





CONNECTICUT STATE DEPARTMENT OF EDUCATION

Initial Referral and Evaluation


CT-SEDS

July 1, 2022

Referral and Evaluations

CTSEDS STUDENTS RECENT STUDENTS TOOLS ▾ MY ACCOUNT ▾ ADMIN ▾ REPORTING N. REILLY Theresa Ott  

STUDENT INFO ▾ REFERRAL AND EVALUATIONS IEP PROCESS SP PROCESS 504 PROCESS ADMIN ▾

 CSDE Training HOME / DASHBOARD / REFERRAL AND EVALUATIO... Noelle Reilly



Referral and Evaluations

Select action


- Referral and Initial Evaluations Targeted Assessments (Non-Three-Year Reevaluation) Three-Year Reevaluation



Referral and Evaluations

CTSEDS STUDENTS RECENT STUDENTS TOOLS ▾ MY ACCOUNT ▾ ADMIN ▾ REPORTING N. REILLY Theresa Ott  

STUDENT INFO ▾ **REFERRAL AND EVALUATIONS** IEP PROCESS SP PROCESS 504 PROCESS ADMIN ▾

 CSDE Training HOME / DASHBOARD / REFERRAL AND EVALUATIO... Noelle Reilly

Referral and Evaluations

Select action

- Referral and Initial Evaluations Targeted Assessments (Non-Three-Year Reevaluation) Three-Year Reevaluation





Referral and Evaluations

Select action

- Referral and Initial Evaluations
- Targeted Assessments (Non-Three-Year Reevaluation)
- Three-Year Reevaluation





Referral and Evaluations

Select action



Referral and Initial Evaluations



Targeted Assessments (Non-Three-Year Reevaluation)



Three-Year Reevaluation



Referral and Evaluations

Select action

- Referral and Initial Evaluations Targeted Assessments (Non-Three-Year Reevaluation) Three-Year Reevaluation



This process is used to complete a referral and initial evaluation for the student. This process should also be used if changes to the initial evaluations are needed or additional assessments will be added for the initial eligibility determination.

Referral

PPT1

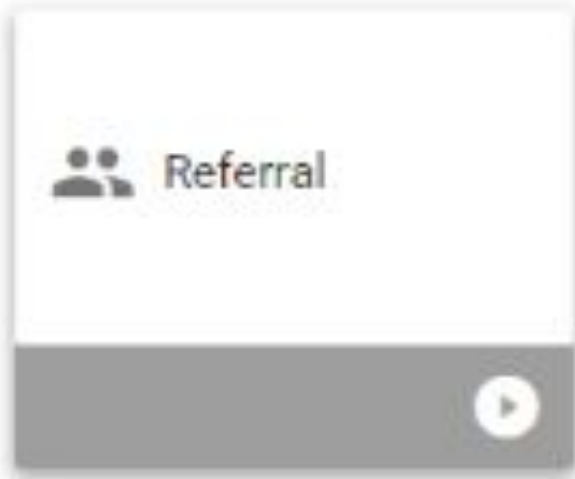
Evaluation Design and Consent

Additional Evaluation Planning

Evaluations

Determination of Eligibility (PPT2)

View and Create Additional Documents



Referral (header indicating which Tile you are on)
Demographic and Parent Information
Referral to Determine Eligibility
Documents





PPT 1

Demographic and Parent Information Scheduling a PPT Meeting

[CREATE NOTICE OF PLANNING AND PLACEMENT TEAM MEETING](#)

Record of Meeting



Record of Meeting

CREATE RECORD OF MEETING



Create the Record of Meeting document from this panel.



A record of Meeting Document is required.

SAVE



Record of Meeting

Create Record of PPT Meeting

▼ Select Associated PPT Meeting Notice

Select ↑	Date Created ↑↓	Meeting Date ↑↓	Meeting Purpose(s) ↑↓	Document ID ↑↓
<input type="checkbox"/>	04/19/2022	04/08/2022	Review a referral to special education and consider/plan an initial evaluation,	780

[SHOW ALL](#)

[CLOSE](#) [SAVE](#) [CREATE DRAFT](#) [CREATE FINAL](#)



Select one of the following

- The student does not have an individualized education program (IEP) at this time
- Restraint/Seclusion Review
- Manifestation Determination
- The student's currently valid IEP was reviewed and is not being revised.

Meeting Date
03/18/2022

Meeting Purpose(s)
Review a referral to special education and consider/plan an initial evaluation

Meeting Attendees

Title	Name	Attended Meeting	Included on Meeting Notice
Student	Noelle Reilly	<input type="checkbox"/>	Yes
Parent	Melody Pond	<input type="checkbox"/>	Yes
Administrator	Sheri Staranchak	<input type="checkbox"/>	Yes
Student's General Education Teacher	Anne Marie Davidson	<input type="checkbox"/>	Yes
Special Education Teacher	Madeline Illinger	<input type="checkbox"/>	Yes

 Reminder: If a required member of the PPT is not present at the meeting, a PPT Attendance document must be created.

Summary

(Required)

Recommendations

Continuing with PPT 1

Meeting Attendance Excusal



Indicate whether any of the required participants did not attend the meeting. If that is the case, create the PPT Attendance Excusal document from this panel.

At least one of the required participants was not in attendance at the PPT Meeting.

SAVE

PPT Decision

[CREATE PRIOR WRITTEN NOTICE](#)

[ENTER PPT DECISION](#)



Enter the team's decision regarding whether to move forward with evaluations. This decision cannot be entered before the date of the first PPT meeting indicated above.

Is evaluation warranted at this time, based on the evidence reviewed?

Date of decision (PPT 1 Meeting Date)

04/08/2022

SAVE



STUDENTS RECENT STUDENTS TOOLS MY ACCOUNT ADMIN REPORTING N. REILLY

STUDENT INFO REFERRAL

CSDE Training HOME / DASHBOARD /

Meeting Attendance

Indicate whether the student is currently being evaluated for a disability.

At least one of the referral questions must be answered.

PPT Decision

Enter the team's decision regarding whether to move forward with evaluations. This decision cannot be entered before the date of the first PPT meeting indicated above.

Is evaluation warranted at this time, based on the evidence reviewed?

Date of decision (PPT 1 Meeting Date)
03/18/2022

Documents

View documents that have been created for the student from this page, and create or attach additional relevant documents.

SAVE ENTER PPT DECISION SAVE ATTACH DOCUMENTATION

Enter PPT Decision

Select the decision made by the team based on a review of the referral.

Is evaluation warranted at this time, based on the evidence reviewed?

Yes (PPT will complete Prior Written Notice and Consent for Evaluation) No (PPT will complete Prior Written Notice)

(Required)

Date of decision (PPT 1 Meeting Date)
03/18/2022

CLOSE SAVE




▼ PPT Decision

[CREATE PRIOR WRITTEN NOTICE](#)

[ENTER PPT DECISION](#)

 Enter the team's decision regarding whether to move forward with evaluations. This decision cannot be entered before the date of the first PPT meeting indicated above.

Is evaluation warranted at this time, based on the evidence reviewed? 

Date of decision (PPT 1 Meeting Date)

02/14/2022

This panel has two actions

[CREATE PRIOR WRITTEN NOTICE](#)

[ENTER PPT DECISION](#)



Create Prior Written Notice

 Complete all of the following data fields to create a Prior Written Notice document. A separate Prior Written Notice document must be created for each action the district is proposing or refusing.

Student
Cook

Date
04/21/2022 

Parent/Guardian(s)
Donna Mills

CT Training District is providing notice of the following

1

- The District is proposing to
 - The District is refusing the request to
- (Required)

2

- initiate
 - change
- (Required)

3

- identification/eligibility
 - an evaluation
 - an educational placement
 - the provision of FAPE (IEP)
- (Required)

Description / Reason

Description of the proposed or refused action:



Waterbury School District is providing notice of the following

- | | | |
|---|--|--|
| 1
<input checked="" type="checkbox"/> The District is proposing to
<input type="checkbox"/> The District is refusing the request to | 2
<input checked="" type="checkbox"/> initiate
<input type="checkbox"/> change | 3
<input type="checkbox"/> identification/eligibility
<input checked="" type="checkbox"/> an evaluation
<input type="checkbox"/> an educational placement
<input type="checkbox"/> the provision of FAPE (IEP) |
|---|--|--|

Description / Reason

Description of the proposed or refused action:

(Required)

The reason for proposing or refusing to take action:

(Required)

Description (including the date) of each evaluation procedure, assessment, record, or written report the school district used as a basis for the proposed/refused action:

(Required)

Date this action will take effect

09/26/2022



Other options the PPT considered and rejected:

- Instruction in the general education environment with supplementary aids and services



If we have agreed to evaluate, what does the evaluation look like?



Referral and Evaluations

Select action

- Referral and Initial Evaluations Targeted Assessments (Non-Three-Year Reevaluation) Three-Year Reevaluation

This process is used to complete a referral and initial evaluation for the student. This process should also be used if changes to the initial evaluations are needed or additional assessments will be added for the initial eligibility determination.

Referral

Complete

PPT1

Complete

Evaluation Design and Consent

Additional Evaluation Planning

Evaluations

Determination of Eligibility (PPT2)

View and Create Additional Documents



Evaluation
Design and
Consent



Evaluation Design and Consent Demographic and Parent About this Evaluation Assessment Plan



∨ About this Evaluation

∨ Initial Evaluation

Evaluation Procedures

- The tests/evaluation procedures listed below were recommended
- The PPT has decided that the available evaluation information listed below is sufficient to determine the child's eligibility and needs

(Required)

SAVE



▼ Assessment Plan

i Choose the areas of assessment and test/evaluation procedures that will be part of the student's evaluation, and indicate who the evaluator will be.

▼ Tests/Evaluation Procedures

Area of Assessment	Test/Evaluation Procedure(s)	Evaluator
<input checked="" type="checkbox"/> Developmental History	Developmental Profile III (DP-III) +	Case Manager
<input checked="" type="checkbox"/> Intellectual/Cognitive Functioning	Wechsler Intelligence Scale for Children 5th Edition (W +	Other School Psychologist
<input type="checkbox"/> Academic Performance	 +	
<input type="checkbox"/> Behavioral/Social/Emotional	 +	
<input type="checkbox"/> Adaptive Behavior	 +	
<input type="checkbox"/> Communication (Speech/Language)	 +	
<input type="checkbox"/> Motor Development (Fine)	 +	



▼ Assessment Plan

i Choose the areas of assessment and test/evaluation procedures that will be part of the student's evaluation, and indicate who the evaluator will be.

▼ Tests/Evaluation Procedures



Area of Assessment	Test/Evaluation Procedure(s)	Evaluator
<input checked="" type="checkbox"/> Developmental History	Developmental Profile III (DP-III) +	Case Manager
<input checked="" type="checkbox"/> Intellectual/Cognitive Functioning	Wechsler Intelligence Scale for Children 5th Edition (W +	Other School Psychologist
<input type="checkbox"/> Academic Performance	+	
<input type="checkbox"/> Behavioral/Social/Emotional	+	
<input type="checkbox"/> Adaptive Behavior	+	
<input type="checkbox"/> Communication (Speech/Language)	+	
<input type="checkbox"/> Motor Development (Fine)	+	



Assessment Plan

Choose the areas of assessment and test/evaluation procedures that will be part of the student's evaluation, and indicate who the evaluator will be.

Tests/Evaluation Procedures



Area of Assessment	Test/Evaluation Procedure(s)	Evaluator
<input checked="" type="checkbox"/> Developmental History	Developmental Profile III (DP-III) +	Case Manager
<input checked="" type="checkbox"/> Intellectual/Cognitive Functioning	Wechsler Intelligence Scale for Children 5th Edition (W +	Other School Psychologist
<input type="checkbox"/> Academic Performance	+	
<input type="checkbox"/> Behavioral/Social/Emotional	+	
<input type="checkbox"/> Adaptive Behavior	+	
<input type="checkbox"/> Communication (Speech/Language)	+	
<input type="checkbox"/> Motor Development (Fine)	+	



▼ Assessment Plan

i Choose the areas of assessment and test/evaluation procedures that will be part of the student's evaluation, and indicate who the evaluator will be.

▼ Tests/Evaluation Procedures

Area of Assessment	Test/Evaluation Procedure(s)	Evaluator
<input checked="" type="checkbox"/> Developmental History	Developmental Profile III (DP-III) +	Case Manager
<input checked="" type="checkbox"/> Intellectual/Cognitive Functioning	Wechsler Intelligence Scale for Children 5th Edition (W +	Other School Psychologist
<input type="checkbox"/> Academic Performance	+	
<input type="checkbox"/> Behavioral/Social/Emotional	+	
<input type="checkbox"/> Adaptive Behavior	+	
<input type="checkbox"/> Communication (Speech/Language)	+	
<input type="checkbox"/> Motor Development (Fine)	+	



Assessment Plan

Choose the areas of assessment and test/evaluation procedures that will be part of the student's evaluation, and indicate who the evaluator will be.

Tests/Evaluation Procedures

Area of Assessment	Test/Evaluation Procedure(s)	Evaluator
<input checked="" type="checkbox"/> Developmental History	Developmental Profile III (DP-III) +	Case Manager
<input checked="" type="checkbox"/> Intellectual/Cognitive Functioning	Wechsler Intelligence Scale for Children 5th Edition (W +	Other School Psychologist
<input type="checkbox"/> Academic Performance	 +	
<input type="checkbox"/> Behavioral/Social/Emotional	 +	
<input type="checkbox"/> Adaptive Behavior	 +	
<input type="checkbox"/> Communication (Speech/Language)	 +	
<input type="checkbox"/> Motor Development (Fine)	 +	



▼ Create Consent to Conduct Evaluation Document

Select the type of consent requested and how the parent will sign the consent form, and then create the document from this panel.



- If the parent chooses to sign digitally during the meeting: the system will capture whether Consent was received or if the request for Consent was Denied when the document is finalized.
- If the parent chooses to sign in the parent portal: the system will capture if Consent was received or if the request for Consent was Denied when the parent enters the response in the portal.
- If the parent chooses to sign a hard copy of the Consent for Evaluation Form: once you have received the signed form back, return to this page to enter the Date the District received the signed form.

The District is Asking for your Consent to Conduct:

- An initial evaluation of the student.

The district will not proceed with an initial evaluation without your written consent.

- Additional assessments for initial eligibility determination

Select this option if consent for initial evaluation has already been granted, but additional assessments have been deemed necessary.

- A three-year reevaluation of the student

- Targeted assessments (non-three-year reevaluation)

Procedural Safeguards

- A copy of the Procedural Safeguards in Special Education is enclosed.

- A copy of the Procedural Safeguards in Special Education was provided to you previously this school year. If you would like another copy of the Procedural Safeguards please contact

Name

CDSE Team

Title

CDSE Team

at

Phone

777-888-9999

Select relevant option for parent signature

- The parent is in the meeting and will sign the document digitally.
- The document will be sent electronically to the parent portal for signature.
- The parent will sign a hard copy of the document.

(Required)



▼ Create Consent to Conduct Evaluation Document

Select the type of consent requested and how the parent will sign the consent form, and then create the document from this panel.



- If the parent chooses to sign digitally during the meeting: the system will capture whether Consent was received or if the request for Consent was Denied when the document is finalized.
- If the parent chooses to sign in the parent portal: the system will capture if Consent was received or if the request for Consent was Denied when the parent enters the response in the portal.
- If the parent chooses to sign a hard copy of the Consent for Evaluation Form: once you have received the signed form back, return to this page to enter the Date the District received the signed form.

The District is Asking for your Consent to Conduct:

- An initial evaluation of the student.

The district will not proceed with an initial evaluation without your written consent.

- Additional assessments for initial eligibility determination

Select this option if consent for initial evaluation has already been granted, but additional assessments have been deemed necessary.

- A three-year reevaluation of the student

- Targeted assessments (non-three-year reevaluation)

Procedural Safeguards

- A copy of the Procedural Safeguards in Special Education is enclosed.

- A copy of the Procedural Safeguards in Special Education was provided to you previously this school year. If you would like another copy of the Procedural Safeguards please contact

Name
CDSE Team

Title
CDSE Team

at

Phone
777-888-9999

Select relevant option for parent signature

- The parent is in the meeting and will sign the document digitally.
- The document will be sent electronically to the parent portal for signature.
- The parent will sign a hard copy of the document.

(Required)



STUDENTS RECENT STUDENTS TOOLS MY ACCOUNT ADMIN REPORTING N. REILLY

STUDENT INFO REFERENCE

CSDE Training HOME / DASHBOARD /

Create Consent to Evaluate [X]

Note: This option should only be selected when you are sending home the Consent for Assessment Form to the parent/guardian for signature. Once you have received the signed form back, return to this page to enter the Date the District received the Consent for Evaluation Form.

Date Sent
03/07/2022

CANCEL **CREATE DRAFT** **CREATE FINAL**

CDSE Training

HOME / DASHBOARD /

CDSE Training

- If the parent of the student is using the portal.
- If the parent of the student is using the signed form.

The District is Asking for

An initial evaluation of the student
The district will not process the student's request for an initial evaluation until the district receives the signed form.

Additional assessments for initial eligibility determination
Select this option if consent for initial evaluation has already been granted, but additional assessments have been deemed necessary.

A three-year reevaluation of the student

Targeted assessments (non-three-year reevaluation)

Procedural Safeguards

A copy of the Procedural Safeguards in Special Education is enclosed.

A copy of the Procedural Safeguards in Special Education was provided to you previously this school year. If you would like another copy of the Procedural Safeguards please contact

Name: CDSE Team Title: CDSE Team at Phone: 777-888-9999

Select relevant option for parent signature

The parent is in the meeting and will sign the document digitally.

The document will be sent electronically to the parent portal for signature.

The parent will sign a hard copy of the document.

CREATE CONSENT DOCUMENT **SAVE**

Consent Dates



The district will not proceed with an initial evaluation without your written consent.

Page 1 of 2

Consent to Conduct an Initial Evaluation/ Reevaluation

Student Name: Noelle Reilly
DOB: 07/12/2010

Parent or Adult Student Approval

- I give my consent for the CSDE Training Public Schools to conduct the evaluations described above. I understand that this consent may be revoked at any time.
- I do not give my consent for the CSDE Training Public Schools to conduct the evaluations described above.

Parent/Guardian or Adult Student Signature

Date

Date received by school district:

*Failure of the parent to respond to a request from the Board for consent to conduct an initial evaluation within 10 school days from the date of the notice to the parent shall be construed as parental refusal of consent. (RCSA Section 10-76d-8(b))



The district will not proceed with an initial evaluation without your written consent.

Page 1 of 2

Consent to Conduct an Initial Evaluation/ Reevaluation

Student Name: Noelle Reilly
DOB: 07/12/2010

Parent or Adult Student Approval

- I give my consent for the CSDE Training Public Schools to conduct the evaluations described above. I understand that this consent may be revoked at any time.
- I do not give my consent for the CSDE Training Public Schools to conduct the evaluations described above.



Parent/Guardian or Adult Student Signature

03/07/22

Date

Date received by school district:

03/07/22

*Failure of the parent to respond to a request from the Board for consent to conduct an initial evaluation within 10 school days from the date of the notice to the parent shall be construed as parental refusal of consent. (RCSA Section 10-76d-8(b))



The parent will sign a hard copy of the document.

CREATE CONSENT DOCUMENT

SAVE

Consent Dates

ENTER CONSENT DATE

i This section reflects the student's Consent for Evaluation Dates. This is where the Consent for Evaluation Date can be entered outside of form creation.

Initial Consent for Evaluations Date

Consent Date for Additional Assessments for Initial Eligibility

Reevaluation Consent Date

Targeted Assessments Consent Date

SAVE

Additional Evaluation Options

- PPT is considering Specific Learning Disability (SLD)
- PPT has determined that a diagnostic placement will be initiated in order to determine initial or continued eligibility or to develop or revise the student's IEP.

SAVE

∨ Additional Evaluation Options

PPT is considering Specific Learning Disability (SLD)

PPT has determined that a diagnostic placement will be initiated in order to determine initial or continued eligibility or to develop or revise the student's IEP.

SAVE



An extension to the evaluation timeline is needed

SAVE

Documents

ATTACH DOCUMENTATION

View documents that have been created for the student from this page, and create or attach additional relevant documents.

Create Additional Documents

CREATE DOCUMENT

Reading Worksheet Mathematics Worksheet Written Expression Worksheet

Doc ID	Date Generated	Generated By	Document	Status	Include in Batch
113	06/30/2022	Theresa Ott	Consent to Conduct an Initial Evaluation/ Reevaluation	Final	<input type="checkbox"/>
112	06/30/2022	Theresa Ott	Consent to Conduct an Initial Evaluation/ Reevaluation (Proposed)	Final	<input type="checkbox"/>
110	06/30/2022	Theresa Ott	Prior Written Notice	Final	<input type="checkbox"/>
109	06/30/2022	Theresa Ott	PPT Record of Meeting	Final	<input type="checkbox"/>
108	06/30/2022	Theresa Ott	PPT Record of Meeting	Final	<input type="checkbox"/>
106	06/30/2022	Theresa Ott	Notice of PPT Meeting	Final	<input type="checkbox"/>
105	06/30/2022	Theresa Ott	Parent Notice of Referral to Determine Eligibility for Special Education and Related Services	Final	<input type="checkbox"/>
103	06/30/2022	Theresa Ott	Referral to Determine Eligibility for Special Education and Related Services	Final	<input type="checkbox"/>

Showing 1 to 8 of 8 entries

(8 Documents)



**Evaluations have been
completed**



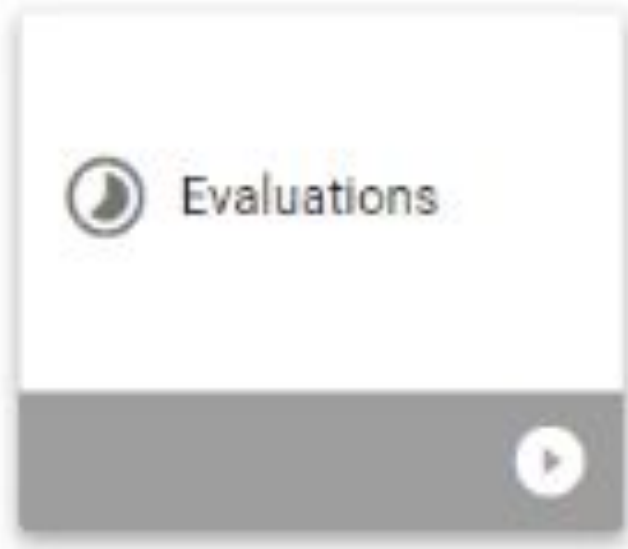
Referral and Evaluations

Select action

- Referral and Initial Evaluations Targeted Assessments (Non-Three-Year Reevaluation) Three-Year Reevaluation

This process is used to complete a referral and initial evaluation for the student. This process should also be used if changes to the initial evaluations are needed or additional assessments will be added for the initial eligibility determination.

Referral Complete	PPT1 Complete	Evaluation Design and Consent Complete	Additional Evaluation Planning Complete	Evaluations ▶	Determination of Eligibility (PPT2) ▶
View and Create Additional Documents ▶					



Evaluations

Demographic and Parent

Assessments/Data and Evaluations



▾ Assessments Data/Evaluations

[ATTACH DOCUMENTATION](#)

Upload finalized assessment reports for all assessment areas included on the Evaluation Consent document.

▾ Academic

Test/Evaluation Procedure
Kaufman Test of Educational Achievement 3rd Edition (KTEA-III)

Evaluator
Other special education teacher

Complete assessment uploaded
(Required)

Will complete after eligibility determination
(Required)

Will not complete
(Required)

▾ Intellectual/Cognitive Functioning

Test/Evaluation Procedure
Cognitive Abilities Test (CogAT)

Evaluator
Other School Psychologist

Complete assessment uploaded
(Required)

Will complete after eligibility determination
(Required)

Will not complete
(Required)

Additional documents are being uploaded

SAVE

▾ History of Assessments

▾ Completed Assessments

Assessments Data/Evaluations

ATTACH DOCUMENTATION

Upload finalized assessment reports for all assessment areas included on the Evaluation Consent document.

Academic

Test/Evaluation Procedure Kaufman Test of Educational Achievement 3rd Edition (KTEA-III)

Evaluator Other special education teacher

Complete assessment uploaded (Required)

Will complete after eligibility determination (Required)

Will not complete (Required)

Intellectual/Cognitive Functioning

Test/Evaluation Procedure Cognitive Abilities Test (CogAT)

Evaluator Other School Psychologist

Complete assessment uploaded (Required)

Will complete after eligibility determination (Required)

Will not complete (Required)

Additional documents are being uploaded

SAVE

History of Assessments

Completed Assessments



Assessments Data/Evaluations

ATTACH DOCUMENTATION

Upload finalized assessment reports for all assessment areas included on the Evaluation Consent document.

Academic

Test/Evaluation Procedure
Kaufman Test of Educational Achievement 3rd Edition (KTEA-III)

Evaluator
Other special education teacher

Complete assessment uploaded
(Required)

Will complete after eligibility determination
(Required)

Will not complete
(Required)

Intellectual/Cognitive Functioning

Test/Evaluation Procedure
Cognitive Abilities Test (CogAT)

Evaluator
Other School Psychologist

Complete assessment uploaded
(Required)

Will complete after eligibility determination
(Required)

Will not complete
(Required)

Additional documents are being uploaded

SAVE

History of Assessments

Completed Assessments



Assessments Data/Evaluations

ATTACH DOCUMENTATION

Upload finalized assessment reports for all assessment areas included on the Evaluation Consent document.

Academic

Test/Evaluation Procedure
Kaufman Test of Educational Achievement 3rd Edition (KTEA-III)

Evaluator
Other special education teacher

Complete assessment uploaded
(Required)

Will complete after eligibility determination
(Required)

Will not complete
(Required)

Intellectual/Cognitive Functioning

Test/Evaluation Procedure
Cognitive Abilities Test (CogAT)

Evaluator
Other School Psychologist

Complete assessment uploaded
(Required)

Will complete after eligibility determination
(Required)

Will not complete
(Required)

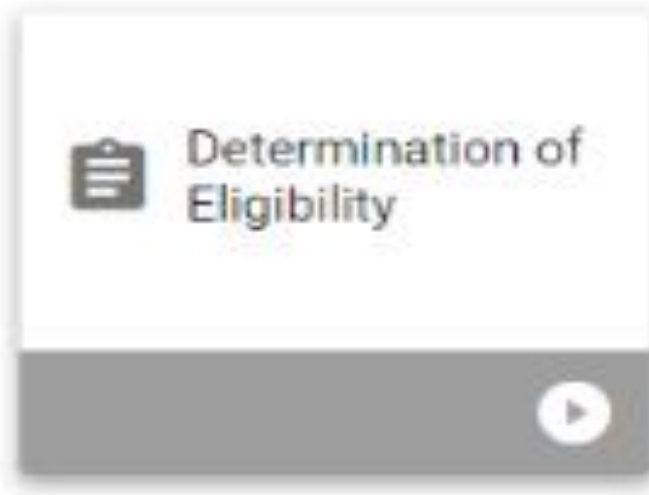
Additional documents are being uploaded

SAVE

History of Assessments

Completed Assessments





Determination of Eligibility

[CREATE A NOTICE OF PLANNING AND PLACEMENT TEAM MEETING](#)

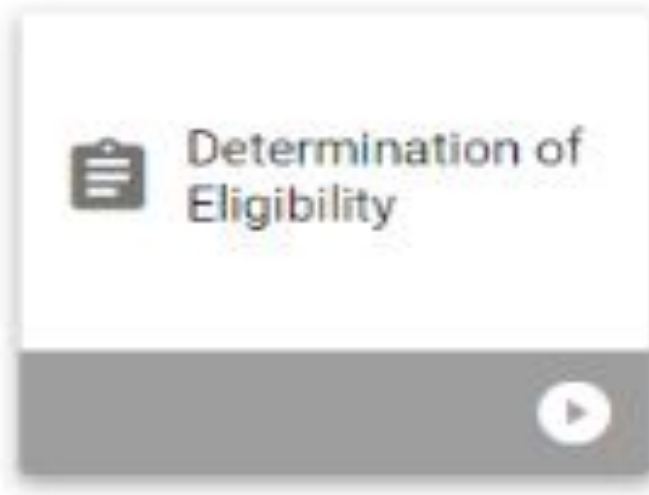
Meeting Attendance Excusal

Record of Meeting

Primary Disability

Determinant Factors





Determination of Eligibility

CREATE A NOTICE OF PLANNING AND PLACEMENT TEAM MEETING

Meeting Attendance Excusal

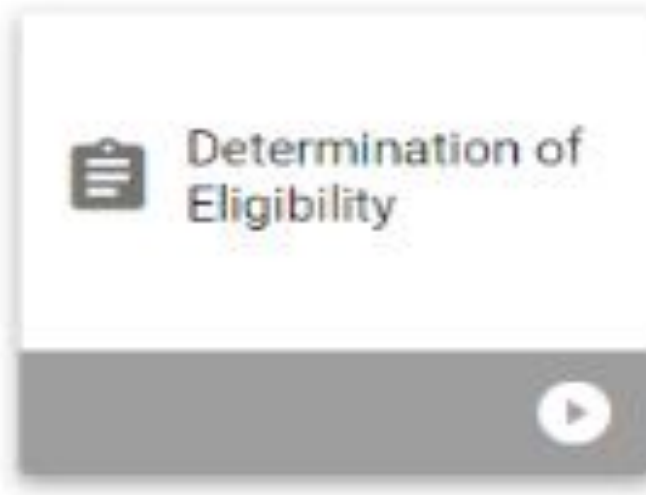
Record of Meeting

Not eligible

Primary Disability

Determinant Factors





Determination of Eligibility

CREATE A NOTICE OF PLANNING AND PLACEMENT TEAM MEETING

Meeting Attendance Excusal

Record of Meeting

Primary Disability *eligible*

Determinant Factors



▼ Primary Disability



Select the primary Disability for the student, if applicable.

Does the child have a disability?

Yes No

Primary Disability

- Autism
- Learning Disability/Dyslexia
- Deaf-Blindness
- Developmental Delay
- Hearing Impairment
- Intellectual Disability
- Multiple Disabilities
- Orthopedic Impairment
- Other Health Impaired
- Learning Disability
- Speech or Language Impairment
- Traumatic Brain Injury
- Visual Impairment
- Other Health Impairment-ADD/ADHD
- Emotional Disturbance
- Specific Learning Disability
- SLD/Dyslexia

SAVE

ENTER ELIGIBILITY DETERMINATION

CREATE PRIOR WRITTEN NOTICE

Whether the student meets or does not meet the eligibility criteria requirements.

The evaluation team finds

for Special Education Services and Related Services.



▼ Primary Disability



Select the primary Disability for the student, if applicable.

Does the child have a disability?

Yes No

Primary Disability

Specific Learning Disability



SAVE

▼ Specific Learning Disability Details

[CREATE MULTIDISCIPLINARY EVALUATION REPORT FOR SLD](#)



Complete the Multidisciplinary Evaluation Report for SLD for the student. The subject-specific worksheets created on the Evaluation Design and Consent page are displayed here.

Subject-Specific Worksheets for SLD

Doc ID	Date Generated	Generated By	Document	Status
657	04/05/2022	Theresa Ott	SLD Subject Worksheets - Reading, Mathematics, Written Expression	Final
659	04/05/2022	Theresa Ott	SLD Subject Worksheets - Reading, Mathematics, Written Expression	Final

SAVE



▼ Determinant Factors



This page is used to enter data relevant for determining the student's eligibility/continued eligibility.

Is there an adverse effect on the child's educational performance?

Yes No

Describe

Is the child's lack of progress a result of lack of appropriate instruction in reading or math?

A child cannot be determined eligible for special education if the determinant factor is a lack of instruction in math or reading (including phonemic awareness, phonics, vocabulary development, comprehension and fluency).

Yes No

Is the student's lack of progress a result of Limited English Proficiency?

A child cannot be determined eligible for special education if the determinant factor is Limited English Proficiency.

Yes No

As a result of the disability, does the child require specially designed instruction?

Specially designed instruction (SDI) means adapting, as appropriate to the needs of an eligible child, the content, methodology, or delivery of instruction to address the unique needs of the child that results from the child's disability and to ensure access of the child to the general education curriculum.

Yes No

SAVE



▼ Eligibility Determination



[ENTER ELIGIBILITY DETERMINATION](#)

[CREATE PRIOR WRITTEN NOTICE](#)



Click "Enter Eligibility Determination" to indicate whether the student meets or does not meet the eligibility criteria requirements.

In consideration of the reported information, the evaluation team finds

The student **meets** the eligibility criteria requirements for Special Education Services and Related Services.

Primary Disability

.....

Eligibility Determination Date

.....

SAVE



Enter Eligibility Determination



If the student was found not eligible for special education and related services, the Date Determined Not Eligible will conclude this evaluation process.

The student meets the eligibility criteria requirements for special education and related services.

The student does not meet the eligibility criteria requirements for special education and related services.

Primary Disability

Intellectual Disability

Eligibility Determination Date

04/19/2022



CLOSE

FINALIZE DETERMINATION



▼ Create Consent for Initial Provision of Special Education



Indicate the procedural safeguards information if applicable, and select how the parent will sign the consent form, then create the Consent for Initial Provision of Special Education document from this panel.

Consider creating the following additional documents at the bottom of the page to share with parents at this point: Restraint and Seclusion Law, Parent Guide to special Education, and Transition Bill of Rights.



- Procedural Safeguards - upon referral or parent request for evaluation and annually thereafter
- A Parent's Guide to Special Education in Connecticut - when student is found eligible and at each PPT meeting thereafter
 - IEP Manual - when student is found eligible and at each PPT meeting thereafter
 - Building a Bridge - when student is found eligible and at each PPT meeting once student becomes "transition age"
 - Transition Bill of Rights - annually to parents of students in grades 6 – 12.
 - Restraint/Seclusion - required at the first PPT for the student.

Procedural Safeguards

A copy of Procedural Safeguards in Special Education was provided to you previously this school year. If you would like another copy of the Procedural Safeguards please contact

Procedural Safeguard Contact

CDSE Team

Procedural Safeguard Title

District Safeguards Contact

Procedural Safeguard Phone

777-888-9999

Select relevant option for parent signature

- The parent is in the meeting and will sign the document digitally.
- The document will be sent electronically to the parent portal for signature.
- The parent will sign a hard copy of the document.

CREATE CONSENT DOCUMENT

SAVE



Consent Dates

ENTER CONSENT DATE

ENTER PARENT REVOCATION OF CONSENT

i This section reflects the student's Consent for Initial Provision of Special Education Dates. This is where the Consent Date can be entered outside of form creation.

Initial Consent for Provision of Services Date
04/19/2022

SAVE

Enter Consent for Initial Provision of Special Education

i Note: Select the appropriate parent response.

Date Received
04/19/2022

Consent Granted?

No
(Required) Yes

CLOSE

SAVE



Consent Dates

ENTER CONSENT DATE

ENTER PARENT REVOCATION OF CONSENT

i This section reflects the student's Consent for Initial Provision of Special Education Dates. This is where the Consent Date can be entered outside of form creation.

Initial Consent for Provision of Services Date
04/19/2022

SAVE

Enter Consent for Initial Provision of Special Education

i Note: Select the appropriate parent response.

Date Received
04/19/2022

Consent Granted?

No
(Required) Yes

CLOSE

SAVE



ECENT STUDENTS TOOLS MY ACCOUNT REPORTING T. CHOATE

TEAM

Create Consent for Initial Provision of Special Education

Note: This option should only be selected when you are sending home the Consent for Initial Provision of Services From to the parent/guardian for signature. Once you have received the signed form back, return to this page to enter the Date the District received the Consent for Evaluation Form.

Date Sent
04/19/2022

Reasons for Delay

The compliance timeline was not met for this student. Please enter a reason for the delay.

Reason for Delay

- Documented request by parent to reschedule or delay the PPT meeting after agreeing to attend at a particular time and date
- Parent repeatedly failed or refused to produce the child for evaluation
- Student hospitalized/extended absence with medical documentation that the student was not available for evaluation
- OTHER: By selecting this option, the district is acknowledging noncompliance with the State's 45-school day initial evaluation timeline. Explain below.

Include Translated Document

CANCEL CREATE DRAFT CREATE FINAL

levant option for parent signature



SAVE

Eligibility Determination

ENTER ELIGIBILITY DETERMINATION CREATE PRIOR WRITTEN NOTICE

Click "Enter Eligibility Determination" to indicate whether the student meets or does not meet the eligibility criteria requirements.

In consideration of the reported information, the evaluation team finds

The student **meets** the eligibility criteria requirements for Special Education Services and Related Services.

Primary Disability
Intellectual Disability

Eligibility Determination Date
04/15/2022

SAVE

Create Consent for Initial Provision of Special Education

Indicate the procedural safeguards information if applicable, and select how the parent will sign the consent form, then create the Consent for Initial Provision of Special Education document from this panel.

Consider creating the following additional documents at the bottom of the page to share with parents at this point: Restraint and Seclusion Law, Parent Guide to special Education, and Transition Bill of Rights.

- Procedural Safeguards - upon referral or parent request for evaluation and annually thereafter
- A Parent's Guide to Special Education in Connecticut - when student is found eligible and at each PPT meeting thereafter





IEP Process

Select action

Create/Revise IEP

IEP Meeting Information

▶

IEP Overview

▶

Special Considerations

▶

Present Levels, Annual Goals, Supplementary Aids/Services

▶

Secondary Transition

▶

Special Education and Related Services

▶

Removal from General Ed

▶

District and State Testing

▶

PPT Recommendations

▶

Create Prior Written Notice and IEP

▶

