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## Field label

PHYSICAL ARRANGEMENT OF ROOM

LESSON PRESENTATION

ASSIGNMENTS/WORKSHEETS

**TEST TAKING** 

**ORGANIZATION** 

**BEHAVIORS** 

SPECIAL CONSIDERATIONS

Specify the diagnosed physical or mental impairment:

Major Life Activity (Is the student "substantially limited"...)

Assessment Area (Proposed Assessment)

**Evaluation Techniques (Proposed Assessment)** 

Grade

Categories

**Edit Credentials** 

Grade

Category

District type

Category

Title 1 indicator

Kind. Sched.

CAS02

MA Setting

Contact method

Learner's Primary language

Evaluation Area (Edit Materials...)

The District proposes to conduct an evaluation...

Description of other options the team considered...

Other factors affecting this proposal (i.e.,...

Materials and Procedures (Edit Materials...)

Evaluators (Edit Materials...)

Statement of adaptations needed to conduct this evaluation:

Description of other options the team considered and the...

Description of each evaluation procedure, test, record...

Materials and Procedures (Edit Materials...)

Evaluators (Edit Materials...)

Evaluation Area (Edit Materials...)

Description of other factors affecting the proposal:

Description of each evaluation procedure, test, record or...

Explanation of why the district proposes to take action:

Source of information

Choose category (when importing tests)

Questions 1 - 6

Grade Level

Grade Level

Evaluation Area (Edit Materials...)

The District proposes to conduct an evaluation...

Other factors affecting this proposal (i.e.,...

Description of each evaluation procedure, test, record or...

Materials and Procedures (Edit Materials...)

Evaluators (Edit Materials...)

The evaluation will be conducted at:

Statement of adaptations needed to conduct this evaluation:

Describe the other options considered and the...

Services

Frequency

Grade

District-wide Assessment: (List each assessment...)

District-wide Assessment: (If YES... If NO...)

MCA-II w/accom listed, TEAE w/accom listed

Services (Program Modifications, Supports and...)

Services (Program Modifications, Supports and...)

Adaptive Equipment (explain:)

Special Transportation (explain:)

Federal Setting

PROGRESS REPORTING (When and how...)

School Year (Courses of Study)

Grade (Courses of Study)

Courses (Courses of Study)

Transition Area

Native Language

Agency Providing Service on the IEP

Program Supports for School Personnel

Services (Supplementary Aids and Services)

Program Supports for School Personnel

PROGRESS REPORTING (When and how...)

Contact method

Adaptive Equipment (explain:)

Services (Program Supports for School Personnel)

Services (Child Specific Paraprofessional Support)

Services (Program Supports for School Personnel)

Relationship to child

How will progress toward meeting this annual goal...

Location

Services (contextual menu for Special Education services)

Home Primary Language / Child's Primary Language

Services (Special Education and ESY)

Category/area

Frequency

**Primary Disability** 

Categorical Disability

PROGRESS REPORTING (Part C...)

Status end code

Federal Setting

Federal Child Count Setting #

**Primary Disability** 

Primary Language at Home / Child's Primary Language

DD: Developmental Delay of 1.5 Standard Deviation...

Services (Early Intervention)

Method

Document reason if the 45 day time line was not met:

Race/Ethnicity

Primary Language at Home / Primary Language

Grade

Area

Federal Setting #

Federal Setting #

Service

Description of Actual Services provided

(MA Setting drop down)

Services Description

Day 1-31 (Add/Edit Student)

**Dear Doctor** 

MA Setting

Relationship

Insurance Type

Claim File Indicator

MA eligible

Special Education Primary Disability Classification

RACE/ETHNICITY

HOME PRIMARY LANGUAGE

STUDENT GRADE LEVEL

**ECONOMIC INDICATOR** 

STATUS END

STATE AID CATEGORY

LAST LOC OF ATTEND

DISTRICT TYPE

PRIM DISAB INSTRC SETNG

**TYPE** 

TRANSPORTING DISTRICT TYPE

TRANSPORTATION CATEGORY CODE

SUPPLEMENTAL EDUCATIONAL SERVICES

The purpose of this meeting is:

The meeting will be at (Room Number-Building-Address)

Evaluation Area (Edit Materials...)

Materials and Procedures (Edit Materials...)

Evaluators (Edit Materials...)

Description of the action(s) proposed or refused...

Description of each evaluation procedure, test, record or...

Description of other options the team considered...

Description of other factors affecting the proposal (or refusal)

Explanation of why the district proposes to take...

Description of each evaluation procedure, test, record or...

OPTIONAL - Other options suggested by the District:

Home Language

**Primary Disability** 

RACE/ETHNICITY

NATIVE LANGUAGE

**ECONOMIC INDICATOR** 

STATUS END

LAST LOC OF ATTEND

FEDERAL SETTING

TRANSPORTATION CATEGORY CODE

State Aid Category

School Last Attended

District Type

Federal Setting

District Type

NA

**Primary Disability** 

Native Language

Grade

Status end (Exit reason)
Federal Setting
MA eligible
Relationship to child

Evaluation Area (Edit Materials...)

Materials and Procedures (Edit Materials...)

Evaluators (Edit Materials...) Edit Credentials

## Drop down name

**Notes** 

PHYSICAL ARRANGEMENT OF ROOM

LESSON PRESENTATION

ASSIGNMENTS/WORKSHEETS

**TEST TAKING** 

ORGANIZATION

**BEHAVIORS** 

SPECIAL CONSIDERATIONS

DIAGNOSED IMPAIRMENT

MAJOR LIFE ACTIVITIES

ASSESSMENT AREA

**EVALUATION TECHNIQUES** 

**GRADE LEVEL LONG** 

**USER CATEGORIES** 

**CREDENTIALS** 

GRADE LEVEL LONG

FORM LETTER CATEGORIES

DISTRICT TYPE

**TESTS** 

TITLE 1 SCHOOL INDICATOR

KINDERGARTEN SCHEDULE INDICATOR

CLAIM ADJUSTMENT REASON CODES

MA SETTING

CONTACT METHOD

**LANGUAGES** 

**EVALUATION AREA** 

REASON(S) FOR EVALUATION

**OPTIONS CONSIDERED** 

OTHER FACTORS

MATERIALS AND PROCEDURES

**EVALUATORS** 

**ADAPTATIONS** 

OPTIONS CONSIDERED NEERP

**EVALUATION PROCEDURES (PART B)** 

MATERIALS AND PROCEDURES

**EVALUATORS** 

**EVALUATION AREA (PART C)** 

OTHER FACTORS

**EVALUATION PROCEDURES** 

**EXPLANATION OF PROPOSALS** 

SOURCES OF INFORMATION

**TESTS** 

**LANGUAGES** 

**GRADE LEVEL LONG** 

**GRADE LEVEL LONG** 

**EVALUATION AREA** 

REASON(S) FOR EVALUATION

OTHER FACTORS

**EVALUATION PROCEDURES** 

MATERIALS AND PROCEDURES

**EVALUATORS** 

**LOCATION** 

**ADAPTATIONS** 

OPTIONS CONSIDERED NEERP

SERVICES LIST

SERVICE FREQUENCY

**GRADE LEVEL LONG** 

DISTRICT-WIDE ASSESSMENTS

**TESTING ACCOMMODATIONS** 

**TESTING ACCOMMODATIONS** 

PROGRAM MODIFICATIONS AND SUPPORTS

PROGRAM MODIFICATIONS AND SUPPORTS

ADAPTIVE EQUIPMENT (SERVICES)

SPECIAL TRANSPORTATION (SERVICES)

FEDERAL SETTING

PROGRESS REPORTING

SCHOOL YEAR

TRANSITION GRADE

COURSES OF STUDY

TRANSITION AREA

**LANGUAGES** 

**OUTSIDE AGENCIES** 

Supports for School Personnel Statements

SUPPLEMENTARY AIDS AND SERVICES

Supports for School Personnel Statements

PROGRESS REPORTING

CONTACT METHOD

ADAPTIVE EQUIPMENT (SERVICES)

SUPPORTS FOR SCHOOL PERSONNEL

IEP PARA SUPPORT (SERVICES)

SUPPORTS FOR SCHOOL PERSONNEL

RELATIONSHIP TO CHILD

PROGRESS MEASURES

LOCATION (IEP SERVICES)

SERVICES LIST CHILD

**LANGUAGES** 

SERVICES LIST

**GOAL CATEGORIES** 

SERVICE FREQUENCY

**DISABILITIES** 

**DISABILITIES** 

PROGRESS REPORTING

STATUS END

FEDERAL SETTING

FEDERAL SETTING

**DISABILITIES** 

LANGUAGES

IFSP DEVELOPMENTAL DELAY

SERVICES IFSP

SERVICE METHOD

IFSP DELAY REASON

**ETHNICITIES** 

LANGUAGES

GRADE LEVEL LONG

**DESCRIPTION AREA** 

FEDERAL SETTING

FEDERAL SETTING

INTERAGENCY SERVICES

**ACTIVITY LOG DESCRIPTIONS** 

MA SETTING

MENTAL HEALTH SERVICE TYPE

MA ENCOUNTER CODES

**DOCTORS** 

MA SETTING

RELATIONSHIP

**INSURANCE TYPE** 

**CLAIM FILE INDICATOR** 

MA ELIGIBLE

**DISABILITIES** 

**ETHNICITIES** 

**LANGUAGES** 

**GRADE LEVEL LONG** 

**ECONOMIC INDICATOR** 

STATUS END

STATE AID CATEGORY

LAST LOCATION OF ATTENDANCE

DISTRICT TYPE

FEDERAL SETTING

RESIDENT DISTRICT TYPE

TRANSPORTING DISTRICT TYPE

TRANSPORTATION CATEGORY

SUPPLEMENTAL EDUCATION SERVICES

PURPOSE OF TEAM MEETING

MEETING LOCATIONS

**EVALUATION AREA** 

MATERIALS AND PROCEDURES

**EVALUATORS** 

PRIOR WRITTEN NOTICE

**EVALUATION PROCEDURES** 

OPTIONS CONSIDERED

OTHER FACTORS

**EXPLANATION OF PROPOSALS** 

**EVALUATION PROCEDURES** 

OTHER OPTIONS

**LANGUAGES** 

**DISABILITIES** 

**ETHNICITIES** 

**LANGUAGES** 

**ECONOMIC INDICATOR** 

STATUS END

LAST LOCATION OF ATTENDANCE

FEDERAL SETTING

TRANSPORTATION CATEGORY

STATE AID CATEGORY

LAST LOCATION OF ATTENDANCE

DISTRICT TYPE

FEDERAL SETTING

RESIDENT DISTRICT TYPE

RESIDENT SCHOOL DISTRICTS

**DISABILITIES** 

LANGUAGES

**GRADE LEVEL LONG** 

STATUS END FEDERAL SETTING MA ELIGIBLE RELATIONSHIP TO CHILD

**EVALUATION AREA** 

MATERIALS AND PROCEDURES

EVALUATORS CREDENTIALS