

Checklist for Special Education Evaluation

3-Year _____ Initial _____ Grade _____ M/F

Name _____ Birthday _____

Test Data	Completed
RTI Data (if needed)	
Consent for Evaluation (dated within a year of meeting)	
Vision Screening	
Hearing Screening	
Speech Screening	
Social Developmental History (3 months prior to meeting)	
Vineland-Adaptive	
WJIII Teacher Report	
WIAT-III Test	
Behavior Observation #1	
Behavior Observation #2	
Psychological Evaluation	
Medical Statement	
Communication Evaluation	
EB Achenbach - Teacher Report	
EB Achenbach - Parent Report	
Conners - Teacher Report	
Conners - Parent Report	
OT Evaluation	
PT Evaluation	
Regular Education Teacher Report	
Special Education Teacher Report	
Request for Psychological - Faxed	
ILP	

Checklist for Special Education Annual Meeting

Name _____ Birthday _____ Grade _____ M/F

Document/Data/Etc.	Completed
Progress Monitoring Data	
Grades	
Attendance	
State Assessment Scores	
Other Assessment Scores (i-Ready, etc.)	
Teacher Report/Checklist #1	
Teacher Report/Checklist #2	
Behavior Observation #1	
2 Meeting Notices (2 weeks before then 1 week before)*	
Conference Summary*	
IEP Implementation Acknowledgement*	
Notice of Record Destruction*	
Medicaid Release of Information*	
Medicaid Annual Parent Notification*	
Accommodations Determination Form*	

* Needs Signatures

Things to Remember:

- Lock all Documents after meeting (EXCEPT permission to evaluate. Don't lock until Re-evaluation meeting)
- Don't unlock any locked documents. Single click document and then click "print" to view
- Make sure there is a confidentiality sheet, record of access, and parent contact log in the front of every folder
- Update all parent contacts in IC
- Student Progress Reports must be done at the end of each nine-weeks
- Make sure each folder has the "Medicaid One Time Parent Consent" in their folder (This only has to be signed ONE TIME then put in their folder)

What documentation/tests are needed for what disability?

SLD (Specific Learning Disability)

MMD (Mild to Moderate Disability)

OHI (Other Health Impairment)

VI (Visually Impaired)

**SPECIAL
EDUCATION
DOCUMENTS**