GENERAL A	DMINISTRATION DIVISION
Report No.	Α

OGDENSBURG CITY SCHOOL DISTRICT OGDENSBURG, NEW YORK

SUBJECT:

Board of Education Acceptance of Recommendations from the Committee on Special Education, Committee on Preschool Special Education and the 504 Committee for Meetings Held on October 5, 13, 18, 19, 20, 25, 27, 2016.

DATE:

November 7, 2016

REASON FOR BOARD CONSIDERATION:

The Board of Education must review and accept all Committee on Special Education, Committee on Pre-School Special Education and the 504 Committee Recommendations for students in the Ogdensburg City School District.

FACTS AND ANALYSIS:

As is required, the Committee on Special Education, the Committee on Preschool Special Education and the 504 Committee for the Ogdensburg City School District have presented recommendations for placement of students to the Board of Education for acceptance.

RECOMMENDED ACTION:

Moved by _____ and supported by _____ that, having the recommendation of the Committee on Special Education, the Committee on Preschool Special Education and the 504 Committee, the Board of Education of the Ogdensburg City School District does hereby accept the recommendations as presented this 7th day of November, 2016.

APPROVED FOR PRESENTATION TO THE BOARD:

Superintendent

TMV/alf

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D+, , ,		DOB Gende	r# Grd	Disability 111		Meeting	Mtg Date	Ref Date	Outcome	12 Mth		
000029052		07/17/12 F	014 Committee :	Preschool Student with a Disability CPSE		Amendment with No Meeting Held	10/27/16		IEP Change: Remains Classified	Х		
	Primary Star Service	t Date Fut End Date End Date	Service Description		Freq / Cycle Minutes	Delivery Recommendations	Scho Loca					
	Minutes	Continue classificati	on of Presch	ool Student with a Dis	ability							
		Recommendation: 9/6/16-6/20/17 - Special Education Itinerant Teacher services 1 time per week for 60 minutes (home) 9/6/16-6/20/17 - Special Education Itinerant Teacher services 1 time per week for 60 minutes (school) 9/6/16-6/20/17 - Individual Speech services 2 times per week for 30 minutes (home) 9/23/16-6/20/17 - Individual Occupational Therapy services 2 times per week for 30 minutes (home)										
Meet	ing Comments:	s: As School District Representative, I attest that the Board of Education approves the initiation of the services and/or programs(s) listed above.										
		School District Repr	esentative Si	gnature:								
		Date:										

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Description	DOB) Gende	r Grd Disablity		Meeting	Mtg Date Ref Date	Outcome	12 Mth
000029051	07/17/12 F	014 Preschool SI with a Disabi		Amendment with No Meeting Held	10/27/16	IEP Change: Remains Classified	Х
Primary Sta Service	ort Date Fut End Date End Date	Service Description	Freq / Cycle Minutes	Delivery Recommendations	School/ Location		
Minutes	Continue classificat	ion of Preschool Student wi	h a Disability				
	9/6/16-6/20/17 - Spr 9/6/16-6/20/17 - Ind 9/23/16-6/20/17 - In	ecial Education Itinerant Te ecial Education Itinerant Te lividual Speech services 2 ti dividual Occupational Thera Individual Physical Therapy	acher services 1 time pomes per week for 30 minus per services 2 times pe	er week for 60 minutes (sch inutes (home) r week for 30 minutes (home	ool)		
Meeting Comments:	As School District R	Representative, I attest that t	he Board of Education	approves the initiation of the	e services and/or programs(s) li	sted above.	
	School District Repr	resentative Signature:					
	Date:						
					Total Meetings	s: 2	



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ID		DOB	Gender	Grd	Disability		Meeting	Mtg Date	Ref Date	Outcome	12 Mth
000019272 Committee: Co.	mmittee on	04/21		010	Other Health Impairment		Transfer Student/Intake	10/05/16		IEP Change: Remains Classified	
CURRENT YEAR	Primary Service Yes	Start Date 09/19/2016		Service Description Ratio 12:1:1		Freq / Cycle Minutes 6/6 Day Cycle 112 Minutes	Delivery Recommendations 12 students/1 teacher/	1 aide	School/ Location Heuvelton Central School 12:1:1 Classroom	ol (PN)	

Fall 2016 Recommendation (9/19/16-6/23/17): BOCES 12:1:1 classroom placement 6 times per cycle for 112 minutes (Heuvelton) Special Transportation services

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(D		DOB	Gender	Grd Disability			Meeting	Mtg Date	Ref Date	Outcome	12 Mth
000028059	_	03/27	7/11 F	JK Autism	T		Amendment with No Meeting Held	10/27/16		IEP Change: Remains Classified	3
Committee : CSE	Primary Service Yes	Start Date 09/06/2016	Fut. End Date End Date 05/18/2017	Service Description Resource Room		Freq / Cycle Minutes 6/6 Day Cycle 30 Minutes	Delivery Recommendations		School/ Location Kennedy Elementary (F Resource Room	PS)	
CURRENT YEAR	No	09/06/2016	05/18/2017	Speech		3/6 Day Cycle 30 Minutes	Group		Kennedy Elementary (F Speech Classroom	PS)	
CURRENT YEAR	No	09/06/2016	05/18/2017	Speech		3/6 Day Cycle 30 Minutes	Individual		Kennedy Elementary (F Speech Classroom	PS)	
CURRENT YEAR	No	09/06/2016	05/18/2017	Physical Therapy		2/Weekly 30 Minutes	Individual		Kennedy Elementary (F Provider Location	PS)	
	Minut	es: Contin	ue classificatio	n of Autism							
		Resou Group Individ Individ Behav	Speech servio ual Speech ser ual Physical Th	ices 6 times per cycle for es 3 times per cycle for 30 rvices 3 times per cycle fo nerapy services 2 times per tt services 600 minutes per) minutes r 30 minut er week fo	es					
									Total Meetings: 1		

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D		DOB	Gende	Gird	Disability		Meeting	Mtg Date	Ref Date	Outcome	12 Mth
000020043	3.	07/01	/03 F	007	Section 504 Disability		504 Amendment No Meeting Held	10/27/16		Continue Accommodation Plan	
Committee: 50-	Accommo	odation Plan	Committee								
CURRENT YEAR	Primary Service No	Start Date 09/06/2016	Fut. End Date End Date 06/23/2017	Service Description Counseling		Freq / Cycle Minutes 1/6 Day Cycle 30 Minutes	Delivery Recommendations Individual		School/ Location OFA Grades 7-8 (PS) Provider Location		
CURRENT YEAR	No	10/05/2016	06/23/2017	Resource Re	oom	6/6 Day Cycle 40 Minutes			OFA Grades 7-8 (PS) Resource Room		
	Minut	es: Contin	ue classificatio	on of Section	504 Disability						
		Resou Individ		vices 6 times g services 1	per cycle for 40 mir time per cycle for 30						

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ID		DOB	Gender	Grd	Disability		Meeting	Mtg Date	Ref Date	Outcome	12 Mth
000022032 Committee : Ma	dill CSE Si	06/26 ub-Committe		005	Learning Disability		Annual Review	10/27/16		IEP Change: Remains Classified	
CURRENT YEAR	Primary Service Yes	Start Date 09/06/2016		Service Description Resource R		Freq / Cycle Minutes 6/6 Day Cycle 40 Minutes	Delivery Recommendations		School/ Location Madill Elementary (PS) Resource Room		
CURRENT YEAR	No	09/06/2016	06/23/2017	Speech		2/6 Day Cycle 30 Minutes	Group		Madill Elementary (PS) Speech Classroom		
CURRENT YEAR		09/06/2016		Visual Ald N	laterials	Daily Throughout the school day	Evan will be provided v (charts, picture vocabu organizers that suppor	lary, graphic	General Ed. & Special E	d. Classrooms	

Fall 2016 Recommendation: Resource Room services 6 times per cycle for 40 minutes Group Speech services 2 times per cycle for 30 minutes

Fall 2017 Recommendation: No changes

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ID.		DOB	Gender	Grd	Disability		Meeting	Mtg Date	Ref Date	Outcome 42 Mth
000022144 Committee : OF	A Grades	11/27 7-8 Subcomi		007	Other Health Impairment		Program Review	10/27/16		IEP Change: Remains Classified
CURRENT YEAR	Primary Service Yes	Start Date 09/06/2016	Fut. End Date End Date 06/20/2017	Service Description Ratio 15:1:1		Freq / Cycle Minutes 6/6 Day Cycle 80 Minutes	Delivery Recommendations 15 students/1 teacher/1 English & Mathematics		School/ Location OFA Grades 7-8 (PS) 15:1:1 Classroom	
CURRENT YEAR	No	09/06/2016	06/20/2017	Adaptive Phys	sical Education	3/6 Day Cycle 40 Minutes			OFA Grades 7-8 (PS) Gym/Pool	
CURRENT YEAR	No	09/06/2016	06/20/2017	Counseling		1/6 Day Cycle 30 Minutes	Individual		OFA Grades 7-8 (PS) Counselors Office	
CURRENT YEAR	No	09/06/2016	06/20/2017	Skilled Nursin	g Service	6/6 Day Cycle 15 Minutes	Individual		OFA Grades 7-8 (PS) Health Office	

Minutes: Continue classification of Other Health Impairment

Fall 2016 Recommendation:

District 15:1:1 classroom placement 6 times per cycle for 180 minutes Adaptive Physical Education services 3 times per cycle for 40 minutes Individual Counseling services 1 time per cycle for 30 minutes

Shared Supplementary School Personnel services 6 times per cycle for 120 minutes in the areas of science, social studies and art/home & careers

Individual Skilled Nursing services 6 times per cycle for 15 minutes

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(D)		DOB	Gender	Grd	Disability		Meeting	Mtg Date	Ref Date	Outcome	12 Mth
00025238		03/06	5/07 M	004	 As of 11/04/16: Leaming Disability		New Referral	10/25/16	05/24/16	Initial Placement	
committee :	Committee on	Special Ed	ucation								
	Primary Service	Start Date	Fut. End Date End Date	Service Description		Freq / Cycle Minutes	Delivery Recommendations		School/ Location		
	Minute	es: Eligible	e for classificat	tion of Learni	ng Disability						
			016 Recommer irce Room serv		per cycle for 40 minu	ites					
00026034 Committee :	Committee on	11/26 Special Edi		004	Non-Disabled		New Referral	10/25/16	03/30/16	Not Eligible	
	Primary Service	Start Date	Fut. End Date End Date	Service Description		Freq / Cycle Minutes	Delivery Recommendations		School/ Location		
	Minute	s: Not eli	gible for classi	fication unde	r the auspices of Spe	ecial Education					
000021098 Committee :	Committee on	08/13 Special Edi		008	Other Health Impairment		Transfer Student/Intake	10/25/16		IEP Change: Remain Classified	S
	Primary	Start Date	Fut. End Date	Service Description		Freq / Cycle Minutes	Delivery Recommendations		School/ Location		
	Minute	es: Contin	ue classificatio	n of Other H	ealth Impairment						
		Adapti Individ	ve Physical Edual Counseling	lucation servi services 1 t	nt 5 times per week fice 3 times per week ime per week for 30 rieper week for 30 min	for 40 minutes minutes					

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2:14

ID		DOB	Gender	Grd	Disability		Meeting	Mtg Date	Ref Date	Outcome	12 Mth
		Specia	I Transportatio	on services							
000016153 Committee : Co	mmittee or	11/19 Special Edu		012	Speech/Language Impairment		Program Review	10/25/16		IEP Change: Remains Classified	
CURRENT YEAR	Primary Service Yes	Start Date 09/06/2016	Fut. End Date End Date 05/09/2017	Service Description Ratio 6:1:1		Freq / Cycle Minutes 6/6 Day Cycle 360 Minutes	Delivery Recommendations 6 students/1 teacher/1	aide	School/ Location Community Connection 6:1:1 Classroom	ons (BS)	
CURRENT YEAR	No	09/06/2016	05/09/2017	Adaptive Phy	sical Education	2/Weekly 60 Minutes			Community Connection Gym/Pool	ons (BS)	
CURRENT YEAR	No	09/06/2016	05/09/2017	Counseling		4/Weekly 20 Minutes	Group		Community Connection Counselors Office	ons (BS)	
CURRENT YEAR	No	09/06/2016	05/09/2017	Counseling		1/Weekly 60 Minutes	Group		Community Connection Counselors Office	ons (BS)	

Minutes: Continue classification of Speech/Language Impairment

Fall 2016 Recommendation:

Fall 2016 Recommendation:
BOCES Community Connections program 6 times per cycle for 360 minutes
Adaptive Physical Education services 2 times per week for 60 minutes
Group Counseling services 4 times per week for 20 minutes
Group Counseling services 1 time per week for 60 minutes
Special Transportation services

Printed: 10/31/2016

10:37

Page 1

DOB Gender Grd Disability Mto Date **Ref Date** Outcome 12 Mth 000027031 03/15/09 F 002 10/25/16 Speech/Language Program Review IEP Change: Remains Classified Impairment Committee: Kennedy CSE Sub-Committee **Primary** Fut. End Date Freq / Cycle Delivery School/ Service Minutes Recommendations Location Start Date End Date Description CURRENT YEAR 09/06/2016 02/22/2017 6/6 Day Cycle Individual Kennedy Elementary (PS) Yes Speech Speech Classroom 30 Minutes 6/6 Day Cycle Kennedy Elementary (PS) CURRENT YEAR 09/06/2016 02/22/2017 Ratio 12:1:1 12 students/1 teacher/1 aide No 285 Minutes 12:1:1 Classroom Minutes: Continue classification of Speech/Language Impairment Fall 2016 Recommendation: District 12:1:1 classroom placement 6 times per cycle for 225 minutes Group Speech services 6 times per cycle for 30 minutes 10/25/16 000026039 04/09/09 002 Speech/Language Program Review IEP Change: Remains Х Impairment Classified Committee: Kennedy CSE Sub-Committee Freq / Cycle Delivery School/ **Primary** Fut. End Date Service Start Date End Date Description Recommendations Service Minutes Location. Kennedy Elementary (PS) CURRENT YEAR Yes 09/06/2016 06/20/2017 Ratio 12:1:1 6/6 Day Cycle 12 students/1 teacher/1 aide 225 Minutes 12:1:1 Classroom CURRENT YEAR No 09/06/2016 06/20/2017 Assistive Technology 3/For the 10 Individual - 180 minutes per year Kennedy Elementary (PS) Month School 12:1:1 Classroom Year 60 Minutes CURRENT YEAR 09/06/2016 06/20/2017 3/6 Day Cycle Kennedy Elementary (PS) No Speech Group 30 Minutes Speech Classroom 09/06/2016 06/20/2017 1/6 Day Cycle Kennedy Elementary (PS) **CURRENT YEAR** No Occupational Therapy Individual 30 Minutes Provider Location 3/6 Day Cycle Kennedy Elementary (PS) CURRENT YEAR No 09/06/2016 06/20/2017 Individual Speech 30 Minutes Speech Classroom

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ID:	20.2	DOB	Gender	Grd Disabil	(v	Meeting	Mtg Date	Ref Date	Outcome	-12 Mth
	Minut	es: Contin	ue classificatio	n of Speech/Language	Impairment					
		Distric Individ Group	ual Occupation	com placement 6 times nal Therapy services 1 ses 6 times per cycle fo	per cycle for 225 minutes time per cycle for 30 minutes 30 minutes					
00029035 Committee : Ker	nnedy CSE	05/04 Sub-Comm		JK Speech/ Impairm	Language ent	Annual Review	10/25/16		IEP Change: Remains Classified	X
	Primary Service		Fut. End Date End Date	Description	Freq / Cycle Minutes	Delivery Recommendations		School/ Location		
URRENT YEAR	Yes	09/06/2016	11/02/2016	Resource Room	6/6 Day Cycle 30 Minutes			Kennedy Elementary (I Resource Room	PS)	
URRENT YEAR	No	09/06/2016	11/02/2016	Speech	3/6 Day Cycle 30 Minutes	Individual		Kennedy Elementary (I Speech Classroom	PS)	
JRRENT YEAR	No	09/06/2016	11/02/2016	Speech	3/6 Day Cycle 30 Minutes	Group		Kennedy Elementary (F Speech Classroom	PS)	
	Minute	es: Contin	ue classificatio	n of Speech/Language	Impairment					
		Fall 20	16 Recommen	dation:						

Resource Room services 6 times per cycle for 30 minutes Group Speech services 3 times per cycle for 30 minutes Individual Speech services 3 times per cycle for 30 minutes

Fall 2017 Recommendation:

No changes

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ID.		DOB	Gender	Grd	Disability	erisburg City Sc	Meeting	Mtg Date	Ref Date	Outcome	12 Mth
000028041 Committee : Ma	dill CSE S	02/18 ub-Committe		JK	Autism		Program Review	10/20/16		IEP Change: Remains Classified	x
CURRENT YEAR	Primary Service Yes	Start Date 09/06/2016	Fut. End Date End Date 12/21/2016	Service Description Resource Roo	m	Freq / Cycle Minutes 6/6 Day Cycle 30 Minutes	Delivery Recommendations		School/ Location Madill Elementary (PS) Resource Room		
URRENT YEAR	No	09/06/2016	12/21/2016	Speech		6/6 Day Cycle 30 Minutes	Individual		Madill Elementary (PS) Speech Classroom		
	Minut	es: Contin	ue classificatio	n of Autism							
		Resou Direct Individ Specia	Consultant Tea	rices 3 times p acher services rvices 6 times on services	er cycle for 30 3 times per cy per cycle for 30	cle for 30 minutes					

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ID		DOB	Gender	Grd	Disability		Meeting	Mtg Date	Ref Date	Outcome	12 Mth
000028037 Committee: Ma	dill CSE S	02/08 ub-Committe		013	Speech/Language Impairment		Program Review	10/19/16		IEP Change: Remains Classified	
CURRENT YEAR	Primary Service Yes	Start Date 09/06/2016	Fut. End Date End Date 06/23/2017	Service Description Speech		Freq / Cycle Minutes 3/6 Day Cycle 30 Minutes	Delivery Recommendations Individual		School/ Location Madill Elementary (PS) Speech Classroom		
	Minut	Fall 20 Individ Occup	16 Recommer	ndation: rvices 6 time: y Evaluation	Language Impairment s per cycle for 30 minu						

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ID.		DOB	Gender	Grd Disability		Meeting	Mtg Date	Ref Date	Outcome	12 Mth
000201001 Committee : Ker	nedy CSE	01/09 Sub-Comm		006 Deafness		Program Review	10/18/16		IEP Change: Remains Classified	
CURRENT YEAR	Primary Service Yes	Start Date 09/06/2016	Fut. End Date End Date 03/29/2017	Service Description Hearing Impaired Resource Room	Freq / Cycle Minutes 6/6 Day Cycle 40 Minutes	Delivery Recommendations Individual		School/ Location Kennedy Elementary Hearing Impaired Re		
CURRENT YEAR	No	09/06/2016	03/29/2017	Consultant Teacher	6/6 Day Cycle 90 Minutes	Direct - English		Kennedy Elementary (PS) General Education Classroom		
CURRENT YEAR	No	09/06/2016	03/29/2017	Audiological Services	1/Monthly 60 Minutes	Individual - Direct		Kennedy Elementary (BL) General Ed. & Special Ed. Classrooms		
CURRENT YEAR	No	09/06/2016	03/29/2017	Speech	2/6 Day Cycle 30 Minutes	Group		Kennedy Elementary Speech Classroom	y (PS)	
	Minute	es: Contin	ue classificatio	n of Deafness						

Fall 2016 Recommendation:

Individual Hearing Impaired Resource Room services 6 times per cycle for 40 minutes
Direct Consultant Teacher services 6 times per cycle for 90 minutes in the area of English
Individual Direct Audiological services 1 time per month for 30 minutes
Individual Speech services 2 times per month for 30 minutes

Board Action Sheet Meeting Date: 10/13/2016

Ogdensburg City School District DOB Gender Grd Disability Mtg Date **Ref Date** Meeting Outcome 000017237 04/20/99 012 Other Health Reevaluation 10/13/16 IEP Change: Remains Classified Impairment Committee: Committee on Special Education Freq / Cycle Delivery School/ Primary Fut. End Date Service Service Start Date **End Date** Description Minutes Recommendations Location CURRENT YEAR Yes 09/06/2016 12/21/2016 Ratio 8:1:1 6/6 Day Cycle 8 students/1 teacher/1 aide Heuvelton Central School (PN) 44 Minutes 8:1:1 Classroom 09/06/2016 12/21/2016 2/6 Day Cycle Individual Heuvelton Central School (PN) CURRENT YEAR Counseling No 30 Minutes Counselors Office Minutes: Continue classification of Other Health Impairment

Fall 2016 Recommendation:

BOCES 8:1:1 classroom placement 6 times per cycle for 44 minutes (Heuvelton)

Individual Counseling services 2 times per cycle for 30 minutes

Vocational Education services 6 times per cycle for 207 minutes in the area of Culinary Arts

Special Transportation services

000020034 05/25/03 10/13/16 IEP Change: Remains M 800 Autism Reevaluation Committee: Committee on Special Education Classified Delivery **Primary** Fut. End Date Service Freq / Cycle School/ Minutes Service Start Date **End Date** Description Recommendations Location **CURRENT YEAR** 02/23/2016 Individual Supplementary School daily It is recommended that Nikolai 390 minutes receive a one to one SSP to ensure 6:1:1 Classroom Personnel safety, reduce/intervene with maladaptive behaviors, delivery of discrete trials, assist with communication, deliver sensory diet and disrupt self-stimulatory behaviors. CURRENT YEAR 07/07/2016 01/25/2016 Individual Supplementary School 5 times per week Individual 6:1:1 Classroom Personnel - ESY 360 minutes

Page 1

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Printed: 10/17/2016

ction Sheet Printed: 10/17/2016 10:45 tte: 10/13/2016

ID		DOB	Gende	Grd Disability		Meeting	Mtg Date	Ref Date	Outcome	12 Mth
URRENT YEAR		07/07/2016	08/17/2016	Individual Supplementary School Personnel - ESY	5 times per week 360 minutes	Individual		6:1:1 Classroom		
CURRENT YEAR	Yes	09/06/2016	02/22/2017	Ratio 6:1:1	6/6 Day Cycle 380 Minutes	6 students/1 teacher/1 ai	de	OFA Grades 7-8 (BL) 6:1:1 Classroom		
URRENT YEAR	No	09/06/2016	02/22/2017	Speech	2/Weekly 30 Minutes	Individual		OFA Grades 7-8 (BL) Speech Classroom		
URRENT YEAR	No	09/06/2016	02/22/2017	Adaptive Physical Education	3/6 Day Cycle 40 Minutes	Individual		OFA Grades 7-8 (BL) Gym/Pool		
CURRENT YEAR		09/06/2016	02/22/2017	Individual Supplementary School Personnel	6 times per cycle 415 minutes	Individual		6:1:1 Classroom		
	Minut	es: Contin	ue classification	on of Autism						
		Individ Behavi	ual Supplemer	rvices 2 times per week for 30 r ntary School Personnel services at services 40 times per year for on services	6 times per cycle for 4	15 minutes				
00026047		05/26	/09 M	002 Autism		Transfer Student/Intake	10/13/16		IEP Change: Remail	ns
ommittee: Co	mmittee or	Special Edu	ucation			Studentimake			Classified	
	Primary Service	Start Date	Fut. End Date End Date	Service Description	Freq / Cycle Minutes	Delivery Recommendations		School/ Location		
	Minut	es: Continu	ue classificatio	n of Autism						
		District		idation: com placement 6 times per cycl ucation services 3 times per cyc						

Meeting

Printed: 10/17/2016 1

Outcome

10:45

Individual Occupational Therapy services 2 times per cycle for 30 minutes Individual Physical Therapy services 2 times per week for 30 minutes Group Speech services 3 times per cycle for 30 minutes Individual Speech services 3 times per cycle for 30 minutes Individual Supplementary School Personnel services 6 times per cycle for 390 minutes Behavioral Consultant services 600 minutes per year Special Transportation services

Disability

DOB

Gender Grd

Minutes: Continue classification of Speech/Language Impairment

Group Speech services 6 times per cycle for 30 minutes Individual Physical Therapy services 2 times per week for 30 minutes

Individual Supplementary School Personnel services 6 times per cycle for 390 minutes

Fall 2016 Recommendation:

000028191 Committee: Con	mmittee or	11/08 Special Ed		013 Speech/Language Impairment	e	Program Review	10/13/16		IEP Change: Remains Classified
CURRENT YEAR	Primary Service Yes	Start Date 09/06/2016	Fut. End Date End Date 06/23/2017	Service Description Speech	Freq / Cycle Minutes 6/6 Day Cycle 30 Minutes	Delivery Recommendations Group		School/ Location Madill Elementary (PS) Speech Classroom	
CURRENT YEAR	No	09/06/2016	06/23/2017	Physical Therapy	2/Weekly 30 Minutes	Individual		Madill Elementary (BL) Provider Location	
CURRENT YEAR		09/06/2016	06/23/2017	Individual Supplementary School Personnel	6 times per cycle 390 minutes			General Ed. & Special B	Ed. Classrooms

Total Meetings: 4

Mto Date

Ref Date

DOB Grd Disability Meeting Mtg Date **Ref Date** Outcome Developmentally Delayed (EI) | 000077101 10/14/13 014 New Referral 10/13/16 07/01/16 М Eligible but Delayed or no Placement As of 10/18/16: Parents chose to Preschool Student continue their child with a Di in Early Intervention Program Committee: Committee on Preschool Special Education (EIP) and transition to Preschool Special Education after the child became three years of age. Primary Delivery Fut. End Date Service Freq / Cycle School Service Start Date **End Date** Description Minutes Recommendations Location Minutes: Eligible for classification of Preschool Student with a Disability Recommendation (1/3/16-6/23/17): Special Education Itinerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 45 minutes Meeting Comments: As School District Representative, I attest that the Board of Education approves the initiation of the services and/or programs(s) listed above. School District Representative Signature: _ Date:

Printed: 10/17/2016

Total Meetings: 1