed, check is on the line of the staff name to remove. The row is removed.

The Other Participants section will allow for participant names that are not available in the Staff directory.

- 1. Click the Add on the Other Participants bar. A new row will be added.
- 2. Enter the Name and Job Title of the participant.
- 3. If needed, check is on the line of the staff name to remove. The row is removed. Use is to spellcheck. Use of for more space.
- 4. The Contact Person drop-down displays staff member names from the Staff Participants list. Select the appropriate staff participant's name to display as the **Contact Person**.
- 5. Enter that person's **Phone** number.
- 6. Click Save .

The document can be printed, validated and finalized

Chapter Four: DOCUMENTS WITH UNIQUE FUNCTIONALITY

In this chapter, the following topics are covered:

- ► What SE Documents have unique features
- ▶ What is the impact on the student's special education status

SE DOCUMENTS WITH SPECIAL FEATURES

All documents within Synergy SE have similar functionality; however there are certain documents that contain unique features which affect the student's special education status as well as process movement within the application. The following list briefly explains those documents.

INITIAL

<u>GENAZ 04 – Notice of Evaluation Decision</u>

If the Team determines that the student WILL NOT be evaluated, the decision to NOT evaluation option is selected. Finalizing the Notice of Evaluation Decision will exit the student from Synergy SE. All previously created documents including this notice are sent to Historical Documents.

INITIAL, RE-EVAL

• GENAZ 08 – Notice of Eligibility

If the Team determines that the student is NOT ELIGIBLE FOR PLACEMENT, the NOT eligible for placement option is selected. Finalizing the Notice of Eligibility will exit the student from Synergy SE. All previously created documents including this notice are sent to Historical Documents.

INITIAL, REVIEW, RE-EVAL

• <u>GENAZ 12 – IEP</u>

The IEP is located at the end of each of the processes (except for Transfer). The IEP is the "trigger" document that will close out the current process and move the student to the next appropriate process. A copy of the draft IEP always moves with the student to the next process. All created and finalized documents (including the IEP) will be sent to Historical Documents.

RE-EVAL

GENAZ 15 – Notice of Reevaluation Waiver

A Reevaluation Waiver is conducted when the district and the student's team agree that the Triennial Evaluation will be waived. When the Notice of Re-Evaluation Waiver has been finalized, the student will automatically move to the Annual Review process. A copy of the draft IEP (yellow icon) will move with the student.

• GENAZ 20 – Notice of Termination

A Notice of Termination is created when a student is terminated from a specific service or all services. If terminating from ALL services is selected, Finalizing the Notice to Terminate will exit the student from Synergy SE. All previously created documents including this notice are sent to Historical Documents.

PRESCHOOL

GENAZ 26 – Notice of Evaluation Decision

The Notice of Evaluation Decision works similarly to GENAZ 04 but is specific to Preschool students. If the Team determines that the student WILL NOT be evaluated, the decision to NOT evaluation option is selected. Finalizing the Notice of Evaluation Decision will exit the student from Synergy SE. All previously created documents including this notice are sent to Historical Documents.

AD HOC

• GENAZ 100 – Notice of Graduation

The Notice of Graduation is created when the student graduates from high school. Finalizing the Notice of Graduation will exit the student from Synergy SE. All previously created documents including the graduation notice will be saved in Historical Documents. The draft IEP (yellow icon) must be deleted prior to finalizing the notice.


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