|  |  |  |
| --- | --- | --- |
| **Name:**  | **DOB:**  | **Grade:** |
| **School:**  | **Previous District:**  |

As soon as an IEP is received (whether it is brought by parent/guardian or sent with records by the transferring district or sent by Shannon Bailey with RCSD), obtain the required signatures on RCSD IEP first page and IMMEDIATELY begin serving the student based on the current IEP of the student. A RCSD IEP MUST be written within two weeks of the student enrolling. Add student to the district computer tracking system, obtain signatures from required meeting participants in the Participant Section, and have parent sign Written Parental Permission for Initial Placement.

|  |
| --- |
| **Immediately:**  |
| ☐ | Contact Shannon Bailey (sha500@rcsd.ms) with the above student information, as well as, any information/documentation the parent or previous district has already provided. |

|  |
| --- |
| **Prior to the IEP Meeting:** |
| ☐ | Coordinate with Shannon Boyce (sha207@rcsd.ms) to schedule IEP meeting date and time (*A psychometrist must be in attendance of ALL out of state transfer meetings).* |
| ☐ | Contact parent to complete the Developmental History (ages 3-9 or 10-21) by phone interview or in person. |
| ☐ | Coordinate with SLP to complete the Hearing/Vision Screening. |
| ☐ | Complete the Teacher Narrative (if the student has been enrolled for at least two weeks). |
| ☐ | Begin collecting ABA data (must be collected for at least 10 days).  |
| ☐ | Develop a draft IEP in the district computer tracking system based on the IEP from the previous district.  |
| ☐ | Send parent (and student if they are turning 14 during the current school year or older) the Meeting Invitation with Parent Response Form completed in and printed from the district computer tracking system. Make a copy of both forms before sending. |

|  |
| --- |
| **During the IEP Meeting:** |
| ☐ | Have parent sign Procedural Safeguards Notice statement on the first page of the RCSD IEP. |
| ☐ | Complete the Authority to Release Information and have the parent sign. Obtain names of doctors or facilities that need to be contacted for information. |
| ☐ | Present the draft IEP.  |
| ☐ | Have parent sign Written Parental Permission for Initial Placement on the first page of the RCSD IEP. |
| ☐ | Obtain signatures on first page of the RCSD IEP. |
| ☐ | Complete Minutes of Meeting and obtain signatures. |
| ☐ | Complete Prior Written Notice and explain the 7-day waiver to the parent. Parent should choose the appropriate box and sign/date. Make a copy of the Prior Written Notice and give the original to the parent/guardian. |

|  |
| --- |
| **After the IEP Meeting:** |
| ☐ | Complete LREand submit to Leigh Townsend.  |
| ☐ | Upload completed packet in the district computer tracking system under the attachments section in the student record.  |
| ☐ | Add copies of the above documents to the student’s folder.  |

|  |
| --- |
| **Two Weeks after the IEP (If the student has been enrolled for LESS than two weeks):** |
| ☐ | Complete the Teacher Narrative and collect any other data requested by psychometrist.  |
| ☐ | Complete the Behavior Summary Form using the ABC data collected.  |
| ☐ | Scan and send copies of these documents to Shannon Boyce (sha207@rcsd.ms) and add them to the student’s folder. |