

GENERAL ADMINISTRATION DIVISION

Report No. A

OGDENSBURG CITY SCHOOL DISTRICT  
OGDENSBURG, NEW YORK

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**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 May 18, 19, 22, 24, 25, 26, 30, 31, 2017 and June 1, 5, 8, 12, 2017.

**DATE:** June 19, 2017

**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.

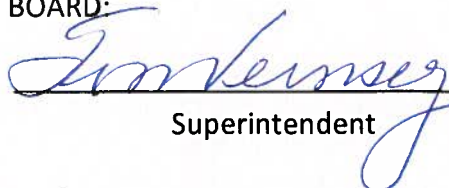
**FACTS AND ANALYSIS:**

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 19<sup>th</sup> day of June, 2017.

**APPROVED FOR PRESENTATION TO THE BOARD:**

  
\_\_\_\_\_  
Superintendent

TMV/alf

**Board Action Sheet**  
**Meeting Date: 06/12/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 9:29

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |                                     |                                |          |  |                                |  |
|-----------|----------|---|-----|-------------------------------------|--------------------------------|----------|--|--------------------------------|--|
| 000029036 | 02/17/12 | M | 014 | Preschool Student with a Disability | Amendment with No Meeting Held | 06/12/17 |  | IEP Change: Remains Classified |  |
|-----------|----------|---|-----|-------------------------------------|--------------------------------|----------|--|--------------------------------|--|

Committee : CPSE

|               |                 |            |               |                     |                        |                                |   |
|---------------|-----------------|------------|---------------|---------------------|------------------------|--------------------------------|---|
|               | Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle           | Delivery                       | School/ Location                              |
| AFTER MEETING | Yes             | 07/10/2017 | 08/18/2017    | Speech              | 2/Weekly<br>30 Minutes | Individual                     | John F Kennedy Elementary<br>Speech Classroom |
|               |                 |            |               |                     |                        | Coordinating Service Provider: | OGDENSBURG CITY SD                            |

Minutes: Continue classification of Preschool Student with a Disability

Recommendation (6/20/17-6/23/17):  
District 12:1:1 Integrated Classroom placement 5 times per week for 150 minutes  
Individual Speech services 3 times per week for 30 minutes

12 Month Extended Year Recommendation:  
None

Total Meetings: 1

**Board Action Sheet**  
**Meeting Date: 06/08/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 9:12

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mths |
|----|-----|--------|-----|------------|---------|----------|----------|---------|---------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|---------|

|           |          |   |     |   |              |          |          |                   |   |
|-----------|----------|---|-----|---|--------------|----------|----------|-------------------|---|
| 000030110 | 07/19/12 | F | 014 | <br>As of 06/20/17:<br>Preschool Student<br>with a Disability | New Referral | 06/08/17 | 10/22/15 | Initial Placement | X |
|-----------|----------|---|-----|---|--------------|----------|----------|-------------------|---|

Committee : Committee on Preschool Special Education

|                    |            |                           |                        |                         |                             |                     |
|--------------------|------------|---------------------------|------------------------|-------------------------|-----------------------------|---------------------|
| Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description | Freq / Cycle<br>Minutes | Delivery<br>Recommendations | School/<br>Location |
|--------------------|------------|---------------------------|------------------------|-------------------------|-----------------------------|---------------------|

Minutes: Eligible for classification of Preschool Student with a Disability

Recommendation (7/5/17-8/18/17):  
 Individual Speech services 2 times per week for 30 minutes  
 Individual Occupational Therapy services 1 time per week for 30 minutes

|           |          |   |     |              |              |          |          |              |
|-----------|----------|---|-----|--------------|--------------|----------|----------|--------------|
| 000077196 | 03/25/13 | F | 014 | Non-Disabled | New Referral | 06/08/17 | 02/08/17 | Not Eligible |
|-----------|----------|---|-----|--------------|--------------|----------|----------|--------------|

Committee : Committee on Preschool Special Education

|                    |            |                           |                        |                         |                             |                     |
|--------------------|------------|---------------------------|------------------------|-------------------------|-----------------------------|---------------------|
| Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description | Freq / Cycle<br>Minutes | Delivery<br>Recommendations | School/<br>Location |
|--------------------|------------|---------------------------|------------------------|-------------------------|-----------------------------|---------------------|

Minutes: Not eligible for classification

|           |          |   |     |  |              |          |          |   |   |
|-----------|----------|---|-----|--|--------------|----------|----------|---|---|
| 000077151 | 02/01/14 | F | 014 | Developmentally<br>Delayed (EI)  <br>As of 06/20/17:<br>Preschool Student<br>with a Disability | New Referral | 06/08/17 | 09/23/16 | Eligible but Delayed<br>or no Placement<br>[Parents provided<br>consent to evaluate<br>less than 30 school<br>days prior to their<br>third birthdays] | X |
|-----------|----------|---|-----|--|--------------|----------|----------|---|---|

Committee : Committee on Preschool Special Education

|                    |            |                           |                        |                         |                             |                     |
|--------------------|------------|---------------------------|------------------------|-------------------------|-----------------------------|---------------------|
| Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description | Freq / Cycle<br>Minutes | Delivery<br>Recommendations | School/<br>Location |
|--------------------|------------|---------------------------|------------------------|-------------------------|-----------------------------|---------------------|

**Board Action Sheet**  
**Meeting Date: 06/08/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 9:12

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
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**Minutes:** Eligible for classification of Preschool Student with a Disability

12 Month Extended Year Recommendation (7/10/17 - 8/18/17):  
 Individual Speech services 2 times per week for 45 minutes

Recommendation (9/5/17 - 6/23/18):  
 Individual Speech services 2 times per week for 45 minutes

|           |          |   |     |              |              |          |          |              |
|-----------|----------|---|-----|--------------|--------------|----------|----------|--------------|
| 000077161 | 08/03/13 | M | 014 | Non-Disabled | New Referral | 06/08/17 | 10/06/16 | Not Eligible |
|-----------|----------|---|-----|--------------|--------------|----------|----------|--------------|

Committee : Committee on Preschool Special Education

| Primary<br>Service | Fut. End Date<br>Start Date | Service<br>End Date | Description | Freq / Cycle<br>Minutes | Delivery<br>Recommendations | School/<br>Location |
|--------------------|-----------------------------|---------------------|-------------|-------------------------|-----------------------------|---------------------|
|--------------------|-----------------------------|---------------------|-------------|-------------------------|-----------------------------|---------------------|

**Minutes:** Not eligible for classification

**Total Meetings: 4**

**Board Action Sheet**  
**Meeting Date: 06/05/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 9:16

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |   |                |          |  |                                |   |
|-----------|----------|---|-----|---|----------------|----------|--|--------------------------------|---|
| 000029038 | 06/13/12 | M | 014 | Preschool Student with a Disability<br>As of 09/05/17:<br>Visual Impairment Including Blindness | Program Review | 06/05/17 |  | IEP Change: Remains Classified | X |
|-----------|----------|---|-----|---|----------------|----------|--|--------------------------------|---|

Committee : Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date<br>End Date | Service Description                       | Freq / Cycle<br>Minutes         | Delivery Recommendations  | School/<br>Location   |
|--------------|-----------------|------------|---------------------------|---|---------------------------------|---|---|
| CURRENT YEAR |                 | 07/06/2016 |                           | Visual Aid Materials                      | Daily<br>Throughout the day     | All materials should be presented in a tactile format as well as bold lined, high contrasting format. | across environments   |
| CURRENT YEAR | Yes             | 09/06/2016 | 06/23/2017                | Special Education Itinerant               | 2/Weekly<br>60 Minutes          | Direct<br><br>Coordinating Service Provider:  | Headstart<br>Head Start Classroom<br>CHILDREN'S THERAPY NETWORK |
| CURRENT YEAR | No              | 09/06/2016 | 06/23/2017                | Teacher of Visually Impaired              | 1/Weekly<br>60 Minutes          | Individual<br><br>Coordinating Service Provider:  | Headstart<br>Head Start Classroom<br>CHILDREN'S THERAPY NETWORK |
| CURRENT YEAR | No              | 09/06/2016 | 06/23/2017                | Occupational Therapy                      | 2/Weekly<br>30 Minutes          | Individual<br><br>Coordinating Service Provider:  | Home Base - Preschool<br>Home Setting<br>COUNTY OF ST LAWRENCE  |
| CURRENT YEAR | No              | 09/06/2016 | 06/23/2017                | Orientation and Mobility                  | 2/Monthly<br>60 Minutes         | Individual<br><br>Coordinating Service Provider:  | Home Base - Preschool<br>Home Setting<br>COUNTY OF ST LAWRENCE  |
| CURRENT YEAR |                 | 09/06/2016 |                           | Individual Supplementary School Personnel | 5 times per week<br>240 minutes |   | Head Start Classroom  |

Minutes: Eligible for classification of Visual Impairment including Blindness

Recommendation (9/5/17-6/19/18):

Direct Consultant Teacher services 6 times per cycle for 30 minutes in the area of English

Indirect Consultant Teacher services 1 time per month for 60 minutes

Adaptive Physical Education services 3 times per cycle for 40 minutes

Teacher of the Visually Impaired services 1 time per week for 60 minutes

**Board Action Sheet**  
**Meeting Date: 06/05/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 9:16

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

Individual Occupational Therapy services 2 times per cycle for 30 minutes  
 Orientation and Mobility services 2 times per month for 60 minutes  
 Individual Supplementary School Personnel services 5 times per week for 240 minutes  
 Behavioral Consultant services 600 minutes per year  
 Special Transportation services

|           |          |   |     |  |                |          |                                |   |
|-----------|----------|---|-----|--|----------------|----------|--------------------------------|---|
| 000029054 | 08/02/12 | M | 014 | Preschool Student with a Disability<br> <br>As of 09/05/17:<br>Orthopedic Impairment | Program Review | 06/05/17 | IEP Change: Remains Classified | X |
|-----------|----------|---|-----|--|----------------|----------|--------------------------------|---|

Committee : Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date<br>End Date | Service Description  | Freq / Cycle<br>Minutes | Delivery Recommendations                         | School/<br>Location  |
|--------------|-----------------|------------|---------------------------|----------------------|-------------------------|--|--|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/23/2017                | Occupational Therapy | 2/Weekly<br>30 Minutes  | Individual                                       | Home Base - Preschool<br>Home Setting<br>COUNTY OF ST LAWRENCE |
| CURRENT YEAR | No              | 09/06/2016 | 06/23/2017                | Physical Therapy     | 2/Weekly<br>30 Minutes  | Individual<br><br>Coordinating Service Provider: | Home Base - Preschool<br>Home Setting<br>COUNTY OF ST LAWRENCE |

Minutes: Eligible for classification of Orthopedic Impairment

Recommendation (9/5/17-6/19/18):  
 Direct Consultant Teacher services 6 times per cycle for 30 minutes in the area of English  
 Individual Physical Therapy services 2 times per week for 30 minutes  
 Individual Occupational Therapy services 2 times per cycle for 30 minutes  
 Adaptive Physical Education services 3 times per cycle for 40 minutes  
 Group Speech services 6 times per cycle for 30 minutes  
 Individual Supplementary School Personnel services 6 times per cycle for 390 minutes  
 Special Transportation services

**Board Action Sheet**  
**Meeting Date: 06/05/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 9:16

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |   |                |          |  |                                |   |
|-----------|----------|---|-----|---|----------------|----------|--|--------------------------------|---|
| 000030104 | 06/01/12 | F | 014 | Preschool Student with a Disability<br> <br>As of 09/05/17:<br>Speech/Language Impairment | Program Review | 06/05/17 |  | IEP Change: Remains Classified | X |
|-----------|----------|---|-----|---|----------------|----------|--|--------------------------------|---|

Committee : Committee on Special Education

|              |                 |            |               |                             |                        |                                |   |
|--------------|-----------------|------------|---------------|-----------------------------|------------------------|--------------------------------|---|
|              | Primary Service | Start Date | Fut. End Date | Service Description         | Freq / Cycle Minutes   | Delivery Recommendations       | School/ Location                          |
| CURRENT YEAR | No              | 09/06/2016 | 06/23/2017    | Speech                      | 2/Weekly<br>30 Minutes | Individual                     | Home Base - Preschool<br>Home Setting     |
|              |                 |            |               |                             |                        | Coordinating Service Provider: | COUNTY OF ST LAWRENCE                     |
| CURRENT YEAR | Yes             | 10/04/2016 | 06/23/2017    | Special Education Itinerant | 2/Weekly<br>60 Minutes | Direct                         | Kennedy Elementary (PS)<br>Kennedy School |
|              |                 |            |               |                             |                        | Coordinating Service Provider: | CHILDREN'S THERAPY NETWORK                |

Minutes: Eligible for classification of Speech/Language Impairment

Recommendation (9/5/17-6/19/18):  
Group Speech services 6 times per cycle for 30 minutes

|           |          |   |     |   |                |          |  |                                |
|-----------|----------|---|-----|---|----------------|----------|--|--------------------------------|
| 000030116 | 07/20/12 | M | 014 | Preschool Student with a Disability<br> <br>As of 09/05/17:<br>Speech/Language Impairment | Program Review | 06/05/17 |  | IEP Change: Remains Classified |
|-----------|----------|---|-----|---|----------------|----------|--|--------------------------------|

Committee : Committee on Special Education

|              |                 |            |               |                     |                        |                                |   |
|--------------|-----------------|------------|---------------|---------------------|------------------------|--------------------------------|---|
|              | Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle Minutes   | Delivery Recommendations       | School/ Location                              |
| CURRENT YEAR | Yes             | 09/06/2016 | 06/23/2017    | Speech              | 3/Weekly<br>30 Minutes | Individual                     | John F Kennedy Elementary<br>Speech Classroom |
|              |                 |            |               |                     |                        | Coordinating Service Provider: | COUNTY OF ST LAWRENCE                         |

**Board Action Sheet**  
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**Ogdensburg City School District**

Printed: 06/15/2017 9:16

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

**Minutes:** Eligible for classification of Speech/Language Impairment

Recommendation (9/5/17-6/19/18):  
Individual Speech services 3 times per cycle for 30 minutes

|           |          |   |     |  |                |          |  |                                   |   |
|-----------|----------|---|-----|--|----------------|----------|--|-----------------------------------|---|
| 000029032 | 01/06/12 | F | 014 | Preschool Student<br>with a Disability<br> <br>As of 09/05/17:<br>Autism | Program Review | 06/05/17 |  | IEP Change: Remains<br>Classified | X |
|-----------|----------|---|-----|--|----------------|----------|--|-----------------------------------|---|

*Committee : Committee on Special Education*

|              | Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description | Freq / Cycle<br>Minutes | Delivery<br>Recommendations    | School/<br>Location                           |
|--------------|--------------------|------------|---------------------------|------------------------|-------------------------|--------------------------------|---|
| CURRENT YEAR | Yes                | 09/06/2016 | 06/23/2017                | Ratio 12:1:1           | 5/Weekly<br>150 Minutes | 12 students/1 teacher/1 aide   | John F Kennedy Elementary<br>12:1:1 Classroom |
|              |                    |            |                           |                        |                         | Coordinating Service Provider: | OGDENSBURG CITY SD                            |
| CURRENT YEAR | No                 | 09/06/2016 | 06/23/2017                | Speech                 | 3/Weekly<br>30 Minutes  | Individual                     | John F Kennedy Elementary<br>Speech Classroom |
|              |                    |            |                           |                        |                         | Coordinating Service Provider: | OGDENSBURG CITY SD                            |
| CURRENT YEAR | No                 | 09/06/2016 | 06/23/2017                | Occupational Therapy   | 1/Weekly<br>30 Minutes  | Individual                     | John F Kennedy Elementary<br>Kennedy School   |
|              |                    |            |                           |                        |                         | Coordinating Service Provider: | OGDENSBURG CITY SD                            |

**Minutes:** Eligible for classification of Autism

Recommendation (9/5/17-6/19/18):  
District 6:1:1 ABA classroom placement 6 times per cycle for 330 minutes  
Individual Occupational Therapy services 2 times per cycle for 30 minutes  
Individual Speech services 6 times per cycle for 30 minutes  
Individual Supplementary School Personnel services 6 times per cycle for 330 minutes  
Behavioral Consultant service 600 minutes per year



**Board Action Sheet**  
**Meeting Date: 06/05/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 9:16

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |   |                |          |  |                                   |  |
|-----------|----------|---|-----|---|----------------|----------|--|-----------------------------------|--|
| 000029061 | 10/22/12 | M | 014 | Preschool Student<br>with a Disability<br> <br>As of 09/05/17:<br>Speech/Language<br>Impairment | Program Review | 06/05/17 |  | IEP Change: Remains<br>Classified |  |
|-----------|----------|---|-----|---|----------------|----------|--|-----------------------------------|--|

Committee : Committee on Special Education

|              | Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description      | Freq / Cycle<br>Minutes | Delivery<br>Recommendations | School/<br>Location   |
|--------------|--------------------|------------|---------------------------|-----------------------------|-------------------------|-----------------------------|---|
| CURRENT YEAR | Yes                | 09/06/2016 | 06/23/2017                | Special Education Itinerant | 2/Weekly<br>60 Minutes  | Direct                      | Home Base - Preschool<br>Home Setting<br>CHILDREN'S THERAPY NETWORK |
| CURRENT YEAR | No                 | 09/06/2016 | 06/23/2017                | Speech                      | 2/Weekly<br>30 Minutes  | Individual                  | Home Base - Preschool<br>Home Setting<br>COUNTY OF ST LAWRENCE      |

Minutes: Eligible for classification of Speech/Language Impairment

Recommendation (9/5/17-6/19/18):  
 Direct Consultant Teacher services 6 times per cycle for 30 minutes in the area of English  
 Group Speech services 6 times per cycle for 30 minutes

|           |          |   |     |  |                |          |                                   |   |
|-----------|----------|---|-----|--|----------------|----------|-----------------------------------|---|
| 000029046 | 02/20/12 | M | 014 | Preschool Student<br>with a Disability | Program Review | 06/05/17 | IEP Change: Remains<br>Classified | X |
|-----------|----------|---|-----|--|----------------|----------|-----------------------------------|---|

Committee : Committee on Special Education

|              | Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description      | Freq / Cycle<br>Minutes | Delivery<br>Recommendations | School/<br>Location   |
|--------------|--------------------|------------|---------------------------|-----------------------------|-------------------------|-----------------------------|---|
| CURRENT YEAR | Yes                | 09/06/2016 | 06/23/2017                | Special Education Itinerant | 2/Weekly<br>60 Minutes  | Direct                      | Headstart<br>Head Start Classroom<br>CHILDREN'S THERAPY NETWORK |
| CURRENT YEAR | No                 | 09/06/2016 | 06/23/2017                | Speech                      | 3/Weekly<br>30 Minutes  | Individual                  | Headstart<br>Head Start Classroom<br>COUNTY OF ST LAWRENCE      |

Board Action Sheet  
Meeting Date: 06/05/2017  
Ogdensburg City School District

Printed: 06/15/2017 9:16

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

Minutes: Eligible for classification of Speech/Language Impairment

Recommendation (9/5/17-6/19/18):

Resource Room services 6 times per cycle for 30 minutes

Individual Speech services 6 times per cycle for 30 minutes

Total Meetings: 7

**Board Action Sheet**  
**Meeting Date: 06/05/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 9:05

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |  |               |          |  |                             |
|-----------|----------|---|-----|--|---------------|----------|--|-----------------------------|
| 000030112 | 11/28/12 | M | 014 | Preschool Student with a Disability<br>As of 06/20/17:<br>Declassified | Annual Review | 06/05/17 |  | IEP Change:<br>Declassified |
|-----------|----------|---|-----|--|---------------|----------|--|-----------------------------|

Committee : Committee on Preschool Special Education

|  |            |               |          |                     |                      |                          |                  |
|--|------------|---------------|----------|---------------------|----------------------|--------------------------|------------------|
| Primary Service                        | Start Date | Fut. End Date | End Date | Service Description | Freq / Cycle Minutes | Delivery Recommendations | School/ Location |
| Minutes: Recommendation:<br>Declassify |            |               |          |                     |                      |                          |                  |

|           |          |   |     |                                     |               |          |  |                            |   |
|-----------|----------|---|-----|-------------------------------------|---------------|----------|--|----------------------------|---|
| 000029038 | 06/13/12 | M | 014 | Preschool Student with a Disability | Annual Review | 06/05/17 |  | Refer to Special Education | X |
|-----------|----------|---|-----|-------------------------------------|---------------|----------|--|----------------------------|---|

Committee : Committee on Preschool Special Education

|                 |            |               |          |                     |                      |                          |                  |
|-----------------|------------|---------------|----------|---------------------|----------------------|--------------------------|------------------|
| Primary Service | Start Date | Fut. End Date | End Date | Service Description | Freq / Cycle Minutes | Delivery Recommendations | School/ Location |
|-----------------|------------|---------------|----------|---------------------|----------------------|--------------------------|------------------|

Minutes: Continue classification of Preschool Student with a Disability

Recommendation (6/20/17-6/23/17):

Special Education Itinerant Teacher services 2 times per week for 60 minutes (Head Start)  
Teacher of the Visually Impaired services 1 time per week for 60 minutes (Head Start)  
Individual Occupational Therapy services 2 times per week for 30 minutes (home)  
Orientation and Mobility services 2 times per month for 60 minutes (home)  
Individual Supplementary School Personnel services 5 times per week for 240 minutes (Head Start)

12 Month Extended Year Recommendation (7/10/17-8/18/17):

Teacher of the Visually Impaired services 1 time per week for 60 minutes (home)  
Individual Occupational Therapy services 1 time per week for 30 minutes (home)  
Orientation and Mobility services 2 times per month for 60 minutes (home)

**Board Action Sheet**  
**Meeting Date: 06/05/2017**  
**Ogdensburg City School District**

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| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |                                     |               |          |  |                            |   |
|-----------|----------|---|-----|-------------------------------------|---------------|----------|--|----------------------------|---|
| 000029054 | 08/02/12 | M | 014 | Preschool Student with a Disability | Annual Review | 06/05/17 |  | Refer to Special Education | X |
|-----------|----------|---|-----|-------------------------------------|---------------|----------|--|----------------------------|---|

Committee : Committee on Preschool Special Education

|                 |            |               |          |                     |                      |                          |                  |
|-----------------|------------|---------------|----------|---------------------|----------------------|--------------------------|------------------|
| Primary Service | Start Date | Fut. End Date | End Date | Service Description | Freq / Cycle Minutes | Delivery Recommendations | School/ Location |
|-----------------|------------|---------------|----------|---------------------|----------------------|--------------------------|------------------|

Minutes: Continue classification of Preschool Student with a Disability

Recommendation (6/20/17-6/23/17):

Individual Physical Therapy services 2 times per week for 30 minutes (Head Start)

Individual Occupational Therapy services 2 times per week for 30 minutes (Head Start)

12 Month Extended Year Recommendation (7/10/17-8/18/17):

Individual Physical Therapy services 1 time per week for 30 minutes (home)

|           |          |   |     |                                     |               |          |  |                            |   |
|-----------|----------|---|-----|-------------------------------------|---------------|----------|--|----------------------------|---|
| 000030104 | 06/01/12 | F | 014 | Preschool Student with a Disability | Annual Review | 06/05/17 |  | Refer to Special Education | X |
|-----------|----------|---|-----|-------------------------------------|---------------|----------|--|----------------------------|---|

Committee : Committee on Preschool Special Education

|                 |            |               |          |                     |                      |                          |                  |
|-----------------|------------|---------------|----------|---------------------|----------------------|--------------------------|------------------|
| Primary Service | Start Date | Fut. End Date | End Date | Service Description | Freq / Cycle Minutes | Delivery Recommendations | School/ Location |
|-----------------|------------|---------------|----------|---------------------|----------------------|--------------------------|------------------|

Minutes: Continue classification of Preschool Student with a Disability

Recommendation (6/20/17-6/23/17):

Special Education Itinerant Teacher services 2 times per week for 60 minutes

Individual Speech services 2 times per week for 30 minutes

12 Month Extended Year Recommendation (7/10/17-8/18/17):

Special Education Itinerant Teacher services 2 times per week for 60 minutes

Individual Speech services 2 times per week for 30 minutes

**Board Action Sheet**  
**Meeting Date: 06/05/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 9:05

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |                                     |               |          |  |                            |   |
|-----------|----------|---|-----|-------------------------------------|---------------|----------|--|----------------------------|---|
| 000030116 | 07/20/12 | M | 014 | Preschool Student with a Disability | Annual Review | 06/05/17 |  | Refer to Special Education | X |
|-----------|----------|---|-----|-------------------------------------|---------------|----------|--|----------------------------|---|

Committee : Committee on Preschool Special Education

| Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle Minutes | Delivery Recommendations | School/ Location |
|-----------------|------------|---------------|---------------------|----------------------|--------------------------|------------------|
|-----------------|------------|---------------|---------------------|----------------------|--------------------------|------------------|

Minutes: Continue classification of Preschool Student with a Disability

Recommendation (6/20/17-6/23/17):

Individual Speech services 3 times per week for 30 minutes

12 Month Extended Year Recommendation:

Individual Speech services 2 times per week for 30 minutes

|           |          |   |     |                                     |               |          |  |                            |   |
|-----------|----------|---|-----|-------------------------------------|---------------|----------|--|----------------------------|---|
| 000029032 | 01/06/12 | F | 014 | Preschool Student with a Disability | Annual Review | 06/05/17 |  | Refer to Special Education | X |
|-----------|----------|---|-----|-------------------------------------|---------------|----------|--|----------------------------|---|

Committee : Committee on Preschool Special Education

| Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle Minutes | Delivery Recommendations | School/ Location |
|-----------------|------------|---------------|---------------------|----------------------|--------------------------|------------------|
|-----------------|------------|---------------|---------------------|----------------------|--------------------------|------------------|

Minutes: Continue classification of Preschool Student with a Disability

Recommendation (6/20/17-6/23/17):

District 12:1:1 Integrated classroom placement 5 times per week for 150 minutes

Individual Speech services 3 times per week for 30 minutes (school)

Individual Occupational Therapy services 1 time per week for 30 minutes (school)

12 Month Extended Year Recommendation (7/5/17-8/15/17):

District 6:1:1 ABA classroom placement 5 times per week for 150 minutes

Individual Speech services 2 times per week for 30 minutes

Individual Supplementary School Personnel services 5 times per week for 150 minutes

Behavioral Consultant services 1 time per month for 60 minutes

**Board Action Sheet**  
**Meeting Date: 06/05/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 9:05

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |                                     |               |          |  |                            |   |
|-----------|----------|---|-----|-------------------------------------|---------------|----------|--|----------------------------|---|
| 000029061 | 10/22/12 | M | 014 | Preschool Student with a Disability | Annual Review | 06/05/17 |  | Refer to Special Education | X |
|-----------|----------|---|-----|-------------------------------------|---------------|----------|--|----------------------------|---|

Committee : Committee on Preschool Special Education

|                 |            |                           |                     |                         |                          |                     |
|-----------------|------------|---------------------------|---------------------|-------------------------|--------------------------|---------------------|
| Primary Service | Start Date | Fut. End Date<br>End Date | Service Description | Freq / Cycle<br>Minutes | Delivery Recommendations | School/<br>Location |
|-----------------|------------|---------------------------|---------------------|-------------------------|--------------------------|---------------------|

Minutes: Continue classification of Preschool Student with a Disability

Recommendation (7/10/17-8/15/17):  
Special Education Itinerant Teacher services 2 times per week for 60 minutes  
Individual Speech services 2 times per week for 30 minutes

|           |          |   |     |                                     |               |          |  |                            |   |
|-----------|----------|---|-----|-------------------------------------|---------------|----------|--|----------------------------|---|
| 000029046 | 02/20/12 | M | 014 | Preschool Student with a Disability | Annual Review | 06/05/17 |  | Refer to Special Education | X |
|-----------|----------|---|-----|-------------------------------------|---------------|----------|--|----------------------------|---|

Committee : Committee on Preschool Special Education

|                 |            |                           |                     |                         |                          |                     |
|-----------------|------------|---------------------------|---------------------|-------------------------|--------------------------|---------------------|
| Primary Service | Start Date | Fut. End Date<br>End Date | Service Description | Freq / Cycle<br>Minutes | Delivery Recommendations | School/<br>Location |
|-----------------|------------|---------------------------|---------------------|-------------------------|--------------------------|---------------------|

Minutes: Continue classification of Preschool Student with a Disability

Recommendation (7/10/17-8/18/17):  
Special Education Itinerant Teacher services 2 times per week for 60 minutes (home)  
Individual Speech services 2 times per week for 30 minutes (home)

Total Meetings: 8

**Board Action Sheet**  
**Meeting Date: 06/01/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 8:57

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |  |              |          |  |                              |  |
|-----------|----------|---|-----|--|--------------|----------|--|------------------------------|--|
| 000027120 | 05/07/09 | M | 002 | Non-Disabled  <br>As of 06/20/17:<br>Section 504<br>Disability | 504 Referral | 06/01/17 |  | Create Accommodation<br>Plan |  |
|-----------|----------|---|-----|--|--------------|----------|--|------------------------------|--|

Committee : 504 Accommodation Plan Committee

|                    |                             |                     |             |                         |                             |                     |
|--------------------|-----------------------------|---------------------|-------------|-------------------------|-----------------------------|---------------------|
| Primary<br>Service | Fut. End Date<br>Start Date | Service<br>End Date | Description | Freq / Cycle<br>Minutes | Delivery<br>Recommendations | School/<br>Location |
|--------------------|-----------------------------|---------------------|-------------|-------------------------|-----------------------------|---------------------|

Minutes: Eligible for classification of Section 504 Disability

Recommendation through June 2017:  
 Section 504 Accommodations 6 times per cycle for 390 minutes

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:  
 No changes

Total Meetings: 1

**Board Action Sheet**  
**Meeting Date: 06/01/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 8:44

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |                         |               |          |                                |
|-----------|----------|---|-----|-------------------------|---------------|----------|--------------------------------|
| 000021268 | 12/15/01 | M | 008 | Other Health Impairment | Annual Review | 06/01/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|-------------------------|---------------|----------|--------------------------------|

Committee : Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle Minutes         | Delivery Recommendations     | School/ Location                                   |
|--------------|-----------------|------------|---------------|---------------------|------------------------------|------------------------------|--|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/20/2017    | Ratio 12:1:1        | 6/6 Day Cycle<br>168 Minutes | 12 students/1 teacher/1 aide | Heuvelton Central School (PN)<br>12:1:1 Classroom  |
| CURRENT YEAR | No              | 09/06/2016 | 06/20/2017    | Counseling          | 2/6 Day Cycle<br>30 Minutes  | Individual                   | Heuvelton Central School (PN)<br>Counselors Office |

Minutes: Continue classification of Other Health Impairment

Recommendation through June 2017:  
 BOCES 12:1:1 classroom placement 6 times per cycle for 168 minutes (Heuvelton)  
 Individual Counseling services 2 times per cycle for 30 minutes  
 Special Transportation services

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:  
 No changes

|           |          |   |     |   |                         |          |                                |
|-----------|----------|---|-----|---|-------------------------|----------|--------------------------------|
| 000021267 | 11/17/02 | F | 008 | Learning Disability  <br>As of 06/20/17:<br>Other Health Impairment | Reevaluation/<br>Annual | 06/01/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|---|-------------------------|----------|--------------------------------|

Committee : Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle Minutes         | Delivery Recommendations     | School/ Location                        |
|--------------|-----------------|------------|---------------|---------------------|------------------------------|------------------------------|---|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/20/2017    | Ratio 15:1:1        | 6/6 Day Cycle<br>200 Minutes | 15 students/1 teacher/1 aide | OFA Grades 7-8 (PS)<br>15:1:1 Classroom |



**Board Action Sheet**  
**Meeting Date: 06/01/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 8:44

| id           |    | DOB        | Gender     | Grd                                   | Disability                      | Meeting          | Mtg Date | Ref Date | Outcome  | 12 Mth |
|--------------|----|------------|------------|---------------------------------------|---------------------------------|------------------|----------|----------|--|--------|
| CURRENT YEAR | No | 09/06/2016 | 06/20/2017 | Consultant Teacher                    | 6/6 Day Cycle<br>40 Minutes     | Direct - Science |          |          | OFA Grades 7-8 (PS)<br>General Education Classroom |        |
| CURRENT YEAR | No | 09/06/2016 | 06/20/2017 | Adaptive Physical Education           | 3/6 Day Cycle<br>40 Minutes     |                  |          |          | OFA Grades 7-8 (PS)<br>Gym/Pool                    |        |
| CURRENT YEAR | No | 09/06/2016 | 06/20/2017 | Counseling                            | 1/6 Day Cycle<br>30 Minutes     | Individual       |          |          | OFA Grades 7-8 (PS)<br>Counselors Office           |        |
| CURRENT YEAR |    | 09/06/2016 | 06/20/2017 | Shared Supplementary School Personnel | 6 times per cycle<br>40 minutes | Technology       |          |          | General Education Classroom                        |        |

**Minutes:** Change classification to Other Health Impairment

Recommendation through June 2017:

District 15:1:1 classroom placement 6 times per cycle for 200 minutes  
 Direct Consultant Teacher services 6 times per cycle for 40 minutes in the area of science  
 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 40 minutes in the area of technology  
 Special Transportation services

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:

District 15:1:1 classroom placement 6 times per cycle for 200 minutes  
 Adaptive Physical Education services 3 times per cycle for 40 minutes  
 Individual Counseling services 1 time per cycle for 30 minutes  
 Special Transportation services

|           |          |   |     |                     |               |          |                                |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|
| 000020154 | 09/01/02 | M | 008 | Learning Disability | Annual Review | 06/01/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|

Committee : Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle                 | Delivery Recommendations     | School/ Location                        |
|--------------|-----------------|------------|---------------|---------------------|------------------------------|------------------------------|---|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/20/2017    | Ratio 15:1:1        | 6/6 Day Cycle<br>200 Minutes | 15 students/1 teacher/1 aide | OFA Grades 7-8 (PS)<br>15:1:1 Classroom |

**Board Action Sheet**  
**Meeting Date: 06/01/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 8:44

| ID           |    | DOB        | Gender     | Grd                                      | Disability | Meeting                         | Mtg Date         | Ref Date | Outcome  | 12 Mth |
|--------------|----|------------|------------|--|------------|---------------------------------|------------------|----------|--|--------|
| CURRENT YEAR | No | 09/06/2016 | 06/20/2017 | Consultant Teacher                       |            | 6/6 Day Cycle<br>40 Minutes     | Direct - Science |          | OFA Grades 7-8 (PS)<br>General Education Classroom |        |
| CURRENT YEAR |    | 09/06/2016 |            | Shared Supplementary School<br>Personnel |            | 6 times per cycle<br>40 minutes | Technology       |          | General Education Classroom                        |        |

**Minutes:** Continue classification of Learning Disability

Recommendation through June 2017:

District 15:1:1 classroom placement 6 times per cycle for 200 minutes

Direct Consultant Teacher services 6 times per cycle for 40 minutes in the area of science

Shared Supplementary School Personnel services 6 times per cycle for 40 minutes in the area of technology

12 Month Extended Year Recommendation:

None

Fall 2017 Recommendation:

District 15:1:1 classroom placement 6 times per cycle for 200 minutes

Shared Supplementary School Personnel services 12 times per cycle for 40 minutes in the areas of health and wood 1

|           |  |          |   |     |   |                |          |  |                                   |  |
|-----------|--|----------|---|-----|---|----------------|----------|--|-----------------------------------|--|
| 000029036 |  | 02/17/12 | M | 014 | Preschool Student<br>with a Disability<br> <br>As of 09/05/17:<br>Speech/Language<br>Impairment | Program Review | 06/01/17 |  | IEP Change: Remains<br>Classified |  |
|-----------|--|----------|---|-----|---|----------------|----------|--|-----------------------------------|--|

**Committee :** Committee on Special Education

|              | Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description          | Freq / Cycle<br>Minutes | Delivery<br>Recommendations                  | School/<br>Location   |
|--------------|--------------------|------------|---------------------------|---------------------------------|-------------------------|--|---|
| CURRENT YEAR | Yes                | 01/18/2017 | 06/23/2017                | Ratio 12:1:1 Integrated Setting | 5/Weekly<br>150 Minutes | 12 students/1 teacher/1 aide                 | John F Kennedy Elementary<br>12:1:1 Classroom<br>OGDENSBURG CITY SD |
| CURRENT YEAR | No                 | 01/18/2017 | 06/23/2017                | Speech                          | 3/Weekly<br>30 Minutes  | Coordinating Service Provider:<br>Individual | John F Kennedy Elementary<br>Speech Classroom<br>OGDENSBURG CITY SD |

**Board Action Sheet**  
**Meeting Date: 06/01/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 8:44

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

Minutes: Eligible for classification of Speech/Language Impairment

Recommendation (9/5/17-6/19/18):  
Group Speech services 3 times per cycle for 30 minutes

000027120      05/07/09      M      002      Non-Disabled      New Referral      06/01/17      02/07/17      Not Eligible  
Committee : Committee on Special Education

| Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle Minutes | Delivery Recommendations | School/ Location |
|-----------------|------------|---------------|---------------------|----------------------|--------------------------|------------------|
|-----------------|------------|---------------|---------------------|----------------------|--------------------------|------------------|

Minutes: Not eligible for classification under the auspices of Special Education

Refer to the Section 504 Committee

000027047      08/11/08      F      002      Other Health Impairment | As of 06/20/17: Intellectual Disability      Reevaluation/ Annual      06/01/17      IEP Change: Remains Classified  
Committee : Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date | Service Description                   | Freq / Cycle Minutes             | Delivery Recommendations                                | School/ Location                           |
|--------------|-----------------|------------|---------------|---------------------------------------|----------------------------------|---|--|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/06/2017    | Resource Room                         | 6/6 Day Cycle<br>40 Minutes      |   | Madill Elementary (PS)<br>Resource Room    |
| CURRENT YEAR | No              | 09/06/2016 | 06/06/2017    | Occupational Therapy                  | 1/6 Day Cycle<br>30 Minutes      | Group   | Madill Elementary (BL)<br>Kennedy School   |
| CURRENT YEAR | No              | 09/06/2016 | 06/06/2017    | Speech                                | 5/6 Day Cycle<br>30 Minutes      | Group   | Madill Elementary (PS)<br>Speech Classroom |
| CURRENT YEAR |                 | 09/06/2016 | 06/06/2017    | Shared Supplementary School Personnel | 6 times per cycle<br>180 minutes | Area of English, Mathematics and Science/Social Studies | General Ed. & Special Ed. Classrooms       |

**Board Action Sheet**  
**Meeting Date: 06/01/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 8:44

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

Minutes: Change classification to Intellectual Disability

Recommendation through June 2017:

Resource Room services 6 times per cycle for 40 minutes

Group Occupational Therapy services 1 times per cycle for 30 minutes

Group Speech services 5 times per cycle for 30 minutes

Shared Supplementary School Personnel services 6 times per cycle for 180 minutes in the areas of English, mathematics and science/social studies

12 Month Extended Year Recommendation:

None

Fall 2017 Recommendation:

District 12:1:1 classroom placement 6 times per cycle for 310 minutes

Group Occupational Therapy services 1 time per cycle for 30 minutes

Group Speech services 3 times per cycle for 30 minutes

|  |          |   |     |        |               |          |                                |
|--|----------|---|-----|--------|---------------|----------|--------------------------------|
| 000020046                                  | 01/29/03 | M | 008 | Autism | Annual Review | 06/01/17 | IEP Change: Remains Classified |
| Committee : Committee on Special Education |          |   |     |        |               |          |                                |

|              | Primary Service | Start Date | Fut. End Date<br>End Date | Service Description<br>Ratio 6:1:2        | Freq / Cycle<br>Minutes          | Delivery Recommendations                   | School/<br>Location                  |
|--------------|-----------------|------------|---------------------------|---|----------------------------------|--|--------------------------------------|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/23/2017                |   | 6/6 Day Cycle<br>390 Minutes     | 6 students/1 teacher/2 teaching assistants | Crossroads<br>6:1:2 Classroom        |
| CURRENT YEAR | No              | 09/06/2016 | 06/23/2017                | Counseling                                | 5/Weekly<br>30 Minutes           | Individual                                 | Crossroads<br>Counselors Office      |
| CURRENT YEAR | No              | 09/06/2016 | 06/23/2017                | Skilled Nursing Service                   | 6/6 Day Cycle<br>15 Minutes      | Individual                                 | Crossroads<br>Health Office          |
| CURRENT YEAR | No              | 09/06/2016 | 06/23/2017                | Adaptive Physical Education               | 2/Weekly<br>30 Minutes           |  | Crossroads<br>Gym/Pool               |
| CURRENT YEAR |                 | 09/06/2016 | 12/21/2016                | Individual Supplementary School Personnel | 6 times per cycle<br>390 minutes | provide support throughout the day         | General Ed. & Special Ed. Classrooms |
| CURRENT YEAR |                 | 09/06/2016 |                           | Individual Supplementary School Personnel | 6 times per cycle<br>390 minutes | Provide support throughout the day.        | General Ed. & Special Ed. Classrooms |

**Board Action Sheet**  
**Meeting Date: 06/01/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 8:44

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

**Minutes:** Continue classification of Autism

Recommendation through June 2017:

BOCES 6:1:2 Crossroads program 6 times per cycle for 390 minutes  
 Adaptive Physical Education services 2 times per week for 30 minutes  
 Individual Counseling services 5 times per week for 30 minutes  
 Skilled Nursing services 6 times per cycle for 15 minutes  
 Individual Supplementary School Personnel services 6 times per cycle for 390 minutes  
 Indirect Occupational Therapy Consult services 600 minutes per year  
 Behavioral Consultant services 1 time per week for 60 minutes  
 Special Transportation services

12 Month Extended Year Recommendation:

None

Fall 2017 Recommendation:

BOCES 12:1:1 classroom placement 6 times per cycle for 170 minutes (OFA)  
 BOCES Greenhouse program 6 times per cycle for 150 minutes  
 Adaptive Physical Education services 3 times per cycle for 40 minutes  
 Individual Counseling services 1 time per week for 30 minutes  
 Skilled Nursing services 6 times per cycle for 15 minutes  
 Individual Supplementary School Personnel services 6 times per cycle for 360 minutes  
 Behavioral Consultant services 600 minutes per year  
 Indirect Occupational Therapy Consult services 300 minutes per year  
 Special Transportation services

|           |          |   |     |                     |               |          |                                |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|
| 000025130 | 06/18/07 | M | 003 | Learning Disability | Annual Review | 06/01/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|

*Committee : Committee on Special Education*

|              | Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle Minutes        | Delivery Recommendations | School/ Location                         |
|--------------|-----------------|------------|---------------|---------------------|-----------------------------|--------------------------|--|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/23/2017    | Resource Room       | 6/6 Day Cycle<br>40 Minutes |                          | Kennedy Elementary (PS)<br>Resource Room |

**Board Action Sheet**  
**Meeting Date: 06/01/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 8:44

| ID           | DOB | Gender     | Grd        | Disability | Meeting                     | Mtg Date | Ref Date | Outcome                                     | 12 Mth |
|--------------|-----|------------|------------|------------|-----------------------------|----------|----------|---|--------|
| CURRENT YEAR | No  | 09/06/2016 | 06/23/2017 | Speech     | 2/6 Day Cycle<br>30 Minutes | Group    |          | Kennedy Elementary (PS)<br>Speech Classroom |        |

**Minutes:** Continue classification of Learning Disability

Recommendation through June 2017:  
 Resource Room services 6 times per cycle for 40 minutes  
 Group Speech services 2 times per cycle for 30 minutes

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:  
 District 12:1:1 classroom placement 6 times per cycle for 60 minutes in the area of English

**Total Meetings: 8**

**Board Action Sheet**  
**Meeting Date: 06/01/2017**  
**Ogdensburg City School District**

Printed: 06/13/2017 7:49

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |   |              |          |          |                   |   |
|-----------|----------|---|-----|---|--------------|----------|----------|-------------------|---|
| 000077059 | 01/10/12 | M | 014 | <br>As of 06/20/17:<br>Preschool Student<br>with a Disability | New Referral | 06/01/17 | 02/03/17 | Initial Placement | X |
|-----------|----------|---|-----|---|--------------|----------|----------|-------------------|---|

Committee : Committee on Preschool Special Education

|                |                      |                 |                     |                        |                 |
|----------------|----------------------|-----------------|---------------------|------------------------|-----------------|
| <b>Primary</b> | <b>Fut. End Date</b> | <b>Service</b>  | <b>Freq / Cycle</b> | <b>Delivery</b>        | <b>School/</b>  |
| <b>Service</b> | <b>Start Date</b>    | <b>End Date</b> | <b>Minutes</b>      | <b>Recommendations</b> | <b>Location</b> |

**Minutes:** Eligible for classification of Preschool Student with a Disability

Recommendation (7/10/17 - 8/18/17):  
 Individual Speech services 2 times per week for 30 minutes

**Total Meetings: 1**

**Board Action Sheet**  
**Meeting Date: 05/31/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 8:12

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |                     |               |          |                                |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|
| 000024057 | 02/12/07 | M | 004 | Learning Disability | Annual Review | 05/31/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|

Committee : Madill CSE Sub-Committee

|              | Primary Service | Start Date | Fut. End Date<br>End Date | Service Description | Freq / Cycle<br>Minutes     | Delivery Recommendations | School/<br>Location                                   |
|--------------|-----------------|------------|---------------------------|---------------------|-----------------------------|--------------------------|---|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/06/2017                | Resource Room       | 6/6 Day Cycle<br>40 Minutes |                          | Madill Elementary (PS)<br>Resource Room               |
| CURRENT YEAR | No              | 09/06/2016 | 06/06/2017                | Consultant Teacher  | 6/6 Day Cycle<br>40 Minutes | Direct - Mathematics     | Madill Elementary (PS)<br>General Education Classroom |

Minutes: Continue classification of Learning Disability

Recommendation through June 2017:

Resource Room services 6 times per cycle for 40 minutes

Direct Consultant Teacher services 6 times per cycle for 40 minutes in the area of mathematics

12 Month Extended Year Recommendation:

None

Fall 2017 Recommendation:

No changes

|           |          |   |     |                     |               |          |                                |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|
| 000024084 | 09/11/06 | M | 004 | Learning Disability | Annual Review | 05/31/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|

Committee : Madill CSE Sub-Committee

|              | Primary Service | Start Date | Fut. End Date<br>End Date | Service Description  | Freq / Cycle<br>Minutes     | Delivery Recommendations | School/<br>Location                                   |
|--------------|-----------------|------------|---------------------------|----------------------|-----------------------------|--------------------------|---|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/06/2017                | Resource Room        | 6/6 Day Cycle<br>40 Minutes |                          | Madill Elementary (PS)<br>Resource Room               |
| CURRENT YEAR | No              | 09/06/2016 | 06/06/2017                | Consultant Teacher   | 6/6 Day Cycle<br>40 Minutes | Direct - Mathematics     | Madill Elementary (PS)<br>General Education Classroom |
| CURRENT YEAR | No              | 09/06/2016 | 06/06/2017                | Occupational Therapy | 1/6 Day Cycle<br>30 Minutes | Group                    | Madill Elementary (BL)<br>Madill School               |



**Board Action Sheet**  
**Meeting Date: 05/31/2017**  
**Ogdensburg City School District**

Printed: 06/15/2017 8:12

| UD           | DOB | Gender     | Grd        | Disability | Meeting                     | Mtg Date | Ref Date | Outcome                                    | 12 Mth |
|--------------|-----|------------|------------|------------|-----------------------------|----------|----------|--|--------|
| CURRENT YEAR | No  | 09/06/2016 | 06/06/2017 | Speech     | 3/6 Day Cycle<br>30 Minutes | Group    |          | Madill Elementary (PS)<br>Speech Classroom |        |

Minutes: Continue classification of Learning Disability

Recommendation through June 2017:

Resource Room services 6 times per cycle for 40 minutes

Direct Consultant services 6 times per cycle for 30 minutes in the area of mathematics

Group Occupational Therapy services 1 time per cycle for 30 minutes

Group Speech services 3 times per cycle for 30 minutes

12 Month Extended Year Recommendation:

None

Fall 2017 Recommendation:

Resource Room services 6 times per cycle for 40 minutes

Direct Consultant services 6 times per cycle for 30 minutes in the area of mathematics

|           |          |   |     |                            |               |          |                                   |
|-----------|----------|---|-----|----------------------------|---------------|----------|-----------------------------------|
| 000027165 | 01/17/09 | F | 002 | Other Health<br>Impairment | Annual Review | 05/31/17 | IEP Change: Remains<br>Classified |
|-----------|----------|---|-----|----------------------------|---------------|----------|-----------------------------------|

Committee : Madill CSE Sub-Committee

|              | Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description      | Freq / Cycle<br>Minutes     | Delivery<br>Recommendations | School/<br>Location                         |
|--------------|--------------------|------------|---------------------------|-----------------------------|-----------------------------|-----------------------------|---|
| CURRENT YEAR | No                 | 09/06/2016 | 06/20/2017                | Occupational Therapy        | 1/6 Day Cycle<br>30 Minutes | Group                       | Madill Elementary (PS)<br>Provider Location |
| CURRENT YEAR | No                 | 09/06/2016 | 06/20/2017                | Adaptive Physical Education | 3/6 Day Cycle<br>40 Minutes |                             | Madill Elementary (PS)<br>Gym/Pool          |
| CURRENT YEAR | No                 | 10/04/2016 | 06/20/2017                | Physical Therapy            | 2/Weekly<br>30 Minutes      | Individual                  | Madill Elementary (PS)<br>Provider Location |
| CURRENT YEAR | Yes                | 02/28/2017 | 06/20/2017                | Resource Room               | 6/6 Day Cycle<br>40 Minutes |                             | Madill Elementary (PS)<br>Resource Room     |

Minutes: Continue classification of Other Health Impairment

**Board Action Sheet**  
**Meeting Date: 05/31/2017**  
**Ogdensburg City School District**

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| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

Recommendation through June 2017:

Resource Room services 6 times per cycle for 40 minutes

Adaptive Physical Education services 3 times per cycle for 40 minutes

Group Occupational Therapy services 1 time per cycle for 30 minutes

Individual Physical Therapy services 2 times per week for 30 minutes

12 Month Extended Year Recommendation:

None

Fall 2017 Recommendation:

Resource Room services 6 times per cycle for 40 minutes

Direct Consultant Teacher services 6 times per cycle for 30 minutes in the area of mathematics

Group Occupational Therapy services 1 time per cycle for 30 minutes

Individual Physical Therapy services 2 times per week for 30 minutes

Shared Supplementary School Personnel services 6 times per cycle for 120 minutes in the areas of English (60), mathematics (30) and science/social studies (30)

|           |          |   |     |                            |                      |          |                                |
|-----------|----------|---|-----|----------------------------|----------------------|----------|--------------------------------|
| 000027028 | 10/22/09 | M | 001 | Speech/Language Impairment | Reevaluation/ Annual | 05/31/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|----------------------------|----------------------|----------|--------------------------------|

Committee : Madill CSE Sub-Committee

|              | Primary Service | Start Date | Fut. End Date | Service Description  | Freq / Cycle Minutes     | Delivery Recommendations | School/ Location                                      |
|--------------|-----------------|------------|---------------|----------------------|--------------------------|--------------------------|---|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/06/2017    | Consultant Teacher   | 6/6 Day Cycle 40 Minutes | Direct - English         | Madill Elementary (PS)<br>General Education Classroom |
| CURRENT YEAR | No              | 09/06/2016 | 06/06/2017    | Speech               | 3/6 Day Cycle 30 Minutes | Group                    | Madill Elementary (PS)<br>Speech Classroom            |
| CURRENT YEAR | No              | 09/06/2016 | 06/06/2017    | Speech               | 3/6 Day Cycle 30 Minutes | Individual               | Madill Elementary (PS)<br>Speech Classroom            |
| CURRENT YEAR | No              | 09/06/2016 | 06/06/2017    | Physical Therapy     | 2/Weekly 30 Minutes      | Individual               | Madill Elementary (PS)<br>Provider Location           |
| CURRENT YEAR | No              | 03/21/2017 | 06/06/2017    | Occupational Therapy | 1/6 Day Cycle 30 Minutes | Group                    | Madill Elementary (PS)<br>Provider Location           |

Minutes: Continue classification of Speech/Language Impairment

**Board Action Sheet**  
**Meeting Date: 05/31/2017**  
**Ogdensburg City School District**

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| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

Recommendation through June 2017:  
 Direct Consultant Teacher services 6 times per cycle for 30 minutes in the area of English  
 Individual Counseling services 1 time 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 Physical Therapy services 2 times per week for 30 minutes  
 Group Occupational Therapy services 1 time per cycle for 30 minutes

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:  
 Resource Room services 6 times per cycle for 40 minutes  
 Direct Consultant Teacher services 6 times per cycle for 30 minutes in the area of English  
 Group Counseling services 1 time 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 Physical Therapy services 1 time per week for 30 minutes  
 Group Physical Therapy services 1 time per week for 30 minutes  
 Group Occupational Therapy services 1 time per cycle for 30 minutes

|           |          |   |    |        |                         |          |                                   |   |
|-----------|----------|---|----|--------|-------------------------|----------|-----------------------------------|---|
| 000028041 | 02/18/11 | M | JK | Autism | Reevaluation/<br>Annual | 05/31/17 | IEP Change: Remains<br>Classified | X |
|-----------|----------|---|----|--------|-------------------------|----------|-----------------------------------|---|

Committee : Madill CSE Sub-Committee

|              | Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description | Freq / Cycle<br>Minutes     | Delivery<br>Recommendations | School/<br>Location                                   |
|--------------|--------------------|------------|---------------------------|------------------------|-----------------------------|-----------------------------|---|
| CURRENT YEAR | Yes                | 12/20/2016 | 06/23/2017                | Resource Room          | 3/6 Day Cycle<br>30 Minutes |                             | Madill Elementary (PS)<br>Resource Room               |
| CURRENT YEAR | No                 | 12/20/2016 | 06/23/2017                | Consultant Teacher     | 3/6 Day Cycle<br>30 Minutes | Direct                      | Madill Elementary (PS)<br>General Education Classroom |
| CURRENT YEAR | No                 | 12/20/2016 | 06/23/2017                | Speech                 | 6/6 Day Cycle<br>30 Minutes | Individual                  | Madill Elementary (PS)<br>Speech Classroom            |
| CURRENT YEAR | No                 | 02/07/2017 | 06/23/2017                | Occupational Therapy   | 1/6 Day Cycle<br>30 Minutes | Group                       | Madill Elementary (PS)<br>Provider Location           |

**Board Action Sheet**  
**Meeting Date: 05/31/2017**  
**Ogdensburg City School District**

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| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

Minutes: Continue classification of Autism

Recommendation through June 2017:

Resource Room services 3 times per cycle for 30 minutes  
 Direct Consultant Teacher services 3 times per cycle for 30 minutes in the area of English  
 Individual Speech services 6 times per cycle for 30 minutes  
 Group Occupational Therapy services 1 time per cycle for 30 minutes  
 Behavioral Consultant 600 minutes per year

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:

Resource Room services 3 times per cycle for 30 minutes  
 Direct Consultant Teacher services 3 times per cycle for 30 minutes in the area of English  
 Individual Speech services 6 times per cycle for 30 minutes  
 Group Occupational Therapy services 1 time per cycle for 30 minutes  
 Shared Supplementary School Personnel services 6 times per cycle for 300 minutes in the areas of all academics and specials  
 Behavioral Consultant 600 minutes per year

|           |          |   |     |                     |               |          |                                |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|
| 000024212 | 10/03/05 | M | 005 | Learning Disability | Annual Review | 05/31/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|

Committee : Madill CSE Sub-Committee

|              | Primary Service | Start Date | Fut. End Date<br>End Date | Service Description                   | Freq / Cycle<br>Minutes          | Delivery Recommendations   | School/<br>Location                                   |
|--------------|-----------------|------------|---------------------------|---------------------------------------|----------------------------------|--|---|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/20/2017                | Resource Room                         | 6/6 Day Cycle<br>40 Minutes      |  | Madill Elementary (PS)<br>Resource Room               |
| CURRENT YEAR | No              | 09/06/2016 | 06/20/2017                | Consultant Teacher                    | 6/6 Day Cycle<br>40 Minutes      | Direct - ELA   | Madill Elementary (PS)<br>General Education Classroom |
| CURRENT YEAR | No              | 09/06/2016 | 06/20/2017                | Occupational Therapy                  | 1/6 Day Cycle<br>30 Minutes      | Group  | Madill Elementary (PS)<br>Madill School               |
| CURRENT YEAR |                 | 09/06/2016 |                           | Shared Supplementary School Personnel | 6 times per cycle<br>140 minutes | In the areas of English, Mathematics,<br>Science & Social Studies. | General Ed. & Special Ed. Classrooms                  |

**Board Action Sheet**  
**Meeting Date: 05/31/2017**  
**Ogdensburg City School District**

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| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

**Minutes:** Continue classification of Learning Disability  
Recommendation through June 2017:  
Resource Room services 6 times per cycle for 40 minutes  
Direct Consultant Teacher services 6 times per cycle for 40 minutes in the area of English  
Group Occupational Therapy services 1 time per cycle for 30 minutes  
Shared Supplementary School Personnel services 6 times per cycle for 140 minutes in the areas of English, mathematics, science and social studies

12 Month Extended Year Recommendation:  
None

Fall 2017 Recommendation:  
Resource Room services 6 times per cycle for 40 minutes  
Direct Consultant Teacher services 6 times per cycle for 40 minutes in the area of English  
Shared Supplementary School Personnel services 6 times per cycle for 140 minutes in the areas of English, mathematics, science and social studies

|           |          |   |     |                     |               |          |                                |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|
| 000024143 | 07/19/06 | F | 005 | Learning Disability | Annual Review | 05/31/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|

Committee : Madill CSE Sub-Committee

|              | Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle Minutes        | Delivery Recommendations | School/ Location                                      |
|--------------|-----------------|------------|---------------|---------------------|-----------------------------|--------------------------|---|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/06/2017    | Resource Room       | 6/6 Day Cycle<br>40 Minutes |                          | Madill Elementary (PS)<br>Resource Room               |
| CURRENT YEAR | No              | 09/06/2016 | 06/06/2017    | Consultant Teacher  | 6/6 Day Cycle<br>40 Minutes | Direct - Mathematics     | Madill Elementary (PS)<br>General Education Classroom |

**Minutes:** Continue classification of Learning Disability  
Recommendation through June 2017:  
Resource Room services 6 times per cycle for 40 minutes  
Direct Consultant Teacher services 6 times per cycle for 30 minutes in the areas of mathematics  
12 Month Extended Year Recommendation:  
None

**Board Action Sheet**  
**Meeting Date: 05/31/2017**  
**Ogdensburg City School District**

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| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

Fall 2017 Recommendation:  
No changes

|           |          |   |     |                     |               |          |                                |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|
| 000024185 | 06/17/05 | M | 005 | Learning Disability | Annual Review | 05/31/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|

Committee : Madill CSE Sub-Committee

|              | Primary Service | Start Date | Fut. End Date<br>End Date | Service Description                   | Freq / Cycle<br>Minutes          | Delivery Recommendations  | School/ Location                        |
|--------------|-----------------|------------|---------------------------|---------------------------------------|----------------------------------|---|---|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/06/2017                | Resource Room                         | 6/6 Day Cycle<br>40 Minutes      |   | Madill Elementary (PS)<br>Resource Room |
| CURRENT YEAR |                 | 09/06/2016 | 06/06/2017                | Shared Supplementary School Personnel | 6 times per cycle<br>120 minutes | Areas of English Language Arts, Math, Science, and Social Studies | General Education Classroom             |

Minutes: Continue classification of Learning Disability

Recommendation through June 2017:

Resource Room services 6 times per cycle for 40 minutes

Shared Supplementary School Personnel services 6 times per cycle for 120 minutes in the areas of English (60), mathematics (30) and science/social studies (30)

12 Month Extended Year Recommendation:

None

Fall 2017 Recommendation:

No changes

|           |          |   |     |                     |               |          |                                |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|
| 000025025 | 03/04/06 | F | 005 | Learning Disability | Annual Review | 05/31/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|

Committee : Madill CSE Sub-Committee

|              | Primary Service | Start Date | Fut. End Date<br>End Date | Service Description | Freq / Cycle<br>Minutes     | Delivery Recommendations | School/ Location                        |
|--------------|-----------------|------------|---------------------------|---------------------|-----------------------------|--------------------------|---|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/06/2017                | Resource Room       | 6/6 Day Cycle<br>40 Minutes |                          | Madill Elementary (PS)<br>Resource Room |

**Board Action Sheet**  
**Meeting Date: 05/31/2017**  
**Ogdensburg City School District**

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| ID           | DOB | Gender     | Grd        | Disability         | Meeting                     | Mtg Date             | Ref Date | Outcome   | 12 Mth |
|--------------|-----|------------|------------|--------------------|-----------------------------|----------------------|----------|---|--------|
| CURRENT YEAR | No  | 09/06/2016 | 06/06/2017 | Consultant Teacher | 6/6 Day Cycle<br>40 Minutes | Direct - Mathematics |          | Madill Elementary (PS)<br>General Education Classroom |        |

**Minutes:** Continue classification of Learning Disability

Recommendation through June 2017:

Resource Room services 6 times per cycle for 40 minutes

Direct Consultant Teacher services 6 times per cycle for 30 minutes in the areas of mathematics

12 Month Extended Year Recommendation:

None

Fall 2017 Recommendation:

No changes

|           |          |   |     |                            |               |          |                                   |
|-----------|----------|---|-----|----------------------------|---------------|----------|-----------------------------------|
| 000027022 | 11/13/08 | M | 002 | Other Health<br>Impairment | Annual Review | 05/31/17 | IEP Change: Remains<br>Classified |
|-----------|----------|---|-----|----------------------------|---------------|----------|-----------------------------------|

**Committee :** Madill CSE Sub-Committee

|              | Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description  | Freq / Cycle<br>Minutes     | Delivery<br>Recommendations | School/<br>Location                     |
|--------------|--------------------|------------|---------------------------|-------------------------|-----------------------------|-----------------------------|---|
| CURRENT YEAR | Yes                | 02/28/2017 | 06/23/2017                | Resource Room           | 6/6 Day Cycle<br>36 Minutes |                             | Madill Elementary (PS)<br>Resource Room |
| CURRENT YEAR | No                 | 02/28/2017 | 06/23/2017                | Skilled Nursing Service | 6/6 Day Cycle<br>15 Minutes | Individual                  | Madill Elementary (PS)<br>Health Office |

**Minutes:** Continue classification of Other Health Impairment

Recommendation through June 2017:

Resource Room services 6 times per cycle for 40 minutes

Skilled Nursing services 6 times per cycle for 15 minutes

12 Month Extended Year Recommendation:

None

Fall 2017 Recommendation:

**Board Action Sheet**  
**Meeting Date: 05/31/2017**  
**Ogdensburg City School District**

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| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

Resource Room services 6 times per cycle for 40 minutes

Direct Consultant Teacher services 6 times per cycle for 30 minutes in the area of mathematics

Skilled Nursing services 6 times per cycle for 15 minutes

Shared Supplementary School Personnel services 6 times per cycle for 120 minutes in the areas of English (60), mathematics (30) and science/social studies (30)

**Total Meetings: 10**



**Board Action Sheet**  
**Meeting Date: 05/30/2017**  
**Ogdensburg City School District**

Printed: 06/14/2017 2:30

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |                        |            |          |  |                             |
|-----------|----------|---|-----|------------------------|------------|----------|--|-----------------------------|
| 000020093 | 03/11/02 | F | 009 | Section 504 Disability | 504 Review | 05/30/17 |  | Continue Accommodation Plan |
|-----------|----------|---|-----|------------------------|------------|----------|--|-----------------------------|

Committee : 504 Accommodation Plan Committee

| Primary Service | Start Date | Fut. End Date<br>End Date | Service Description | Freq / Cycle<br>Minutes | Delivery Recommendations | School/<br>Location |
|-----------------|------------|---------------------------|---------------------|-------------------------|--------------------------|---------------------|
|-----------------|------------|---------------------------|---------------------|-------------------------|--------------------------|---------------------|

**Minutes:** Continue classification of Section 504 Disability

Recommendation through June 2017:  
Section 504 Accommodations 6 times per cycle for 415 minutes

12 Month Extended Year Recommendation:  
None

Fall 2017 Recommendation:  
No changes

|           |          |   |     |                        |            |          |  |                           |
|-----------|----------|---|-----|------------------------|------------|----------|--|---------------------------|
| 000020132 | 03/04/02 | M | 009 | Section 504 Disability | 504 Review | 05/30/17 |  | Change Accommodation Plan |
|-----------|----------|---|-----|------------------------|------------|----------|--|---------------------------|

Committee : 504 Accommodation Plan Committee

| Primary Service | Start Date | Fut. End Date<br>End Date | Service Description | Freq / Cycle<br>Minutes     | Delivery Recommendations | School/<br>Location                       |
|-----------------|------------|---------------------------|---------------------|-----------------------------|--------------------------|---|
| CURRENT YEAR    | Yes        | 09/06/2016 06/23/2017     | Resource Room       | 6/6 Day Cycle<br>40 Minutes |                          | OFA Grades 9-12 (PS)<br>Resource Room     |
| CURRENT YEAR    | No         | 09/06/2016 06/23/2017     | Counseling          | 1/6 Day Cycle<br>30 Minutes | Individual               | OFA Grades 9-12 (PS)<br>Counselors Office |

**Minutes:** Continue classification of Section 504 Disability

Recommendation through June 2017:  
Resource Room services 6 times per cycle for 40 minutes  
Individual Counseling services 1 time per cycle for 30 minutes  
Section 504 Accommodations 6 times per cycle for 415 minutes

**Board Action Sheet**  
**Meeting Date: 05/30/2017**  
**Ogdensburg City School District**

Printed: 06/14/2017 2:30

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

12 Month Extended Year Recommendation:  
None

Fall 2017 Recommendation:  
Section 504 Accommodations 6 times per cycle for 415 minutes

|           |          |   |     |                           |            |          |                              |
|-----------|----------|---|-----|---------------------------|------------|----------|------------------------------|
| 000018010 | 05/19/00 | F | 011 | Section 504<br>Disability | 504 Review | 05/30/17 | Change Accommodation<br>Plan |
|-----------|----------|---|-----|---------------------------|------------|----------|------------------------------|

Committee : 504 Accommodation Plan Committee

| Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description | Freq / Cycle<br>Minutes | Delivery<br>Recommendations | School/<br>Location |
|--------------------|------------|---------------------------|------------------------|-------------------------|-----------------------------|---------------------|
|--------------------|------------|---------------------------|------------------------|-------------------------|-----------------------------|---------------------|

Minutes: Continue classification of Section 504 Disability

Recommendation through June 2017:  
Section 504 Accommodations 6 times per cycle for 415 minutes

12 Month Extended Year Recommendation:  
None

Fall 2017 Recommendation:  
Resource Room services 6 times per cycle for 40 minutes  
Section 504 Accommodations 6 times per cycle for 415 minutes  
Vocational Education services 6 times per cycle for 207 minutes in the area of Health Careers

|           |          |   |     |                           |            |          |                              |
|-----------|----------|---|-----|---------------------------|------------|----------|------------------------------|
| 000019068 | 03/26/00 | M | 011 | Section 504<br>Disability | 504 Review | 05/30/17 | Change Accommodation<br>Plan |
|-----------|----------|---|-----|---------------------------|------------|----------|------------------------------|

Committee : 504 Accommodation Plan Committee

|              | Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description | Freq / Cycle<br>Minutes     | Delivery<br>Recommendations | School/<br>Location                   |
|--------------|--------------------|------------|---------------------------|------------------------|-----------------------------|-----------------------------|---------------------------------------|
| CURRENT YEAR | Yes                | 09/06/2016 | 06/20/2017                | Resource Room          | 6/6 Day Cycle<br>40 Minutes |                             | OFA Grades 9-12 (PS)<br>Resource Room |

**Board Action Sheet**  
**Meeting Date: 05/30/2017**  
**Ogdensburg City School District**

Printed: 06/14/2017 2:30

| ID           | DOB | Gender     | Grd        | Disability         | Meeting                     | Mtg Date         | Ref Date | Outcome   | 12 Mth |
|--------------|-----|------------|------------|--------------------|-----------------------------|------------------|----------|---|--------|
| CURRENT YEAR | No  | 09/06/2016 | 06/20/2017 | Consultant Teacher | 6/6 Day Cycle<br>40 Minutes | Direct - English |          | OFA Grades 9-12 (PS)<br>General Education Classroom |        |

**Minutes:** Continue classification of Section 504 Disability

Recommendation through June 2017:

Section 504 Accommodations 6 times per cycle for 415 minutes

Resource Room services 6 times per cycle for 40 minutes

Direct Consultant Teacher services 6 times per cycle for 40 minutes in the area of English

Vocational Education services 6 times per cycle for 207 minutes in the area of Natural Resources

12 Month Extended Year Recommendation:

None

Fall 2017 Recommendation:

Resource Room services 6 times per cycle for 40 minutes

Section 504 Accommodations 6 times per cycle for 415 minutes

|           |          |   |     |                           |            |          |  |                                |
|-----------|----------|---|-----|---------------------------|------------|----------|--|--------------------------------|
| 000023029 | 07/14/04 | F | 007 | Section 504<br>Disability | 504 Review | 05/30/17 |  | Continue<br>Accommodation Plan |
|-----------|----------|---|-----|---------------------------|------------|----------|--|--------------------------------|

Committee : 504 Accommodation Plan Committee

|              | Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description  | Freq / Cycle<br>Minutes     | Delivery<br>Recommendations | School/<br>Location                  |
|--------------|--------------------|------------|---------------------------|-------------------------|-----------------------------|-----------------------------|--------------------------------------|
| CURRENT YEAR | Yes                | 09/06/2016 | 06/23/2017                | Skilled Nursing Service | 6/6 Day Cycle<br>15 Minutes | Individual                  | OFA Grades 7-8 (PS)<br>Health Office |

**Minutes:** Continue classification of Section 504 Disability

Recommendation through June 2017:

Skilled Nursing services 6 times per cycle for 15 minutes

Section 504 Accommodations 6 times per cycle for 415 minutes

12 Month Extended Year Recommendation:

None

**Board Action Sheet**  
**Meeting Date: 05/30/2017**  
**Ogdensburg City School District**

Printed: 06/14/2017 2:30

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

Fall 2017 Recommendation:  
No changes

|           |          |   |     |                           |            |          |  |                                |
|-----------|----------|---|-----|---------------------------|------------|----------|--|--------------------------------|
| 000023092 | 08/30/04 | F | 007 | Section 504<br>Disability | 504 Review | 05/30/17 |  | Continue<br>Accommodation Plan |
|-----------|----------|---|-----|---------------------------|------------|----------|--|--------------------------------|

Committee : 504 Accommodation Plan Committee

|              | Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description  | Freq / Cycle<br>Minutes     | Delivery<br>Recommendations | School/<br>Location                  |
|--------------|--------------------|------------|---------------------------|-------------------------|-----------------------------|-----------------------------|--------------------------------------|
| CURRENT YEAR | No                 | 09/06/2016 | 06/23/2017                | Skilled Nursing Service | 6/6 Day Cycle<br>15 Minutes | Individual                  | OFA Grades 7-8 (PS)<br>Health Office |

**Minutes:** Continue classification of Section 504 Disability

Recommendation through June 2017:  
Skilled Nursing services 6 times per cycle for 15 minutes  
Section 504 Accommodations 6 times per cycle for 415 minutes

12 Month Extended Year Recommendation:  
None

Fall 2017 Recommendation:  
No changes

|           |          |   |     |                           |            |          |  |                                |
|-----------|----------|---|-----|---------------------------|------------|----------|--|--------------------------------|
| 000022122 | 07/01/04 | M | 007 | Section 504<br>Disability | 504 Review | 05/30/17 |  | Continue<br>Accommodation Plan |
|-----------|----------|---|-----|---------------------------|------------|----------|--|--------------------------------|

Committee : 504 Accommodation Plan Committee

|              | Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description  | Freq / Cycle<br>Minutes     | Delivery<br>Recommendations | School/<br>Location                  |
|--------------|--------------------|------------|---------------------------|-------------------------|-----------------------------|-----------------------------|--------------------------------------|
| CURRENT YEAR | No                 | 09/06/2016 | 06/23/2017                | Skilled Nursing Service | 6/6 Day Cycle<br>15 Minutes | Individual                  | OFA Grades 7-8 (PS)<br>Health Office |

**Minutes:** Continue classification of Section 504 Disability

**Board Action Sheet**  
**Meeting Date: 05/30/2017**  
**Ogdensburg City School District**

Printed: 06/14/2017 2:30

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

Recommendation through June 2017:  
 Skilled Nursing services 6 times per cycle for 15 minutes  
 Section 504 Accommodations 6 times per cycle for 415 minutes

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:  
 No changes

|           |          |   |     |                           |            |          |                                |
|-----------|----------|---|-----|---------------------------|------------|----------|--------------------------------|
| 000023173 | 03/11/05 | F | 006 | Section 504<br>Disability | 504 Review | 05/30/17 | Continue<br>Accommodation Plan |
|-----------|----------|---|-----|---------------------------|------------|----------|--------------------------------|

Committee : 504 Accommodation Plan Committee

| Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description | Freq / Cycle<br>Minutes | Delivery<br>Recommendations | School/<br>Location |
|--------------------|------------|---------------------------|------------------------|-------------------------|-----------------------------|---------------------|
|--------------------|------------|---------------------------|------------------------|-------------------------|-----------------------------|---------------------|

**Minutes:** Continue classification of Section 504 Disability

Recommendation through June 2017:  
 Section 504 Accommodations 6 times per cycle for 390 minutes

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:  
 Section 504 Accommodations 6 times per cycle for 415 minutes

|           |          |   |     |                           |            |          |                                |
|-----------|----------|---|-----|---------------------------|------------|----------|--------------------------------|
| 000026068 | 03/31/08 | M | 003 | Section 504<br>Disability | 504 Review | 05/30/17 | Continue<br>Accommodation Plan |
|-----------|----------|---|-----|---------------------------|------------|----------|--------------------------------|

Committee : 504 Accommodation Plan Committee

|              | Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description | Freq / Cycle<br>Minutes     | Delivery<br>Recommendations | School/<br>Location                          |
|--------------|--------------------|------------|---------------------------|------------------------|-----------------------------|-----------------------------|--|
| CURRENT YEAR | No                 | 09/06/2016 | 06/20/2017                | Occupational Therapy   | 1/6 Day Cycle<br>30 Minutes | Group                       | Kennedy Elementary (PS)<br>Provider Location |

**Board Action Sheet**  
**Meeting Date: 05/30/2017**  
**Ogdensburg City School District**

Printed: 06/14/2017 2:30

| ID           | DOB        | Gender | Grd | Disability           | Meeting   | Mtg Date  | Ref Date | Outcome                     | 12 Mth |
|--------------|------------|--------|-----|----------------------|---|---|----------|-----------------------------|--------|
| CURRENT YEAR | 02/07/2017 |        |     | Visual Aid Materials | At the discretion of the classroom teacher.<br>All day. | Allowing visual supports for the handwriting process. |          | General Education Classroom |        |

**Minutes:** Continue classification of Section 504 Disability

Recommendation through June 2017:

Group Occupational Therapy services 1 time per cycle for 30 minutes  
 Section 504 Accommodations 6 times per cycle for 390 minutes

12 Month Extended Year Recommendation:

None

Fall 2017 Recommendation:

No changes

**Total Meetings: 9**

**Board Action Sheet**  
**Meeting Date: 05/30/2017**  
**Ogdensburg City School District**

Printed: 06/14/2017 1:54

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |                         |               |          |  |                                |   |
|-----------|----------|---|-----|-------------------------|---------------|----------|--|--------------------------------|---|
| 000021067 | 06/05/02 | F | 008 | Intellectual Disability | Annual Review | 05/30/17 |  | IEP Change: Remains Classified | X |
|-----------|----------|---|-----|-------------------------|---------------|----------|--|--------------------------------|---|

Committee : Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle Minutes         | Delivery Recommendations     | School/ Location                         |
|--------------|-----------------|------------|---------------|---------------------|------------------------------|------------------------------|--|
| CURRENT YEAR | Yes             | 09/06/2016 | 05/09/2017    | Ratio 12:1:1        | 6/6 Day Cycle<br>390 Minutes | 12 students/1 teacher/1 aide | OFA Grades 7-8 (BL)<br>12:1:1 Classroom  |
| CURRENT YEAR | No              | 09/06/2016 | 05/09/2017    | Counseling          | 1/Weekly<br>30 Minutes       | Group                        | OFA Grades 7-8 (BL)<br>Provider Location |

**Minutes:** Continue classification of Intellectual Disability

Recommendation through June 2017:  
 BOCES 12:1:1 classroom placement 6 times per cycle  
 Group Counseling services 1 time per week for 30 minutes  
 Special Transportation services

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:  
 BOCES 12:1:1 classroom placement 6 times per cycle  
 Adaptive Physical Education services 3 times per cycle for 30 minutes  
 Individual Counseling services 1 time per week for 30 minutes  
 Special Transportation services

|           |          |   |     |                         |               |          |  |                                |   |
|-----------|----------|---|-----|-------------------------|---------------|----------|--|--------------------------------|---|
| 000020045 | 08/07/03 | M | 008 | Intellectual Disability | Annual Review | 05/30/17 |  | IEP Change: Remains Classified | X |
|-----------|----------|---|-----|-------------------------|---------------|----------|--|--------------------------------|---|

Committee : Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle Minutes         | Delivery Recommendations     | School/ Location                        |
|--------------|-----------------|------------|---------------|---------------------|------------------------------|------------------------------|---|
| CURRENT YEAR | Yes             | 09/06/2016 | 05/09/2017    | Ratio 12:1:1        | 6/6 Day Cycle<br>390 Minutes | 12 students/1 teacher/1 aide | OFA Grades 7-8 (BL)<br>12:1:1 Classroom |

**Board Action Sheet**  
**Meeting Date: 05/30/2017**  
**Ogdensburg City School District**

Printed: 06/14/2017 1:54

| ID           | DOB | Gender     | Grd        | Disability                                   | Meeting                          | Mtg Data | Ref Data                        | Outcome             | 12 Mth |
|--------------|-----|------------|------------|--|----------------------------------|----------|---------------------------------|---------------------|--------|
| CURRENT YEAR | No  | 09/06/2016 | 05/09/2017 | Adaptive Physical Education                  | 3/6 Day Cycle<br>40 Minutes      |          | OFA Grades 7-8 (PS)<br>Gym/Pool |                     |        |
| CURRENT YEAR |     | 09/06/2016 | 05/09/2017 | Individual Supplementary School<br>Personnel | 6 times per cycle<br>390 minutes |          |                                 | across environments |        |

**Minutes:** Continue classification of Intellectual Disability

Recommendation through June 2017:  
 BOCES 12:1:1 classroom placement 6 times per cycle for 390 minutes  
 Adaptive Physical Education services 3 times per cycle for 40 minutes  
 Individual Supplementary School Personnel services 6 times per cycle for 390 minutes  
 Special Transportation services

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:  
 BOCES 12:1:1 classroom placement 6 times per cycle for 210 minutes  
 Adaptive Physical Education services 3 times per cycle for 40 minutes  
 Individual Supplementary School Personnel services 6 times per cycle for 390 minutes  
 BOCES Greenhouse program 6 times per cycle for 150 minutes  
 Special Transportation services

**Total Meetings: 2**



**Board Action Sheet**  
**Meeting Date: 05/26/2017**  
**Ogdensburg City School District**

Printed: 06/14/2017 1:29

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |  |              |          |          |  |  |
|-----------|----------|---|-----|--|--------------|----------|----------|--|--|
| 000077193 | 05/30/14 | F | 014 | Developmentally Delayed (EI)  <br>As of 06/20/17:<br>Preschool Student with a Disability | New Referral | 05/26/17 | 01/26/17 | Eligible but Delayed or no Placement (Parents chose to continue their child in Early Intervention Program (EIP) and transition to Preschool Special Education after the child became three years of age. |  |
|-----------|----------|---|-----|--|--------------|----------|----------|--|--|

Committee : Committee on Preschool Special Education

|                |                      |                 |                     |                        |                 |
|----------------|----------------------|-----------------|---------------------|------------------------|-----------------|
| <b>Primary</b> | <b>Fut. End Date</b> | <b>Service</b>  | <b>Freq / Cycle</b> | <b>Delivery</b>        | <b>School/</b>  |
| <b>Service</b> | <b>Start Date</b>    | <b>End Date</b> | <b>Minutes</b>      | <b>Recommendations</b> | <b>Location</b> |

**Minutes:** Eligible for classification of Preschool Student with a Disability

Recommendation (9/5/17-6/19/18):  
Special Education Itinerant Teacher services 2 times per week for 60 minutes

**Total Meetings: 1**

**Board Action Sheet**  
**Meeting Date: 05/26/2017**  
**Ogdensburg City School District**

Printed: 06/13/2017 2:28

| ID                                      | DOB             | Gender     | Grd           | Disability                            | Meeting                          | Mtg Date  | Ref Date                                 | Outcome                        | 12 Mth |
|---|-----------------|------------|---------------|---------------------------------------|----------------------------------|---|--|--------------------------------|--------|
| 000022144                               | 11/27/03        | M          | 007           | Other Health Impairment               | Annual Review                    | 05/26/17  |  | IEP Change: Remains Classified |        |
| Committee : OFA Grades 7-8 Subcommittee |                 |            |               |                                       |                                  |   |  |                                |        |
|   | Primary Service | Start Date | Fut. End Date | Service Description                   | Freq / Cycle Minutes             | Delivery Recommendations  | School/ Location                         |                                |        |
| CURRENT YEAR                            | No              | 09/06/2016 | 06/20/2017    | Adaptive Physical Education           | 3/6 Day Cycle<br>40 Minutes      |   | OFA Grades 7-8 (PS)<br>Gym/Pool          |                                |        |
| CURRENT YEAR                            | No              | 09/06/2016 | 06/20/2017    | Counseling                            | 1/6 Day Cycle<br>30 Minutes      | Individual  | OFA Grades 7-8 (PS)<br>Counselors Office |                                |        |
| CURRENT YEAR                            | No              | 09/06/2016 | 06/20/2017    | Skilled Nursing Service               | 6/6 Day Cycle<br>15 Minutes      | Individual  | OFA Grades 7-8 (PS)<br>Health Office     |                                |        |
| CURRENT YEAR                            | Yes             | 10/28/2016 | 06/20/2017    | Ratio 15:1:1                          | 6/6 Day Cycle<br>180 Minutes     | 15 students/1 teacher/1 aide -<br>English & Mathematics           | OFA Grades 7-8 (PS)<br>15:1:1 Classroom  |                                |        |
| CURRENT YEAR                            |                 | 10/28/2016 |               | Shared Supplementary School Personnel | 6 times per cycle<br>120 minutes | In the areas of Science, Social<br>Studies and Art/Home & Careers | General Ed. & Special Ed. Classrooms     |                                |        |

**Minutes:** Continue classification of Other Health Impairment

Recommendation through June 2017:

Direct Consultant Teacher services 6 times per cycle for 40 minutes in the area of English

Adaptive Physical Education services 3 times per cycle for 40 minutes

Individual Counseling services 1 time per month for 30 minutes

Individual Skilled Nursing services 6 times per cycle for 15 minutes

Shared Supplementary School Personnel services 6 times per cycle for 100 minutes in the areas of science, social studies and home & careers

12 Month Extended Year Recommendation:

None

Fall 2017 Recommendation:

Resource Room services 12 times per cycle for 40 minutes

Direct Consultant Teacher services 12 times per cycle for 40 minutes in the areas of English and mathematics

Individual Counseling services 2 times per month for 30 minutes

Individual Skilled Nursing services 6 times per cycle for 15 minutes

Shared Supplementary School Personnel services 12 times per cycle for 40 minutes in the areas of science and social studies

**Board Action Sheet**  
**Meeting Date: 05/26/2017**  
**Ogdensburg City School District**

Printed: 06/13/2017 2:28

| UD | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

Total Meetings: 1

**Board Action Sheet**  
**Meeting Date: 05/25/2017**  
**Ogdensburg City School District**

Printed: 06/13/2017 1:07

| ID                                    | DOB             | Gender     | Grd           | Disability                                | Meeting                          | Mtg Date                     | Ref Date                                     | Outcome             | 12 Mth |
|---------------------------------------|-----------------|------------|---------------|---|----------------------------------|------------------------------|--|---------------------|--------|
| 000026047                             | 05/26/09        | M          | 002           | Autism                                    | Annual Review                    | 05/25/17                     |  | Continuation of IEP |        |
| Committee : Kennedy CSE Sub-Committee |                 |            |               |   |                                  |                              |  |                     |        |
|                                       | Primary Service | Start Date | Fut. End Date | Service Description                       | Freq / Cycle Minutes             | Delivery Recommendations     | School/ Location                             |                     |        |
| CURRENT YEAR                          |                 | 09/06/2016 | 10/13/2016    | Individual Supplementary School Personnel | 6 times per cycle<br>390 minutes | Throughout the day           | General Ed. & Special Ed. Classrooms         |                     |        |
| CURRENT YEAR                          | Yes             | 09/26/2016 | 06/23/2017    | Ratio 12:1:1                              | 6/6 Day Cycle<br>252 Minutes     | 12 students/1 teacher/1 aide | Kennedy Elementary (PS)<br>12:1:1 Classroom  |                     |        |
| CURRENT YEAR                          | No              | 09/26/2016 | 06/23/2017    | Occupational Therapy                      | 2/6 Day Cycle<br>30 Minutes      | Individual                   | Kennedy Elementary (BL)<br>Provider Location |                     |        |
| CURRENT YEAR                          | No              | 09/26/2016 | 06/23/2017    | Physical Therapy                          | 2/Weekly<br>30 Minutes           | Individual                   | Kennedy Elementary (BL)<br>Provider Location |                     |        |
| CURRENT YEAR                          | No              | 09/26/2016 | 06/23/2017    | Speech                                    | 3/6 Day Cycle<br>30 Minutes      | Group                        | Kennedy Elementary (PS)<br>Speech Classroom  |                     |        |
| CURRENT YEAR                          | No              | 09/26/2016 | 06/23/2017    | Speech                                    | 3/6 Day Cycle<br>30 Minutes      | Individual                   | Kennedy Elementary (PS)<br>Speech Classroom  |                     |        |
| CURRENT YEAR                          |                 | 09/26/2016 | 06/23/2017    | Individual Supplementary School Personnel | 6 times per cycle<br>390 minutes | Throughout the day           | General Ed. & Special Ed. Classrooms         |                     |        |
| CURRENT YEAR                          | No              | 10/18/2016 | 06/23/2017    | Adaptive Physical Education               | 3/6 Day Cycle<br>40 Minutes      |                              | Kennedy Elementary (BL)<br>Gym/Pool          |                     |        |

**Minutes:** Continue classification of Autism

Recommendation through June 2017:  
 District 12:1:1 classroom placement 6 times per cycle for 265 minutes  
 Adaptive Physical Education services 3 times per cycle for 40 minutes  
 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

**Board Action Sheet**  
**Meeting Date: 05/25/2017**  
**Ogdensburg City School District**

Printed: 06/13/2017 1:07

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

12 Month Extended Year Recommendation:  
 BOCES 12:1:1 classroom placement 5 times per week for 360 minutes  
 Individual Supplementary School Personnel services 5 times per week for 360 minutes

Fall 2017 Recommendation:  
 District 12:1:1 classroom placement 6 times per cycle for 265 minutes  
 Adaptive Physical Education services 3 times per cycle for 40 minutes  
 Individual Occupational Therapy services 1 time 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  
 Individual Supplementary School Personnel services 6 times per cycle for 390 minutes  
 Behavioral Consultant services 600 minutes per year  
 Special Transportation services

|           |          |   |     |                            |               |          |                                |   |
|-----------|----------|---|-----|----------------------------|---------------|----------|--------------------------------|---|
| 000026039 | 04/09/09 | M | 002 | Speech/Language Impairment | Annual Review | 05/25/17 | IEP Change: Remains Classified | X |
|-----------|----------|---|-----|----------------------------|---------------|----------|--------------------------------|---|

Committee : Kennedy CSE Sub-Committee

|              | Primary Service | Start Date | Fut. End Date | Service Description  | Freq / Cycle Minutes         | Delivery Recommendations     | School/ Location                             |
|--------------|-----------------|------------|---------------|----------------------|------------------------------|------------------------------|--|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/20/2017    | Ratio 12:1:1         | 6/6 Day Cycle<br>225 Minutes | 12 students/1 teacher/1 aide | Kennedy Elementary (PS)<br>12:1:1 Classroom  |
| CURRENT YEAR | No              | 09/06/2016 | 06/20/2017    | Occupational Therapy | 1/6 Day Cycle<br>30 Minutes  | Individual                   | Kennedy Elementary (PS)<br>Provider Location |
| CURRENT YEAR | No              | 10/25/2016 | 06/20/2017    | Speech               | 6/6 Day Cycle<br>30 Minutes  | Group                        | Kennedy Elementary (PS)<br>Speech Classroom  |

**Minutes:** Continue classification of Speech/Language Impairment

Recommendation through June 2017:  
 District 12:1:1 classroom placement 6 times per cycle for 265 minutes  
 Individual Occupational Therapy services 1 time per cycle for 30 minutes  
 Group Speech services 6 times per cycle for 30 minutes  
 Special Transportation services

12 Month Extended Year Recommendation:

**Board Action Sheet**  
**Meeting Date: 05/25/2017**  
**Ogdensburg City School District**

Printed: 06/13/2017 1:07

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

None

Fall 2017 Recommendation:  
District 12:1:1 classroom placement 6 times per cycle for 265 minutes  
Group Speech services 6 times per cycle for 30 minutes  
Special Transportation services

|           |          |   |     |  |               |          |                             |
|-----------|----------|---|-----|--|---------------|----------|-----------------------------|
| 000025035 | 01/29/07 | M | 004 | Speech/Language<br>Impairment  <br>As of 06/20/17:<br>Declassified | Annual Review | 05/25/17 | IEP Change:<br>Declassified |
|-----------|----------|---|-----|--|---------------|----------|-----------------------------|

Committee : Kennedy CSE Sub-Committee

|              | Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description | Freq / Cycle<br>Minutes     | Delivery<br>Recommendations | School/<br>Location                         |
|--------------|--------------------|------------|---------------------------|------------------------|-----------------------------|-----------------------------|---|
| CURRENT YEAR | Yes                | 09/06/2016 | 06/06/2017                | Speech                 | 3/6 Day Cycle<br>30 Minutes | Group                       | Kennedy Elementary (PS)<br>Speech Classroom |

Minutes: Recommendation:  
Declassify

**Total Meetings: 3**

**Board Action Sheet**  
**Meeting Date: 05/25/2017**  
**Ogdensburg City School District**

Printed: 06/13/2017 10:52

| ID | DOB | Gender | Grd | Disability | Need/ing | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|----------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|----------|----------|----------|---------|--------|

|                                      |          |   |     |        |              |          |                                |   |
|--------------------------------------|----------|---|-----|--------|--------------|----------|--------------------------------|---|
| 000028040                            | 05/12/11 | M | 013 | Autism | Reevaluation | 05/25/17 | IEP Change: Remains Classified | X |
| Committee : Madill CSE Sub-Committee |          |   |     |        |              |          |                                |   |

|              | Primary Service | Start Date | Fut. End Date | Service Description                             | Freq / Cycle Minutes             | Delivery Recommendations   | School/ Location                            |
|--------------|-----------------|------------|---------------|---|----------------------------------|--|---|
| CURRENT YEAR |                 | 07/04/2016 | 08/12/2016    | Individual Supplementary School Personnel - ESY | 5 times per week<br>150 minutes  |  | 6:1:1 Classroom                             |
| CURRENT YEAR | Yes             | 01/19/2017 | 06/23/2017    | Ratio 6:1:1                                     | 6/6 Day Cycle<br>330 Minutes     | 6 students/1 teacher/1 aide  | Madill Elementary (PS)<br>6:1:1 Classroom   |
| CURRENT YEAR | No              | 01/19/2017 | 06/23/2017    | Occupational Therapy                            | 2/6 Day Cycle<br>30 Minutes      | Individual   | Madill Elementary (PS)<br>Provider Location |
| CURRENT YEAR | No              | 01/19/2017 | 06/23/2017    | Speech  | 6/6 Day Cycle<br>30 Minutes      | Individual   | Madill Elementary (PS)<br>Speech Classroom  |
| CURRENT YEAR |                 | 01/19/2017 | 06/23/2017    | Individual Supplementary School Personnel       | 6 times per cycle<br>330 minutes | As directed by TCM. Assist in attending to classroom activities, materials and people; reduce/intervene in maladaptive behaviors; to support structured teaching and generalization; and to assist with communication. | General Ed. & Special Ed. Classrooms        |
| CURRENT YEAR | No              | 04/04/2017 | 06/23/2017    | Physical Therapy                                | 2/Weekly<br>30 Minutes           | Individual   | Madill Elementary (PS)<br>Madill School     |

**Minutes:** Continue classification of Autism

Recommendation through June 2017:  
District 6:1:1 ABA classroom 6 times per cycle for 330 minutes  
Individual Occupational Therapy services 2 times per cycle for 30 minutes  
Individual Physical Therapy services 2 times per week for 30 minutes  
Individual Speech services 6 times per cycle for 30 minutes  
Individual Supplementary School Personnel services 6 times per cycle for 330 minutes  
Behavioral Consultant services 600 minutes per year  
Special Transportation services

12 Month Extended Year Recommendation:

**Board Action Sheet**  
**Meeting Date: 05/25/2017**  
**Ogdensburg City School District**

Printed: 06/13/2017 10:52

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

District 6:1:1 ABA classroom 5 times per week for 150 minutes  
Individual Physical Therapy services 1 time per week for 30 minutes  
Individual Speech services 3 times per week for 30 minutes  
Individual Supplementary School Personnel services 5 times per week for 150 minutes  
Behavioral Consultant services 120 minutes per summer

Fall 2017 Recommendation:  
No changes

**Total Meetings: 1**



**Board Action Sheet**  
**Meeting Date: 05/24/2017**  
**Ogdensburg City School District**

Printed: 06/13/2017 10:14

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |                            |               |          |                                |
|-----------|----------|---|-----|----------------------------|---------------|----------|--------------------------------|
| 000029058 | 02/27/11 | F | 013 | Speech/Language Impairment | Annual Review | 05/24/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|----------------------------|---------------|----------|--------------------------------|

Committee : Madill CSE Sub-Committee

|              | Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle Minutes        | Delivery Recommendations | School/ Location                           |
|--------------|-----------------|------------|---------------|---------------------|-----------------------------|--------------------------|--|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/23/2017    | Speech              | 3/6 Day Cycle<br>30 Minutes | Group                    | Madill Elementary (PS)<br>Speech Classroom |

**Minutes:** Continue classification of Speech/Language Impairment

Recommendation through June 2017:  
 Group Speech services 5 times per cycle for 30 minutes

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:  
 No changes

Occupational Therapy evaluation

|           |          |   |     |                            |               |          |                                |
|-----------|----------|---|-----|----------------------------|---------------|----------|--------------------------------|
| 000028189 | 08/21/10 | M | 013 | Speech/Language Impairment | Annual Review | 05/24/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|----------------------------|---------------|----------|--------------------------------|

Committee : Madill CSE Sub-Committee

|              | Primary Service | Start Date | Fut. End Date | Service Description  | Freq / Cycle Minutes        | Delivery Recommendations | School/ Location                                      |
|--------------|-----------------|------------|---------------|----------------------|-----------------------------|--------------------------|---|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/23/2017    | Consultant Teacher   | 6/6 Day Cycle<br>30 Minutes | Direct - English         | Madill Elementary (PS)<br>General Education Classroom |
| CURRENT YEAR | No              | 09/06/2016 | 06/23/2017    | Speech               | 3/6 Day Cycle<br>30 Minutes | Individual               | Madill Elementary (PS)<br>Speech Classroom            |
| CURRENT YEAR | No              | 09/06/2016 | 06/23/2017    | Occupational Therapy | 2/6 Day Cycle<br>30 Minutes | Individual               | Madill Elementary (PS)<br>Provider Location           |

**Board Action Sheet**  
**Meeting Date: 05/24/2017**  
**Ogdensburg City School District**

Printed: 06/13/2017 10:14

| ID           | DOB | Gender     | Grd        | Disability                                   | Meeting                          | Mtg Date | Ref Date | Outcome                                    | 12 Mth |
|--------------|-----|------------|------------|--|----------------------------------|----------|----------|--|--------|
| CURRENT YEAR | No  | 09/06/2016 | 06/23/2017 | Speech                                       | 3/6 Day Cycle<br>30 Minutes      | Group    |          | Madill Elementary (PS)<br>Speech Classroom |        |
| CURRENT YEAR |     | 09/06/2016 | 08/24/2016 | Individual Supplementary School<br>Personnel | 6 timer per cycle<br>360 minutes |          |          | General Ed. & Special Ed. Classrooms       |        |
| CURRENT YEAR |     | 09/06/2016 |            | Individual Supplementary School<br>Personnel | 6 timer per cycle<br>360 minutes |          |          | General Ed. & Special Ed. Classrooms       |        |

**Minutes:** Continue classification of Speech/Language Impairment

Recommendation through June 2017:

Direct Consultant Teacher services 6 times per cycle for 30 minutes in the area of English  
 Group Occupational Therapy services 2 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  
 Individual Supplementary School Personnel services 6 times per cycle for 360 minutes  
 Behavioral Consultant services 600 minutes per year

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:

Direct Consultant Teacher services 6 times per cycle for 30 minutes in the area of English  
 Group Occupational Therapy services 1 time 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  
 Individual Supplementary School Personnel services 6 times per cycle for 360 minutes  
 Behavioral Consultant services 600 minutes per year

**Total Meetings: 2**

**Board Action Sheet**  
**Meeting Date: 05/22/2017**  
**Ogdensburg City School District**

Printed: 06/12/2017 2:53

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|  |          |   |     |        |               |          |                                |   |
|--|----------|---|-----|--------|---------------|----------|--------------------------------|---|
| 000020031  | 04/02/03 | F | 008 | Autism | Annual Review | 05/22/17 | IEP Change: Remains Classified | X |
| <i>Committee: Committee on Special Education</i> |          |   |     |        |               |          |                                |   |

|              | Primary Service | Start Date | Fut. End Date | Service Description                       | Freq / Cycle Minutes            | Delivery Recommendations    | School/ Location                                     |
|--------------|-----------------|------------|---------------|---|---------------------------------|-----------------------------|--|
| CURRENT YEAR |                 | 07/07/2016 | 08/17/2016    | Individual Supplementary School Personnel | 5 times per week<br>360 minutes | ABA 6:1:1                   | General Ed. & Special Ed. Classrooms                 |
| CURRENT YEAR | Yes             | 09/06/2016 | 06/20/2017    | Ratio 6:1:1                               | 5/Weekly<br>390 Minutes         | 6 students/1 teacher/1 aide | Potsdam Central High School (PN)<br>6:1:1 Classroom  |
| CURRENT YEAR | No              | 09/06/2016 | 06/20/2017    | Adaptive Physical Education               | 2/Weekly<br>30 Minutes          |                             | Potsdam Central High School (PN)<br>Gym/Pool         |
| CURRENT YEAR | No              | 09/06/2016 | 06/20/2017    | Speech                                    | 1/Weekly<br>30 Minutes          | Individual                  | Potsdam Central High School (PN)<br>Speech Classroom |
| CURRENT YEAR | No              | 09/06/2016 | 06/20/2017    | Occupational Therapy                      | 1/Weekly<br>30 Minutes          | Individual                  | Potsdam Central High School (PN)<br>6:1:1 Classroom  |
| CURRENT YEAR |                 | 09/06/2016 | 06/20/2017    | Individual Supplementary School Personnel | 5 times per week<br>360 minutes | ABA 6:1:1                   | General Ed. & Special Ed. Classrooms                 |

**Minutes:** Continue classification of Autism

Recommendation through June 2017:  
 BOCES 6:1:1 classroom placement 6 times per cycle for 390 minutes (Potsdam)  
 Adaptive Physical Education services 2 times per week for 30 minutes  
 Individual Occupational Therapy services 1 time per week for 30 minutes  
 Individual Speech services 1 time per week for 30 minutes  
 Individual Supplementary School Personnel services 6 times per cycle for 360 minutes  
 Behavioral Consultant services 1 time per week for 60 minutes  
 Individual Indirect Occupational Therapy Consult services 1 times per week for 60 minutes  
 Individual Indirect Speech Consult services 1 time per week for 30 minutes  
 Special Transportation services

12 Month Extended Year Recommendation:  
 BOCES 6:1:1 classroom placement 5 times per week for 360 minutes  
 Individual Occupational Therapy Consult services 1 time per week for 60 minutes

**Board Action Sheet**  
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Individual Speech services 1 time per week for 30 minutes  
 Individual Supplementary School Personnel services 5 times per week for 360 minutes  
 Behavioral Consultant services 1 time per week for 60 minutes

**Fall 2017 Recommendation:**

BOCES 6:1:1 classroom placement 5 times per week for 390 minutes (Potsdam)  
 Adaptive Physical Education services 2 times per week for 30 minutes  
 Individual Speech services 1 time per week for 30 minutes  
 Individual Skilled Nursing services 5 times per week for 15 minutes  
 Individual Supplementary School Personnel services 5 times per week for 360 minutes  
 Behavioral Consultant services 1 time per week for 60 minutes  
 Individual Indirect Occupational Therapy Consult services 1 times per week for 60 minutes  
 Individual Indirect Speech Consult services 1 time per week for 30 minutes  
 Special Transportation services

|           |          |   |     |                         |               |          |                                |
|-----------|----------|---|-----|-------------------------|---------------|----------|--------------------------------|
| 000017193 | 02/12/99 | F | 012 | Other Health Impairment | Annual Review | 05/22/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|-------------------------|---------------|----------|--------------------------------|

Committee: Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date | Service Description         | Freq / Cycle Minutes         | Delivery Recommendations                 | School/ Location                |
|--------------|-----------------|------------|---------------|-----------------------------|------------------------------|--|---------------------------------|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/20/2017    | Ratio 6:1:2                 | 6/6 Day Cycle<br>360 Minutes | 6 students/1 teacher/2 aide - Crossroads | Crossroads<br>6:1:2 Classroom   |
| CURRENT YEAR | No              | 09/06/2016 | 06/20/2017    | Counseling                  | 2/Weekly<br>30 Minutes       | Individual                               | Crossroads<br>Counselors Office |
| CURRENT YEAR | No              | 09/06/2016 | 06/20/2017    | Counseling                  | 5/Weekly<br>45 Minutes       | Group                                    | Crossroads<br>Counselors Office |
| CURRENT YEAR | No              | 09/06/2016 | 06/20/2017    | Adaptive Physical Education | 3/6 Day Cycle<br>40 Minutes  |  | Crossroads<br>Gym/Pool          |

**Minutes:** Continue classification of Other Health Impairment

**Recommendation through June 2017:**

BOCES Collaborative Day Treatment program placement 6 times per cycle for 360 minutes  
 Adaptive Physical Education services 3 times per cycle for 40 minutes  
 Group Counseling services 5 times per week for 45 minutes

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| UP | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
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Individual Counseling services 2 times per week for 30 minutes  
Special Transportation services

12 Month Extended Year Recommendation:  
None

Fall 2017 Recommendation:  
No changes

|           |          |   |     |                            |                |          |                                |
|-----------|----------|---|-----|----------------------------|----------------|----------|--------------------------------|
| 000019223 | 02/23/01 | F | 010 | Speech/Language Impairment | Program Review | 05/22/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|----------------------------|----------------|----------|--------------------------------|

Committee : Committee on Special Education

| CURRENT YEAR | Primary Service | Start Date | Fut. End Date | Description                           | Freq / Cycle Minutes            | Delivery Recommendations   | School/ Location                                    |
|--------------|-----------------|------------|---------------|---------------------------------------|---------------------------------|--|---|
|              |                 | 09/06/2016 | 03/07/2017    | Shared Supplementary School Personnel | 6 times per cycle<br>40 minutes | In the area of Science - Independent work periods throughout the school day. Organizational skills at the beginning and end of each day. Provide accommodations and modifications as deemed appropriate. Provide small group or individual practice of targeted skills as directed by the teacher. | General Education Classroom                         |
| CURRENT YEAR | Yes             | 03/07/2017 | 06/23/2017    | Resource Room                         | 6/6 Day Cycle<br>40 Minutes     |  | OFA Grades 9-12 (PS)<br>Resource Room               |
| CURRENT YEAR | No              | 03/07/2017 | 06/23/2017    | Consultant Teacher                    | 18/6 Day Cycle<br>40 Minutes    | Direct - English, Mathematics and Social Studies   | OFA Grades 9-12 (PS)<br>General Education Classroom |
| CURRENT YEAR |                 | 03/07/2017 | 06/23/2017    | Shared Supplementary School Personnel | 6 times per cycle<br>40 minutes | In the area of Science   | General Ed. & Special Ed. Classrooms                |

**Minutes:** Continue classification of Speech/Language Impairment

Recommendation through June 2017:  
Resource Room services 6 times per cycle for 40 minutes  
Direct Consultant Teacher services 18 times per cycle for 40 minutes in the areas of English, mathematics and social studies

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Shared Supplementary School Personnel services 6 times per cycle for 40 minutes in the area of science

12 Month Extended Year Recommendation:  
None

Fall 2017 Recommendation:  
 Resource Room services 6 times per cycle for 40 minutes  
 Shared Supplementary School Personnel services 12 times per cycle for 40 minutes in the areas of English and social studies  
 Vocational Education services 6 times per cycle for 207 minutes in the area of Cosmetology

|           |          |   |     |                     |               |          |                                |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|
| 000020220 | 04/05/01 | F | 009 | Learning Disability | Annual Review | 05/22/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|

Committee : Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date | Service Description         | Freq / Cycle Minutes         | Delivery Recommendations     | School/ Location                          |
|--------------|-----------------|------------|---------------|-----------------------------|------------------------------|------------------------------|---|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/20/2017    | Ratio 12:1:1                | 6/6 Day Cycle<br>220 Minutes | 12 students/1 teacher/1 aide | OFA Grades 9-12 (BL)<br>12:1:1 Classroom  |
| CURRENT YEAR | No              | 09/06/2016 | 06/20/2017    | Adaptive Physical Education | 3/6 Day Cycle<br>40 Minutes  |                              | OFA Grades 9-12 (BL)<br>Gym/Pool          |
| CURRENT YEAR | No              | 09/06/2016 | 06/20/2017    | Counseling                  | 1/6 Day Cycle<br>30 Minutes  | Individual                   | OFA Grades 9-12 (BL)<br>Counselors Office |
| CURRENT YEAR | No              | 09/06/2016 | 06/20/2017    | Work Experience Program     | 6/6 Day Cycle<br>150 Minutes | Greenhouse                   | Northwest Tech (BL)<br>Northwest Tech     |

**Minutes:** Continue classification of Learning Disability

Recommendation through June 2017:  
 BOCES 12:1:1 classroom placement 6 times per cycle for 220 minutes  
 Adaptive Physical Education services 3 times per cycle for 40 minutes  
 Individual Counseling services 1 time per week for 30 minutes  
 BOCES Greenhouse program 6 times per cycle for 150 minutes  
 Special Transportation services

12 Month Extended Year Recommendation:  
None

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Fall 2017 Recommendation:  
No changes

Eligible for second language exemption

|           |          |   |     |   |                |          |  |                                   |  |
|-----------|----------|---|-----|---|----------------|----------|--|-----------------------------------|--|
| 000029052 | 07/17/12 | F | 014 | Preschool Student<br>with a Disability<br> <br>As of 09/05/17:<br>Speech/Language<br>Impairment | Program Review | 05/22/17 |  | IEP Change: Remains<br>Classified |  |
|-----------|----------|---|-----|---|----------------|----------|--|-----------------------------------|--|

Committee: Committee on Special Education

|              | Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description      | Freq / Cycle<br>Minutes | Delivery<br>Recommendations    | School/<br>Location                         |
|--------------|--------------------|------------|---------------------------|-----------------------------|-------------------------|--------------------------------|---|
| CURRENT YEAR | Yes                | 09/06/2016 | 06/20/2017                | Special Education Itinerant | 1/Weekly<br>60 Minutes  | Direct                         | John F Kennedy Elementary<br>Kennedy School |
|              |                    |            |                           |                             |                         | Coordinating Service Provider: | CHILDREN'S THERAPY NETWORK                  |
| CURRENT YEAR | No                 | 09/06/2016 | 06/20/2017                | Speech                      | 2/Weekly<br>30 Minutes  | Individual                     | Home Base - Preschool<br>Home Setting       |
|              |                    |            |                           |                             |                         | Coordinating Service Provider: | COUNTY OF ST LAWRENCE                       |
| CURRENT YEAR | No                 | 09/06/2016 | 06/20/2017                | Special Education Itinerant | 1/Weekly<br>60 Minutes  | Direct                         | Home Base - Preschool<br>Home Setting       |
|              |                    |            |                           |                             |                         | Coordinating Service Provider: | CHILDREN'S THERAPY NETWORK                  |
| CURRENT YEAR | No                 | 09/23/2016 | 06/20/2017                | Occupational Therapy        | 2/Weekly<br>30 Minutes  | Individual                     | Home Base - Preschool<br>Home Setting       |
|              |                    |            |                           |                             |                         | Coordinating Service Provider: | COUNTY OF ST LAWRENCE                       |

**Minutes:** Eligible for classification of Speech/Language Impairment

Fall 2017 Recommendation (9/5/17 - 6/19/17):  
Individual Speech services 3 times per cycle for 30 minutes  
Group Speech services 3 times per cycle for 30 minutes  
Individual Occupational Therapy services 2 times per cycle for 30 minutes

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| ID | DOB | Gender | Gri | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
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|           |          |   |     |  |                |          |                                |   |
|-----------|----------|---|-----|--|----------------|----------|--------------------------------|---|
| 000029051 | 07/17/12 | F | 014 | Preschool Student with a Disability<br> <br>As of 09/05/17:<br>Orthopedic Impairment | Program Review | 05/22/17 | IEP Change: Remains Classified | X |
|-----------|----------|---|-----|--|----------------|----------|--------------------------------|---|

Committee : Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date | Service Description                       | Freq / Cycle Minutes            | Delivery Recommendations | School/ Location  |
|--------------|-----------------|------------|---------------|---|---------------------------------|--------------------------|---|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/20/2017    | Special Education Itinerant               | 1/Weekly<br>60 Minutes          | Direct                   | Home Base - Preschool<br>Home Setting<br>CHILDREN'S THERAPY NETWORK       |
| CURRENT YEAR | No              | 09/06/2016 | 06/20/2017    | Speech                                    | 2/Weekly<br>30 Minutes          | Individual               | Home Base - Preschool<br>Home Setting<br>COUNTY OF ST LAWRENCE            |
| CURRENT YEAR | No              | 09/06/2016 | 06/20/2017    | Special Education Itinerant               | 1/Weekly<br>60 Minutes          | Direct                   | John F Kennedy Elementary<br>Kennedy School<br>CHILDREN'S THERAPY NETWORK |
| CURRENT YEAR |                 | 09/06/2016 |               | Individual Supplementary School Personnel | 5 times per week<br>150 minutes |                          | General Education Classroom   |
| CURRENT YEAR | No              | 09/23/2016 | 06/20/2017    | Occupational Therapy                      | 2/Weekly<br>30 Minutes          | Individual               | Home Base - Preschool<br>Home Setting<br>COUNTY OF ST LAWRENCE            |
| CURRENT YEAR | No              | 10/11/2016 | 06/20/2017    | Physical Therapy                          | 2/Weekly<br>30 Minutes          | Individual               | John F Kennedy Elementary<br>Kennedy School<br>COUNTY OF ST LAWRENCE      |

**Minutes:** Eligible for classification of Orthopedic Impairment

Fall 2017 Recommendation (9/5/17 - 6/19/17):  
 Adaptive Physical Education service 3 times per cycle for 40 minutes  
 Individual Occupational Therapy services 2 times per cycle for 30 minutes  
 Individual Physical Therapy services 2 times per week for 30 minutes  
 Individual Speech services 2 times per cycle for 30 minutes



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| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
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Individual Supplementary School Personnel services 6 times per cycle for 360 minutes

|           |          |   |     |   |                |          |  |                                   |   |
|-----------|----------|---|-----|---|----------------|----------|--|-----------------------------------|---|
| 000030119 | 12/14/11 | M | 014 | Preschool Student<br>with a Disability<br> <br>As of 09/05/17:<br>Speech/Language<br>Impairment | Program Review | 05/22/17 |  | IEP Change: Remains<br>Classified | X |
|-----------|----------|---|-----|---|----------------|----------|--|-----------------------------------|---|

Committee : Committee on Special Education

|              |                        |                   |                      |                            |                             |                                 |   |
|--------------|------------------------|-------------------|----------------------|----------------------------|-----------------------------|---------------------------------|---|
|              | <b>Primary Service</b> | <b>Start Date</b> | <b>Fut. End Date</b> | <b>Service Description</b> | <b>Freq / Cycle Minutes</b> | <b>Delivery Recommendations</b> | <b>School/ Location</b>   |
| CURRENT YEAR | Yes                    | 09/06/2016        | 06/06/2017           | Speech                     | 2/Weekly<br>30 Minutes      | Group                           | Madill Elementary (preschool)<br>Provider Location<br>COUNTY OF ST LAWRENCE |

Coordinating Service Provider:

**Minutes:** Eligible for classification of Speech/Language Impairment

Fall 2017 Recommendation:  
Group Speech services 3 times per cycle for 30 minutes

Occupational Therapy Evaluation

|           |          |   |     |        |               |          |  |                                   |   |
|-----------|----------|---|-----|--------|---------------|----------|--|-----------------------------------|---|
| 000026056 | 06/23/09 | M | 002 | Autism | Annual Review | 05/22/17 |  | IEP Change: Remains<br>Classified | X |
|-----------|----------|---|-----|--------|---------------|----------|--|-----------------------------------|---|

Committee : Committee on Special Education

|              |                        |                   |                      |                            |                             |                                 |   |
|--------------|------------------------|-------------------|----------------------|----------------------------|-----------------------------|---------------------------------|---|
|              | <b>Primary Service</b> | <b>Start Date</b> | <b>Fut. End Date</b> | <b>Service Description</b> | <b>Freq / Cycle Minutes</b> | <b>Delivery Recommendations</b> | <b>School/ Location</b>                   |
| CURRENT YEAR | Yes                    | 07/04/2016        | 08/12/2016           | Ratio 6:1:1                | 5/Weekly<br>150 Minutes     | 6 students/1 teacher/1 aide     | Madill Elementary (PS)<br>6:1:1 Classroom |
| CURRENT YEAR | No                     | 07/04/2016        | 08/12/2016           | Speech                     | 2/Weekly<br>30 Minutes      | Individual                      | Madill Elementary (BL)<br>Madill School   |

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| ID           | DOB        | Gender     | Grd        | Disability                                      | Meeting                         | Mtg Date   | Ref Date | Outcome                                   | 12 Mth |
|--------------|------------|------------|------------|---|---------------------------------|--|----------|---|--------|
| CURRENT YEAR | 07/04/2016 | 08/12/2016 |            | Individual Supplementary School Personnel - ESY | 5 times per week<br>150 minutes | As directed by TCM. Assist in attending to classroom activities, materials and people; reduce/intervene in maladaptive behaviors; to support structured teaching and generalization; and to assist with communication. |          | 6:1:1 Classroom                           |        |
| CURRENT YEAR | 07/05/2016 | 06/07/2016 |            | Individual Supplementary School Personnel - ESY | 5 times per week<br>150 minutes | As directed by TCM. Assist in attending to classroom activities, materials and people; reduce/intervene in maladaptive behaviors; to support structured teaching and generalization; and to assist with communication. |          | 6:1:1 Classroom                           |        |
| CURRENT YEAR | Yes        | 09/06/2016 | 06/20/2017 | Ratio 6:1:1                                     | 6/6 Day Cycle<br>330 Minutes    | 6 students/1 teacher/1 aide  |          | Madill Elementary (PS)<br>6:1:1 Classroom |        |
| CURRENT YEAR | No         | 09/06/2016 | 06/20/2017 | Occupational Therapy                            | 1/Weekly<br>30 Minutes          | Individual   |          | Madill Elementary (PS)<br>Madill School   |        |
| CURRENT YEAR | No         | 09/06/2016 | 06/20/2017 | Speech  | 6/6 Day Cycle<br>30 Minutes     | Individual   |          | Madill Elementary (PS)<br>Madill School   |        |
| CURRENT YEAR |            | 09/06/2016 |            | Individual Supplementary School Personnel       | Daily<br>330 minutes            | As directed by TCM. Assist in attending to classroom activities, materials and people; reduce/intervene in maladaptive behaviors; to support structured teaching and generalization; and to assist with communication. |          | General Ed. & Special Ed. Classrooms      |        |

**Minutes:** Continue classification of Autism

Recommendation through June 2017:  
District 6:1:1 classroom placement 6 times per cycle for 330 minutes  
Individual Occupational Therapy services 1 time per cycle for 30 minutes  
Individual Speech services 6 times per cycle for 30 minutes  
Individual Supplementary School Personnel services 6 times per cycle for 330 minutes  
Behavioral Consultant services 600 minutes per year  
Special Transportation services

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12 Month Extended Year Recommendation:

BOCES 12:1:1 classroom placement 5 times per week for 360 minutes  
 Individual Supplementary School Personnel services 5 times per week for 360 minutes  
 Behavioral Consultant services 120 minutes for the summer

Fall 2017 Recommendation:

BOCES 12:1:1 classroom placement 6 times per cycle for 360 minutes  
 Adaptive Physical Education services 3 times per cycle for 40 minutes  
 Individual Occupational Therapy services 1 time per cycle for 30 minutes  
 Group Speech services 2 times per week for 30 minutes  
 Individual Speech services 3 times per week for 30 minutes  
 Individual Supplementary School Personnel services 6 times per cycle for 360 minutes  
 Behavioral Consultant services 600 minutes per year  
 Special Transportation services

**Total Meetings: 8**

**Board Action Sheet**  
**Meeting Date: 05/22/2017**  
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| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
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|-----------|----------|---|-----|--|---------------|----------|--|-----------------------------|--|
| 000029053 | 07/17/12 | F | 014 | Preschool Student<br>with a Disability<br> <br>As of 06/23/17:<br>Declassified | Annual Review | 05/22/17 |  | IEP Change:<br>Declassified |  |
|-----------|----------|---|-----|--|---------------|----------|--|-----------------------------|--|

Committee : Committee on Preschool Special Education

| Primary<br>Service | Fut End Date<br>Start Date | Service<br>End Date | Description | Freq / Cycle<br>Minutes | Delivery<br>Recommendations | School/<br>Location |
|--------------------|----------------------------|---------------------|-------------|-------------------------|-----------------------------|---------------------|
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**Minutes** Continue classification of Preschool Student with a Disability through end of school year  
Do not refer to the Committee on Special Education

Recommendation (6/20/17 - 6/23/17):  
Special Education Itinerant Teacher services 1 time per week for 60 minutes  
Individual Occupational Therapy services 1 time per week for 30 minutes

12 Month Extended Year Recommendation:  
None

**Meeting Comments:** As School District Representative, I attest that the Board of Education approved the initiation of the services and/or programs(s) listed at the Board Meeting noted above.

School District Representative Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|   |          |   |     |  |               |          |  |                               |   |
|---|----------|---|-----|--|---------------|----------|--|-------------------------------|---|
| 000029052   | 07/17/12 | F | 014 | Preschool Student<br>with a Disability | Annual Review | 05/22/17 |  | Refer to Special<br>Education | X |
| <i>Committee : Committee on Preschool Special Education</i> |          |   |     |  |               |          |  |                               |   |

| Primary<br>Service | Start Date | End Date | Service<br>Description | Freq / Cycle<br>Minutes | Delivery<br>Recommendations | School/<br>Location |
|--------------------|------------|----------|------------------------|-------------------------|-----------------------------|---------------------|
|--------------------|------------|----------|------------------------|-------------------------|-----------------------------|---------------------|

**Minutes** Continue classification of Preschool Student with a Disability

Recommendation (6/20/17 - 6/23/17):

Special Education Itinerant Teacher services 1 time per week for 60 minutes

Individual Occupational Therapy services 2 times per week for 30 minutes

Individual Speech services 2 times per week for 30 minutes

12 Month Extended Year Recommendation:

Individual Occupational Therapy services 1 time per week for 30 minutes

Individual Speech services 1 time per week for 30 minutes

Refer to the Committee on Special Education

**Meeting Comments:** As School District Representative, I attest that the Board of Education approved the initiation of the services and/or programs(s) listed at the Board Meeting noted above.

School District Representative Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|   |          |   |     |  |               |          |  |                               |   |
|---|----------|---|-----|--|---------------|----------|--|-------------------------------|---|
| 000029051   | 07/17/12 | F | 014 | Preschool Student<br>with a Disability | Annual Review | 05/22/17 |  | Refer to Special<br>Education | X |
| <i>Committee : Committee on Preschool Special Education</i> |          |   |     |  |               |          |  |                               |   |

| Primary<br>Service | Start Date | Fut End Date<br>End Date | Service<br>Description | Freq / Cycle<br>Minutes | Delivery<br>Recommendations | School/<br>Location |
|--------------------|------------|--------------------------|------------------------|-------------------------|-----------------------------|---------------------|
|--------------------|------------|--------------------------|------------------------|-------------------------|-----------------------------|---------------------|

**Minutes** Continue classification of Preschool Student with a Disability

Recommendation (6/20/17 - 6/23/17):

Special Education Itinerant Teacher services 1 time per week for 60 minutes

Individual Speech services 2 times per week for 30 minutes

Individual Occupational Therapy services 2 times per week for 30 minutes

Individual Physical Therapy services 2 times per week for 30 minutes

12 Month Extended Year Recommendation:

Individual Occupational Therapy services 1 time per week for 30 minutes

Individual Speech services 1 time per week for 30 minutes

Individual Supplementary School Personnel services 4 times per week for 150 minutes

Refer to the Committee on Special Education

**Meeting Comments:** As School District Representative, I attest that the Board of Education approved the initiation of the services and/or programs(s) listed at the Board Meeting noted above.

School District Representative Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
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|  |          |   |     |  |               |          |  |                               |  |
|--|----------|---|-----|--|---------------|----------|--|-------------------------------|--|
| 000030119  | 12/14/11 | M | 014 | Preschool Student<br>with a Disability | Annual Review | 05/22/17 |  | Refer to Special<br>Education |  |
| Committee : Committee on Preschool Special Education |          |   |     |  |               |          |  |                               |  |

|                        |                   |                     |                            |                             |                                 |                         |
|------------------------|-------------------|---------------------|----------------------------|-----------------------------|---------------------------------|-------------------------|
| <b>Primary Service</b> | <b>Start Date</b> | <b>Fut End Date</b> | <b>Service Description</b> | <b>Freq / Cycle Minutes</b> | <b>Delivery Recommendations</b> | <b>School/ Location</b> |
|------------------------|-------------------|---------------------|----------------------------|-----------------------------|---------------------------------|-------------------------|

**Minutes** Continue classification of Preschool Student with a Disability

Recommendation (6/20/17 - 6/23/17):  
Group Speech services 2 times per week for 30 minutes

12 Month Extended Year Recommendation:  
None

**Meeting Comments:** As School District Representative, I attest that the Board of Education approved the initiation of the services and/or programs(s) listed at the Board Meeting noted above.

School District Representative Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Total Meetings: 4**

**Board Action Sheet**  
**Meeting Date: 05/19/2017**  
**Ogdensburg City School District**

Printed: 06/12/2017 8:57

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |        |                            |          |                                   |
|-----------|----------|---|-----|--------|----------------------------|----------|-----------------------------------|
| 000027029 | 12/27/09 | M | 001 | Autism | Transfer<br>Student/Intake | 05/19/17 | IEP Change: Remains<br>Classified |
|-----------|----------|---|-----|--------|----------------------------|----------|-----------------------------------|

Committee : Committee on Special Education

|              | Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description      | Freq / Cycle<br>Minutes | Delivery<br>Recommendations | School/<br>Location                                    |
|--------------|--------------------|------------|---------------------------|-----------------------------|-------------------------|-----------------------------|--|
| CURRENT YEAR | Yes                | 04/10/2017 | 06/23/2017                | Ratio 6:1:1                 | 5/Weekly<br>390 Minutes | 6 students/1 teacher/1 aide | Lawrence Avenue Elementary School<br>6:1:1 Classroom   |
| CURRENT YEAR | No                 | 04/10/2017 | 06/23/2017                | Adaptive Physical Education | 3/Weekly<br>30 Minutes  |                             | Lawrence Avenue Elementary School<br>Gym/Pool          |
| CURRENT YEAR | No                 | 04/10/2017 | 06/23/2017                | Occupational Therapy        | 1/Weekly<br>30 Minutes  | Individual                  | Lawrence Avenue Elementary School<br>Provider Location |
| CURRENT YEAR | No                 | 04/10/2017 | 06/23/2017                | Speech                      | 3/Weekly<br>30 Minutes  | Individual                  | Lawrence Avenue Elementary School<br>Provider Location |
| CURRENT YEAR | No                 | 04/10/2017 | 06/23/2017                | Social Worker               | 1/Monthly<br>60 Minutes | Individual                  | Lawrence Avenue Elementary School<br>Home Setting      |

**Minutes:** Continue classification of Autism

Recommendation through June 2017:

BOCES 6:1:1 classroom placement 5 times per week for 390 minutes (Potsdam)  
 Adaptive Physical Education services 3 times per week for 30 minutes  
 Individual Occupational Therapy services 1 time per week for 30 minutes  
 Individual Social Worker services 1 time per month for 60 minutes (home)  
 Individual Speech services 3 times per week for 30 minutes  
 Individual Supplementary School Personnel services 5 times per week for 390 minutes  
 Behavioral Consultant services 2 times per week for 60 minutes  
 Indirect Consultant Social Worker services 1 time per month for 30 minutes

12 Month Extended Year Recommendation:

BOCES 6:1:1 classroom placement 5 times per week for 360 minutes (Potsdam)  
 Individual Occupational Therapy services 1 time per week for 30 minutes  
 Individual Social Worker services 1 time per summer for 60 minutes (home)  
 Individual Speech services 2 times per week for 30 minutes  
 Individual Supplementary School Personnel services 5 times per week for 360 minutes  
 Behavioral Consultant services 1 time for summer for 60 minutes



**Board Action Sheet**  
**Meeting Date: 05/19/2017**  
**Ogdensburg City School District**

Printed: 06/12/2017 8:57

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

Fall 2017 Recommendation:  
 BOCES 6:1:1 classroom placement 5 times per week for 390 minutes (Potsdam)  
 Adaptive Physical Education services 3 times per week for 30 minutes  
 Individual Occupational Therapy services 1 time per week for 30 minutes  
 Direct Occupational Therapy Consult services 1 time per week for 60 minutes  
 Individual Social Worker services 1 time per month for 60 minutes (home)  
 Individual Speech services 2 times per week for 30 minutes  
 Group Speech services 1 time per week for 30 minutes  
 Individual Supplementary School Personnel services 5 times per week for 390 minutes  
 Indirect Speech Consult services 1 time per week for 30 minutes  
 Behavioral Consultant services 2 times per week for 60 minutes  
 Indirect Consultant Social Worker services 1 time per month for 30 minutes

|           |          |   |     |                        |                            |          |                                   |
|-----------|----------|---|-----|------------------------|----------------------------|----------|-----------------------------------|
| 000023279 | 06/25/04 | M | 006 | Learning<br>Disability | Transfer<br>Student/Intake | 05/19/17 | IEP Change: Remains<br>Classified |
|-----------|----------|---|-----|------------------------|----------------------------|----------|-----------------------------------|

Committee : Committee on Special Education

| Primary<br>Service | Start Date | Fut. End Date<br>End Date | Service<br>Description | Freq / Cycle<br>Minutes | Delivery<br>Recommendations | School/<br>Location |
|--------------------|------------|---------------------------|------------------------|-------------------------|-----------------------------|---------------------|
|--------------------|------------|---------------------------|------------------------|-------------------------|-----------------------------|---------------------|

**Minutes:** Continue classification of Speech/Language Impairment

Recommendation through June 2017:  
 BOCES 12:1:1 classroom placement 6 times per cycle for 210 minutes (Heuvelton)  
 Group Speech services 3 times per week for 30 minutes  
 Special Transportation services

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:  
 District 12:1:1 classroom placement 6 times per cycle for 330 minutes  
 Individual Counseling services 1 time per cycle for 30 minutes  
 Group Speech services 2 times per week for 30 minutes  
 Special Transportation services

**Board Action Sheet**  
**Meeting Date: 05/19/2017**  
**Ogdensburg City School District**

Printed: 06/12/2017 8:57

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |                            |                         |          |  |                                |  |
|-----------|----------|---|-----|----------------------------|-------------------------|----------|--|--------------------------------|--|
| 000024226 | 01/19/06 | M | 005 | Speech/Language Impairment | Transfer Student/Intake | 05/19/17 |  | IEP Change: Remains Classified |  |
|-----------|----------|---|-----|----------------------------|-------------------------|----------|--|--------------------------------|--|

Committee : Committee on Special Education

| Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle Minutes | Delivery Recommendations | School/ Location |
|-----------------|------------|---------------|---------------------|----------------------|--------------------------|------------------|
|-----------------|------------|---------------|---------------------|----------------------|--------------------------|------------------|

**Minutes:** Continue classification of Speech/Language Impairment

Recommendation through June 2017:  
 BOCES 12:1:1 classroom placement 6 times per cycle for 210 minutes  
 Group Speech services 3 times per week for 30 minutes  
 Special Transportation services

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:  
 BOCES 12:1:1 classroom placement 6 times per cycle for 210 minutes  
 Group Speech services 3 times per week for 30 minutes  
 Group Counseling services 1 time per week for 30 minutes  
 Special Transportation services

|           |          |   |     |                            |               |          |  |                                |  |
|-----------|----------|---|-----|----------------------------|---------------|----------|--|--------------------------------|--|
| 000022118 | 12/20/03 | F | 007 | Speech/Language Impairment | Annual Review | 05/19/17 |  | IEP Change: Remains Classified |  |
|-----------|----------|---|-----|----------------------------|---------------|----------|--|--------------------------------|--|

Committee : Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date | Service Description         | Freq / Cycle Minutes         | Delivery Recommendations     | School/ Location                        |
|--------------|-----------------|------------|---------------|-----------------------------|------------------------------|------------------------------|---|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/06/2017    | Ratio 12:1:1                | 6/6 Day Cycle<br>330 Minutes | 12 students/1 teacher/1 aide | OFA Grades 7-8 (PS)<br>12:1:1 Classroom |
| CURRENT YEAR | No              | 09/06/2016 | 06/06/2017    | Adaptive Physical Education | 3/6 Day Cycle<br>40 Minutes  |                              | OFA Grades 7-8 (PS)<br>Gym/Pool         |

**Board Action Sheet**  
**Meeting Date: 05/19/2017**  
**Ogdensburg City School District**

Printed: 06/12/2017 8:57

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

**Minutes:** Continue classification of Speech/Language Impairment

Recommendation through June 2017:  
District 12:1:1 classroom placement 6 times per cycle for 330 minutes  
Adaptive Physical Education services 3 times per cycle for 40 minutes

12 Month Extended Year Recommendation:  
None

Fall 2017 Recommendation:  
No changes

|           |          |   |     |                     |               |          |                                |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|
| 000021079 | 11/15/03 | F | 007 | Learning Disability | Annual Review | 05/19/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|

Committee : Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date | Service Description         | Freq / Cycle Minutes         | Delivery Recommendations     | School/ Location                         |
|--------------|-----------------|------------|---------------|-----------------------------|------------------------------|------------------------------|--|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/06/2017    | Ratio 12:1:1                | 6/6 Day Cycle<br>330 Minutes | 12 students/1 teacher/1 aide | OFA Grades 7-8 (PS)<br>12:1:1 Classroom  |
| CURRENT YEAR | No              | 09/06/2016 | 06/06/2017    | Adaptive Physical Education | 3/6 Day Cycle<br>40 Minutes  |                              | OFA Grades 7-8 (PS)<br>Gym/Pool          |
| CURRENT YEAR | No              | 09/06/2016 | 06/06/2017    | Counseling                  | 1/6 Day Cycle<br>30 Minutes  | Individual                   | OFA Grades 7-8 (PS)<br>Counselors Office |

**Minutes:** Continue classification of Learning Disability

Recommendation through June 2017:  
District 12:1:1 classroom placement 6 times per cycle for 330 minutes  
Adaptive Physical Education services 3 times per cycle for 40 minutes  
Individual Counseling services 1 time per cycle for 30 minutes  
Special Transportation services

12 Month Extended Year Recommendation:  
None

**Board Action Sheet**  
**Meeting Date: 05/19/2017**  
**Ogdensburg City School District**

Printed: 06/12/2017 8:57

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

Fall 2017 Recommendation:  
No changes

|           |          |   |     |                     |               |          |                                |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|
| 000023042 | 03/16/04 | M | 007 | Learning Disability | Annual Review | 05/19/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|

Committee : Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date<br>End Date | Service Description | Freq / Cycle<br>Minutes      | Delivery Recommendations       | School/ Location                                   |
|--------------|-----------------|------------|---------------------------|---------------------|------------------------------|--------------------------------|--|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/06/2017                | Resource Room       | 6/6 Day Cycle<br>40 Minutes  |                                | OFA Grades 7-8 (PS)<br>Resource Room               |
| CURRENT YEAR | No              | 09/06/2016 | 06/06/2017                | Consultant Teacher  | 12/6 Day Cycle<br>40 Minutes | Direct - English & Mathematics | OFA Grades 7-8 (PS)<br>General Education Classroom |

**Minutes:** Continue classification of Learning Disability

Recommendation through June 2017:

Resource Room services 6 times per cycle for 40 minutes

Direct Consultant Teacher services 12 times per cycle for 40 minutes in the areas of English and mathematics

12 Month Extended Year Recommendation:

None

Fall 2017 Recommendation:

Resource Room services 6 times per cycle for 40 minutes

|           |          |   |     |                     |               |          |                                |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|
| 000017272 | 07/10/99 | M | 012 | Learning Disability | Annual Review | 05/19/17 | IEP Change: Remains Classified |
|-----------|----------|---|-----|---------------------|---------------|----------|--------------------------------|

Committee : Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date<br>End Date | Service Description | Freq / Cycle<br>Minutes     | Delivery Recommendations | School/ Location                                    |
|--------------|-----------------|------------|---------------------------|---------------------|-----------------------------|--------------------------|---|
| CURRENT YEAR | Yes             | 09/06/2016 | 06/23/2017                | Consultant Teacher  | 6/6 Day Cycle<br>40 Minutes | Direct                   | OFA Grades 9-12 (PS)<br>General Education Classroom |

**Board Action Sheet**  
**Meeting Date: 05/19/2017**  
**Ogdensburg City School District**

Printed: 06/12/2017 8:57

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

**Minutes:** Continue classification of Learning Disability

Recommendation through June 2017:

Direct Consultant Teacher services 6 times per cycle for 40 minutes

Vocational Education services 6 times per cycle for 207 minutes in the area of Auto Tech

12 Month Extended Year Recommendation:

None

Graduate in June with a New York State Regents diploma

**Total Meetings: 7**

**Board Action Sheet**  
**Meeting Date: 05/19/2017**  
**Ogdensburg City School District**

Printed: 05/31/2017 3:02

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |                        |            |          |  |                           |
|-----------|----------|---|-----|------------------------|------------|----------|--|---------------------------|
| 000019161 | 05/15/01 | M | 010 | Section 504 Disability | 504 Review | 05/19/17 |  | Change Accommodation Plan |
|-----------|----------|---|-----|------------------------|------------|----------|--|---------------------------|

Committee : 504 Accommodation Plan Committee

| Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle Minutes | Delivery Recommendations | School/ Location |
|-----------------|------------|---------------|---------------------|----------------------|--------------------------|------------------|
|-----------------|------------|---------------|---------------------|----------------------|--------------------------|------------------|

**Minutes:** Continue classification of Section 504 Disability

Recommendation through June 2017:  
 Section 504 Accommodations 6 times per cycle for 415 minutes

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:  
 Resource Room services 6 times per cycle for 40 minutes  
 Vocational Education services 6 times per cycle for 207 minutes in the area of Metalworking  
 Section 504 Accommodations 6 times per cycle for 415 minutes

|           |          |   |     |                        |            |          |  |                           |
|-----------|----------|---|-----|------------------------|------------|----------|--|---------------------------|
| 000019203 | 02/26/01 | F | 010 | Section 504 Disability | 504 Review | 05/19/17 |  | Change Accommodation Plan |
|-----------|----------|---|-----|------------------------|------------|----------|--|---------------------------|

Committee : 504 Accommodation Plan Committee

| Primary Service | Start Date | Fut. End Date | Service Description | Freq / Cycle Minutes                  | Delivery Recommendations     | School/ Location   |
|-----------------|------------|---------------|---------------------|---------------------------------------|------------------------------|--|
| CURRENT YEAR    | Yes        | 09/06/2016    | 06/06/2017          | Resource Room                         | 6/6 Day Cycle<br>40 Minutes  | OFA Grades 9-12 (PS)<br>Resource Room  |
| CURRENT YEAR    | No         | 09/06/2016    | 06/06/2017          | Consultant Teacher                    | 12/6 Day Cycle<br>40 Minutes | Direct - English and Social Studies<br>OFA Grades 9-12 (PS)<br>General Education Classroom |
| CURRENT YEAR    |            | 09/06/2016    | 06/06/2017          | Shared Supplementary School Personnel | Daily<br>40 minutes          | Science<br>General Education Classroom   |

**Minutes:** Continue classification of Section 504 Disability

**Board Action Sheet**  
**Meeting Date: 05/19/2017**  
**Ogdensburg City School District**

Printed: 05/31/2017 3:02

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

Recommendation through June 2017:

Resource Room services 6 times per cycle for 40 minutes

Direct Consultant Teacher services 12 times per cycle for 40 minutes in the areas of English and social studies

Section 504 Accommodations 6 times per cycle for 415 minutes

Shared Supplementary School Personnel services 6 times per cycle for 40 minutes in the area of science

12 Month Extended Year Recommendation:

None

Fall 2017 Recommendation:

Resource Room services 6 times per cycle for 40 minutes

Section 504 Accommodations 6 times per cycle for 415 minutes

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

**Total Meetings: 2**

**Board Action Sheet**  
**Meeting Date: 05/18/2017**  
**Ogdensburg City School District**

Printed: 05/31/2017 2:24

| ID | DOB | Gender | Grd | Disability | Meeting | Mtg Date | Ref Date | Outcome | 12 Mth |
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|
|----|-----|--------|-----|------------|---------|----------|----------|---------|--------|

|           |          |   |     |                         |                             |          |  |                                |  |
|-----------|----------|---|-----|-------------------------|-----------------------------|----------|--|--------------------------------|--|
| 000018072 | 08/12/00 | M | 010 | Other Health Impairment | Manifestation Determination | 05/18/17 |  | IEP Change: Remains Classified |  |
|-----------|----------|---|-----|-------------------------|-----------------------------|----------|--|--------------------------------|--|

Committee : Committee on Special Education

|              | Primary Service | Start Date | Fut. End Date | Service Description         | Freq / Cycle Minutes         | Delivery Recommendations    | School/ Location                                |
|--------------|-----------------|------------|---------------|-----------------------------|------------------------------|-----------------------------|---|
| CURRENT YEAR | Yes             | 01/03/2017 | 06/23/2017    | Ratio 6:1:1                 | 6/6 Day Cycle<br>360 Minutes | 6 students/1 teacher/1 aide | Community Connections (BS)<br>6:1:1 Classroom   |
| CURRENT YEAR | No              | 01/03/2017 | 06/23/2017    | Counseling                  | 1/Weekly<br>30 Minutes       | Individual                  | Community Connections (BS)<br>Counselors Office |
| CURRENT YEAR | No              | 01/03/2017 | 06/23/2017    | Counseling                  | 1/Weekly<br>60 Minutes       | Group                       | Community Connections (BS)<br>Counselors Office |
| CURRENT YEAR | No              | 01/03/2017 | 06/23/2017    | Counseling                  | 4/Weekly<br>20 Minutes       | Individual                  | Community Connections (BS)<br>Counselors Office |
| CURRENT YEAR | No              | 01/03/2017 | 06/23/2017    | Adaptive Physical Education | 2/Weekly<br>60 Minutes       |                             | Community Connections (BS)<br>Gym/Pool          |

**Minutes:** Continue classification of Other Health Impairment

Recommendation through June 2017:  
 BOCES 6:1:1 Community Connections program 6 times per cycle for 360 minutes  
 Adaptive Physical Education services 2 times per week for 60 minutes  
 Individual Counseling services 1 time per week for 30 minutes  
 Group Counseling services 1 time per week for 60 minutes  
 Group Counseling services 4 times per week for 20 minutes  
 Special Transportation services

12 Month Extended Year Recommendation:  
 None

Fall 2017 Recommendation:  
 No changes

The student's behaviors/attendance issues are not a manifestation of his disability

**Total Meetings: 1**