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Exhibit A—Transition Services While Student Is In Disciplinary Alternative Education Program (DAEP)

Student's name: _____

Grade: _____ Original length of DAEP placement: _____

_____ (*student's name*) may begin transitioning back to the locally assigned campus on _____ (*date*) if the following criteria have been met and continue to be met throughout the period of transition:

1. Academic Criteria:

- a. Regularly complete all assignments given to the student within the time frame required by the assignment.
- b. Complete _____ (*additional academic criteria*).

2. Behavioral Criteria:

- a. Adhere to all DAEP rules as set out in the _____ (*for example, DAEP manual*).
- b. List specific goals for the student in accordance with the student's offense.
- c. Receive the recommendation of the DAEP principal for positive behavior.

3. Attendance Criteria:

Be in attendance and on time every assigned day of DAEP placement or present a signed document for an excused absence on the day the student returns to school.

During the student's assignment to the DAEP, the DAEP staff will provide timely written and oral communication to the locally assigned campus regarding this plan, including information regarding the student's educational performance and tasks completed. A log of oral communications and copies of written communications should be included with this plan, as available.

Date of scheduled return to the regular educational setting: _____

Written notice of the student's release date from DAEP was provided to:

- The student's parent or guardian on _____ (*date*); and
- The administrator at the student's regular campus on _____ (*date*).

Exhibit B—Personalized Transition Plan Following Student’s Release from Disciplinary Alternative Education Program (DAEP)

Student’s name: _____

Grade: _____ Original length of DAEP placement: _____

Date of scheduled return to the regular classroom: _____

In developing this personalized transition plan, the following documentation provided by the DAEP coordinator was considered:

- An assessment of the student’s academic growth while attending the DAEP; and
- The results of any assessment instruments administered to the student.

The following individuals provided assistance and recommendations for the development of the student’s personalized transition plan (*check all that apply*):

- The campus behavior coordinator;
- The student’s classroom teachers who are or may be involved in implementing this plan:

Classroom teacher	Subject

- School counselor(s);
- District peace officer(s);
- Campus school resource officer(s);
- Licensed clinical social worker(s); and
- Other appropriate District personnel, including: _____ (*list any other positions*).

Based on the assistance and recommendations of the transition team, the best educational placement for this student has been determined to be: _____ (*describe best educational placement*).

Transition activities following the student’s return to the regular classroom include (*check all that apply*):

- Counseling

PLACEMENT IN A DISCIPLINARY ALTERNATIVE EDUCATION SETTING
DISCIPLINARY ALTERNATIVE EDUCATION PROGRAM OPERATIONS

FOCA
(EXHIBIT)

- Behavioral management
- Academic assistance (concentrated on the student's academic or career goals)
- Mental health services provided by:
 - District or campus
 - A local mental health authority
 - Private or public entity
- Providing parents with information about requesting a full individual and initial evaluation for special education services
- Regular review dates of the student's progress toward the student's academic or career goals

To coordinate the student's transition, the regular campus administrator or designee (*choose one below*):

- Met with the student's parent or person standing in parental relation to the student to coordinate plans for the transition on: _____ (*date met with parent*)
- Attempted but was unable to meet with the parent or person standing in parental relation to the student to coordinate plans for the transition.

Name of campus administrator: _____

Signature of campus administrator: _____

Date: _____