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| **FORM TYPE** |
| [ ] **Initial Schedule** |
| [ ] **IEP Update** |
| [ ]  **Schedule Change** |
| [ ] **Drop Student** |

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| **LRE FORM****GRADES 9-12** **School Year 20** |

 

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| **Graduation Type:** | **Choose an item.** |  |  |
|  |  |
| **Student**  | **Today’s Date** **School**  |
| **Race** **Gender**  | **SPED Teacher**  |
| **Date of Birth**  | **Grade Level**  |
| **MSIS Number**  | **Disability**  |
| **IEP Meeting Date**  | **Related Service(s)\***  |
| **Current Eligibility Date**  |  **Provider(s)\***  |
|  |  **\*Related Service(s) – L/S, OT, PT, Trans., Couns.** |
| **PLEASE LIST ALL COURSES IN THE STUDENT’S SCHEDULE – SPED & GEN. ED.**  |
| Term | Period |  **Course Code (SPED Only)** | **Course Title****(All)** | **Teacher****(All)** |
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| **FEDERAL PLACEMENT** |
| **(Please check one)** |
| **[ ]**  |  **SA** 80% - 100% |
| **[ ]**  |  **SB** 40% -79% |
| **[ ]** **[ ]**  |  **SC** less than 40% |
|  |  **SH** Homebound |

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| **Please complete if student is dropped from SPED.** |
| **[ ] 1. Dismissed from speech** |
| **[ ] 2. Moved to**  |
| **[ ] 3. No longer attending school**  |
| **[ ] 4. Other**  |

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| Teacher send completed form to: |
| MSIS Contact or counselor and |
| Data Management: fax (601-825-9612) or email: Leigh - leigh.townsend@rcsd.ms or Diana - dknop@rcsd.ms  |
|  |