| GENERAL AI | OMINISTRATION | DIVISION |
|------------|---------------|----------|
| Report No. | Α | |

OGDENSBURG CITY SCHOOL DISTRICT OGDENSBURG, NEW YORK

SUBJECT:

Board of Education Acceptance of Recommendations from the Committee on Special Education, Committee on Preschool Special Education and the 504 Committee for Meetings Held on June 4, 5, 6, 7, 11, 12, 18, 19, 20, 21, 24, 26, 2019

DATE:

July 1, 2019

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 1st day of July 2019.

APPROVED FOR PRESENTATION TO THE BOARD:

Superintendent

KK/alf

Ogdensburg City School District Board Action Sheet Meeting 06/26/2019

Committee: Committee on Preschool Special Education

| | ID | DOB | Gender | Grade | Disability | 12Mth |
|---------------------|-------------------------------|--|------------------------------|------------------|--|-----------------------|
| | 000077630 | 09/26/2016 | M | Р | Developmentally Delayed (EI) | |
| | | | | | As of 07/02/19: | |
| 00100140 N | 1 | | 56.10 | | Preschool Student with a Disability | |
| 06/26/19 - New Refe | rrai | | Referral: 0 | 4/04/2019 | Outcome: Eligible but Delayed or no Placeme [Parents chose to continue their child in El ar | |
| | | | | | transition to preschool after the age of 3 (C)] | iu |
| h Ar | er all our le | | 0. 1 | | | |
| Minutes | Eligible for classifica | ition of Preschool | Student with a Di | isability | | |
| | Recommendation (1 | 1/6/20-6/26/20): | | | | |
| | Individual Speech se | ervices 2 times pe | er week for 30 mir | nutes | | |
| | | | | | | |
| Meeting Co | mments: As Schoo the Board | ol District Repres of Meeting noted | sentative, I attes above. | t that the Board | of Education approved the initiation of the services and/or | programs(s) listed at |
| | School D | istrict Represen | tative Signature | : | | |
| | Date: | | | | | |
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Ogdensburg City School District

Board Action Sheet

Meeting 06/26/2019

Committee: Committee on Preschool Special Education

| | ID | DOB | Gender | Grade | Disability | 12Mth |
|-----------------|---|-------------------|------------------------------|-------------------|---|--------------------|
| | 000077608 | 04/29/2016 | F | Р | Developmentally Delayed (EI) As of 07/02/19: Preschool Student with a Disability | Х |
| 6/26/19 - New F | Referral | | Referral: 1 | 12/19/2018 | Outcome: Eligible but Delayed or no Placement [Evaluator was not available to provide a timely evaluation (NC)] | |
| Minut | es Eligible for classifica | tion of Preschool | Student with a D | Disability | | |
| | 12 Month Extended Individual Speech se | | | nutes | | |
| | Fall 2019 Recomme Individual Speech se | | er week for 30 mi | nutes | | |
| Meetin | g Comments: As Schoo the Board | I District Repres | sentative, I attes above. | st that the Board | of Education approved the initiation of the services and/or pro | grams(s) listed at |
| | School Di | istrict Represen | tative Signature |): | | |
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Ogdensburg City School District Board Action Sheet Meeting 06/26/2019

Total Meetings 2

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Board Action Sheet

Meeting 06/26/2019

Committee: Committee on Special Education

| | | עו ווי | | JOB | Genaer | Grade | Disab | ility | | 12Mth |
|---------|--------------|--------------------------|----------|------------|--------|-----------|---------|--|---|-------|
| | | 000027 | 085 | 08/28/2009 | М | 003 | Emotion | nal Disturbance | | |
| 6/26/19 | - Transfer S | Student/Intal | ke | | | | Outco | me: IEP Change: Remain | s Classified | |
| Primary | | Fut End Date End Date | Service | | | Frq/Cyl/N | Ainutes | Delivery Recommendation | School/Location | - OK |
| CURREN | IT YEAR | | | | | | | | | - |
| Yes | 07/09/2018 | 08/17/2018 | Ratio 6: | 1:1 | | 5/Weekly | //330 | 6 students/1 teacher/1 aide | Hillcrest Educational Center Residential/6:1:1 Classroom | |
| Yes | 09/05/2018 | 05/07/2019 | Ratio 6: | 1:1 | | 5/Weekly | //330 | 6 students/1 teacher/1 aide - Residential | Hillcrest Educational Center Residential/6:1:1 Classroom | |

Minutes Continue classification of Emotional Disturbance

Fall 2019 Recommendation:
BOCES 8:1:1 classroom placement 6 times per cycle for 360 minutes
Individual Counseling services 2 times per week for 30 minutes
Individual Supplementary School Personnel services 6 times per cycle for 360 minutes
Behavioral Consultant services 1200 minutes per year
Special Transportation services

Total Meetings 1

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Board Action Sheet Meeting 06/24/2019

Committee: Committee on Special Education

| ID | DOB | Gender | Grade | Disability | 12Mth |
|-----------|------------|--------|-------|----------------------------|-------|
| 000026174 | 10/02/2007 | М | 005 | Speech/Language Impairment | |

06/24/19 - Annual Review

Outcome: IEP Change: Remains Classified

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location |
|---------|------------|--------------------------|---------------------------------------|-----------------------------------|--|--|
| CURREN | IT YEAR | | | | | |
| Yes | 09/05/2018 | 05/16/2019 | Resource Room | 6/6 Day Cycle/40 | | Kennedy Elementary (PS)/Resource Room |
| | 09/05/2018 | 05/16/2019 | Consultant Teacher | 6/6 Day Cycle/60 | Direct - English | Kennedy Elementary (PS)/General Education Classroom |
| | 09/05/2018 | 05/16/2019 | Speech | 3/6 Day Cycle/30 | Group | Kennedy Elementary (PS)/Speech Classroom |
| | 09/05/2018 | 05/04/2018 | Shared Supplementary School Personnel | 6 times per cycle 150 minutes/ | In the areas of Math, Science, & Social Studies | General Ed. & Special Ed. Classrooms |
| | 09/05/2018 | 05/16/2019 | Shared Supplementary School Personnel | 6 times per cycle 150 minutes/ | In the areas of Math, Science, & Social Studies | General Ed. & Special Ed. Classrooms |

Minutes Continue classification of Speech/Language Impairment

Recommendation through June 2019: Resource Room services 6 times per cycle for 40 minutes

Direct Consultant Teacher 6 times per cycle for 60 minutes in the area of English

Group Speech services 3 times per cycle for 30 minutes

Shared Supplementary School Personnel services 6 times per cycle for 150 minutes in the areas of math, science and social studies

12 Month Extended Year Recommendation:

None

Fall 2019 Recommendation:

District 15.1.1 classroom placement 6 times per cycle for 360 minutes

Group Speech services 3 times per cycle for 30 minutes

000077560

08/06/2011

002

Other Health Impairment

Ogdensburg City School District Board Action Sheet Meeting 06/24/2019 Committee: Committee on Special Education

| 06/24/19 | | ID | DOB | Gender | | bility | 12M |
|----------|------------|--|--|--|---|---|--|
| | - Annual R | eview | | | Outo | ome: IEP Change: Remain | ns Classified |
| Primary | Start Date | Fut End Date End Date | Service | | Frq/Cyl/Minutes | Delivery Recommendation | School/Location |
| CURREN | IT YEAR | | | | | | |
| Yes | 09/05/2018 | 06/26/2019 | Ratio 8:1:1 | | 6/6 Day Cycle/310 | 8 students/1 teacher/1 aide | Lawrence Avenue Elementary School/8:1:1 Classroom |
| | 09/05/2018 | 06/26/2019 | Counseling | | 1/6 Day Cycle/30 | Individual | Lawrence Avenue Elementary School/Counselors Office |
| | 09/05/2018 | 06/26/2019 | Counseling | | 1/6 Day Cycle/30 | Group | Lawrence Avenue Elementary School/Counselors Office |
| | Minutes | Continue class | sification of Other Hea | th Impairment | | | |
| | | | ommendation: | E timor nor avala for | 210 minutos | | |
| | | BOCES 8-1:1 Individual Cou Group Counse | orninendation: classroom placement nseling services 1 time pling services 1 time po portation services | per cycle for 30 mil | nutes | | |
| | | BOCES 8-1:1 Individual Cou Group Counse | classroom placement nseling services 1 time ling services 1 time pe portation services | per cycle for 30 mil | nutes es | ctual Disability | x |
| 06/24/19 | - Annual R | BOCES 8:1:1 Individual Cou Group Counse Special Transp | classroom placement nseling services 1 time pling services 1 time po portation services | e per cycle for 30 mi er cycle for 30 minut | nutes es 006 Intelle | ctual Disability ome: IEP Change: Remain | x as Classified |
| | | BOCES 8:1:1 Individual Cou Group Counse Special Transp | classroom placement nseling services 1 time ding services 1 time per contation services 032 08/07/2007 | e per cycle for 30 mi er cycle for 30 minut | nutes es 006 Intelle | | |
| | Start Date | BOCES 8:1:1 Individual Cou Group Counse Special Transp 0000260 eview Fut End Date | classroom placement nseling services 1 time ding services 1 time per contation services 032 08/07/2007 | e per cycle for 30 mi er cycle for 30 minut | nutes es 006 Intelle Outc | ome: IEP Change: Remain | s Classified |
| Primary | Start Date | BOCES 8:1:1 Individual Cou Group Counse Special Transp 0000260 eview Fut End Date End Date | classroom placement nseling services 1 time ding services 1 time per contation services 032 08/07/2007 | e per cycle for 30 mi er cycle for 30 minut | nutes es 006 Intelle Outc | ome: IEP Change: Remain Delivery Recommendation | s Classified |
| Primary | Start Date | BOCES 8:1:1 Individual Cou Group Counse Special Transp 0000260 eview Fut End Date End Date | classroom placement nseling services 1 time per portation services 2032 08/07/2007 | e per cycle for 30 mi er cycle for 30 minut | nutes es 006 Intelle Outc Frq/Cyl/Minutes | ome: IEP Change: Remain Delivery Recommendation 12 students/1 teacher/1 | School/Location OFA Grades 7-8 (BL)/12:1:1 |

Board Action Sheet Meeting 06/24/2019

Committee: Committee on Special Education

| ID | DOB | Gender | Grade | Disability | 12Mtl |
|-----------------------|---------------------|-----------|------------|--------------|--|
| 02/05/2019 06/26/2019 | Adaptive Physical I | Education | 3/6 Day Cy | cle/40 | OFA Grades 7-8 (PS)/Gym/Pool |
| 02/05/2019 06/26/2019 | Occupational There | ару | 1/Weekly/3 | 0 Individual | OFA Grades 7-8 (BL)/Provider Location |
| 02/05/2019 06/26/2019 | Physical Therapy | | 1/Weekly/3 | 0 Individual | OFA Grades 7-8 (BL)/Provider Location |
| 02/05/2019 06/26/2019 | Speech | | 3/Weekly/3 | 0 Group | OFA Grades 7-8 (BL)/Speech Classroom |

Minutes Continue classification of Intellectual Disability

12 Month Extended Year Recommendation:

None

Fall 2019 Recommendation:

BOCES 12:1:1 classroom placement 6 times per cycle for 330 minutes Adaptive Physical Education services 3 times per cycle for 40 minutes Group Speech services 3 times per week for 30 minutes Group Occupational Therapy services 1 time per week for 30 minutes Special Transportation services

Eligible for second language exemption

000077646

10/25/2005

007

Speech/Language Impairment

Outcome: IEP Change: Remains Classified

06/24/19 - Transfer Student/Intake

Minutes Continue classification of Speech/Language Impairment

Recommendation through June 2019:

District 12:1.1 classroom placement 6 times per cycle for 360

12 Month Extended School Year Recommendation:

None

Fall 2019 Recommendation:

BOCES 12:1:1 classroom placement 6 times per cycle for 30 minutes (OFA)

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Board Action Sheet

Meeting 06/24/2019
Committee: Committee on Special Education

Gender Grade Disability Individual Speech services 1 time per week for 30 minutes Special Transportation services 000021025 12/08/2003 М 800 Other Health Impairment 06/24/19 - Program Review Outcome: IEP Change: Remains Classified

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location |
|---------|------------|--------------------------|--------------------|------------------|-------------------------|--|
| CURREN | IT YEAR | | | | | The second section of the second section of the second section |
| Yes | 04/30/2019 | 06/26/2019 | Consultant Teacher | 6/6 Day Cycle/40 | Direct - English | OFA Grades 7-8 (PS)/General Education Classroom |
| | 04/30/2019 | 06/26/2019 | Counseling | 2/Monthly/30 | Individual | OFA Grades 7-8 (PS)/Counselors Office |

Minutes Continue classification of Other Health Impairment

Fall 2019 Recommendation:

District 15:1:1 classroom placement 6 times per cycle for 360 minutes Individual Counseling services 2 times per month for 30 minutes

000077364

08/21/2007

6.1:2 Residential Placement program (NYS Approved)

006

Other Health Impairment

06/24/19 - Annual Review

Outcome; IEP Change: Remains Classified

| Primary | Start Date | Fut End Date Service End Date | Frq/Cyl/Minutes | Delivery Recommendation | School/Location |
|---------|------------|---|-----------------|--|---|
| CURREN | IT YEAR | WHILE AND ADDRESS OF THE PARTY | 700 | | |
| Yes | 11/26/2018 | 06/26/2019 Ratio 6:1:2 | 5/Weekly/360 | 6 students/1 teacher/2 teaching assistants | House of Good Sheppard/6:1:2 Classroom |
| 1.00 | Minutes | Continue classification of Other Health Impairment | | | - |
| | | 12 Month Extended Year Recommendation | | | |

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Ogdensburg City School District

Board Action Sheet

Meeting 06/24/2019

Committee: Committee on Special Education

Gender Grade Disability

Counseling services

Fall 2019 Recommendation: 6:1:2 Residential Placement program (NYS Approved) Counseling services

DOB

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Ogdensburg City School District Board Action Sheet Meeting 06/24/2019

Total Meetings 6

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Board Action Sheet Meeting 06/24/2019

Committee: Committee on Preschool Special Education

| | | ID | DOB | Gender | Grade | Disability | 12Mth |
|---------|-------------|---|--------------------|----------------------|-------------|---------------------------------|--|
| | | 000077452 | 01/11/2016 | М | Р | Preschool Student with a Disabi | ility X |
| 6/24/19 | - Annual Re | eview | | | | Outcome: IEP Change: R | Remains Classified |
| Primary | Start Date | Fut End Date Serv End Date | rice | | Frq/Cyl/Mir | utes Delivery Recommend | dation School/Location Coordinating Service Provider |
| CURREN | T YEAR | | | | | | |
| Yes | 01/11/2019 | 06/26/2019 Spee | ech | | 2/Weekly/3 | 0 Individual | John F Kennedy Elementary/Speech Classroom/OGDENSBURG CITY SD |
| | Minutes | Continue classificati | ion of Preschool S | Student with a Disab | pility | | 10.17.1800 |
| | | Recommendation th Individual Speech so | | | les | | |

12 Month Extended Year Recommendation Individual Speech services 2 times per week for 30 minutes

Fall 2019 Recommendation:
District 12:1:1 Integrated classroom placement 5 times per week for 150 minutes
Individual Speech services 3 times per week for 30 minutes
Special Transportation services

Total Meetings 1

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Board Action Sheet Meeting 06/21/2019

Committee: Committee on Special Education

| | | ID | DOB | Gender | Grade | Disabil | lity | 12Mth |
|---------|-------------|--------------------------|----------------------------------|---------------|-------------------------|-----------|------------------------------|--|
| | | 000018 | 018 04/16/2001 | M | 011 | Other He | ealth Impairment | _ |
| 6/21/19 | - Reevaluat | tion | | | | Outcor | ne: IEP Change: Remain | s Classified |
| Primary | Start Date | Fut End Date End Date | Service | | Frq/Cyl/M | linutes | Delivery Recommendation | School/Location |
| CURREN | IT YEAR | | | | | | | |
| | 09/04/2018 | 02/07/2018 | Individual Suppleme Personnel | entary School | 6 times pe 315 Minut | | Throughout the school day | General Ed. & Special Ed. Classrooms |
| | 09/05/2018 | 02/25/2019 | Individual Suppleme Personnel | entary School | 6 times pe 315 Minut | | Throughout the school day | General Ed. & Special Ed. Classrooms |
| Yes | 02/26/2019 | 06/26/2019 | Ratio 15:1:1 | | 6/6 Day C | Cycle/160 | 15 students/1 teacher/1 aide | OFA Grades 9-12 (PS)/15:1:1 Classroom |
| | 02/26/2019 | 06/26/2019 | Adaptive Physical E | ducation | 3/6 Day C | cycle/40 | _ | OFA Grades 9-12 (PS)/Gym/Pool |
| | 02/26/2019 | 02/15/2019 | Individual Suppleme Personnel | entary School | 6 times pe 315 Minut | | Throughout the school day | General Ed. & Special Ed. Classrooms |
| | 02/26/2019 | 06/26/2019 | Individual Suppleme Personnel | entary School | 6 times pe 315 Minut | | Throughout the school day | General Ed. & Special Ed. Classrooms |

Minutes Continue classification of Other Health Impairment

Fall 2019 Recommendation.

District 15:1:1 classroom placement 6 times per cycle for 120 minutes

Vocational Education services 6 times per cycle for 150 minutes in the area of Culinary Arts

Adaptive Physical Education services 3 times per cycle for 40 minutes

Individual Supplementary School Personnel services 6 times per cycle for 190 minutes

Total Meetings 1

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Board Action Sheet Meeting 06/20/2019

Committee: 504 Accommodation Plan Committee

| ID | DOB | Gender | Grade | Disability | 12Mth |
|-----------|------------|--------|-------|------------------------|-------|
| 000077482 | 06/11/2014 | F | Р | Section 504 Disability | |
| | | | | | |

06/20/19 - 504 Review

Outcome: Continue Accommodation Plan

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location |
|---------|------------|--------------------------|--|----------------------------------|-------------------------|---|
| CURREN | IT YEAR | | | | | |
| | 11/06/2018 | 06/26/2019 | Physical Therapy | 2/Weekly/30 | Individual | Madill Elementary (PS)/Madill School |
| | 11/06/2018 | 10/30/2018 | Individual Supplementary School Personnel | 5 times per week 165 minutes/ | | Madill School |
| | 11/06/2018 | 06/26/2019 | Individual Supplementary School Personnel | 5 times per week 165 minutes/ | | Madill School |

Minutes Continue classification of Section 504 Disability

Recommendation through June 2019:

Section 504 Accommodations 5 times per week for 165 minutes Individual Physical Therapy services 2 times per week 30 minutes

Individual Supplementary School Personnel services 5 times per week for 165 minutes

12 Month Extended Year Recommendation:

Individual Physical Therapy services 1 time per week for 45 minutes

Fall 2019 Recommendation:

Section 504 Accommodations 6 times per cycle for 390 minutes

Individual Adaptive Physical Education services 3 times per cycle for 40 minutes

Individual Physical Therapy services 2 times per week for 30 minutes

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

Total Meetings 1

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Board Action Sheet Meeting 06/20/2019

Committee: Committee on Special Education

| ID | DOB | Gender | Grade | Disability | 12Mth |
|-----------|------------|--------|-------|---|-------|
| 000025078 | 01/09/2007 | F | 005 | Speech/Language Impairment As of 07/02/19: | • |

As of 07/02/19: Intellectual Disability

06/20/19 - Reevaluation

Outcome: IEP Change: Remains Classified

| Primary | | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location |
|---------|------------|--------------------------|--------------|-------------------|------------------------------|---|
| CURREN | NT YEAR | | | | | |
| Yes | 03/05/2019 | 06/26/2019 | Ratio 15:1:1 | 6/6 Day Cycle/305 | 15 students/1 teacher/1 aide | Kennedy Elementary (PS)/15:1:1 Classroom |
| | 03/05/2019 | 06/26/2019 | Speech | 3/6 Day Cycle/30 | Group | Kennedy Elementary (PS)/Provider Location |

Minutes Change classification to Intellectually Disabled

Fall 2019 Recommendation:
BOCES 12:1:1 classroom placement 6 times per cycle for 360 minutes (OFA)
Adaptive Physical Education services 3 times per cycle for 40 minutes
Group Speech services 3 times per cycle for 30 minutes
Special Transportation services

Total Meetings 1

Board Action Sheet Meeting 06/20/2019

Committee: Committee on Preschool Special Education

| | | 0000774 | 415 07/25/2015 | M | | Preschool Student with a Disability | х |
|---------|-------------|--------------------------|----------------------------------|---------------|-------------------------------|-------------------------------------|--|
| 6/20/19 | - Annual Re | eview | | | (| Outcome: IEP Change: Rema | ins Classified |
| Primary | Start Date | Fut End Date End Date | Service | | Frq/Cyl/Minute | es Delivery Recommendation | n School/Location Coordinating Service Provider |
| CURREN | IT YEAR | | | | | | |
| Yes | 09/05/2018 | 06/26/2019 | Ratio 8:1:1 | | 5/Weekly/165 | 8 students/1 teacher/1 aid | de John F Kennedy Elementary/8:1:1 Classroom/OGDENSBURG CITY SD |
| | 09/05/2018 | 06/26/2019 | Speech | | 3/Weekly/30 | Individual | John F Kennedy Elementary/Speech Classroom/OGDENSBURG CITY SD |
| | 01/07/2019 | 06/26/2019 | Occupational Thera | ру | 2/Weekly/30 | Individual | John F Kennedy Elementary/Provider Location/NORTH COAST THERAPY |
| | 01/07/2019 | 06/26/2019 | Physical Therapy | | 2/Weekly/30 | Individual | John F Kennedy Elementary/Provider Location/NORTH COAST THERAPY |
| - 00 | 01/07/2019 | 06/26/2019 | Individual Suppleme Personnel | entary School | 5 times per w 165 minutes/ | eek | General Ed. & Special Ed. Classrooms |

Minutes Continue classification of Preschool Student with a Disability

Recommendation through June 2019:

District 8:1.1 classroom placement 5 times per week for 165 minutes

Individual Occupational Therapy services 1 time per week for 30 minutes Individual Physical Therapy services 2 times 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 165 minutes

Behavioral Consultant services 1200 minutes per year

12 Month Extended Year Recommendation:

District 8:1:1 classroom placement 5 times per week for 150 minutes

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Board Action Sheet Meeting 06/20/2019

Committee: Committee on Preschool Special Education

DOB Gender Grade Disability 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 Individual Supplementary School Personnel services 5 times per week for 150 minutes

Behavioral Consultant services 360 minutes for the summer

Fall 2019 Recommendation:

District 8:1:1 classroom placement 5 times per week for 165 minutes Individual Occupational Therapy services 2 times per week for 30 minutes Individual Physical Therapy services 2 times 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 165 minutes

Behavioral Consultant services 1200 minutes per year

000077586

01/06/2016

Preschool Student with a Disability

χ

06/20/19 - Annual Review

Outcome: IEP Change: Remains Classified

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location Coordinating Service Provider |
|---------|------------|--------------------------|-----------------------------|-----------------|-------------------------|---|
| CURREN | IT YEAR | | | | | |
| Yes | 01/07/2019 | 06/26/2019 | Special Education Itinerant | 4/Weekly/60 | Direct - Individual | Home Base - Preschool/Home Setting/NORTH COAST OT, PT AND SLP, PLLC |
| | 01/07/2019 | 06/26/2019 | Speech | 3/Weekly/30 | Individual | Kennedy Elementary (PS)/Speech Classroom/COUNTY OF ST LAWRENCE |
| | 01/07/2019 | 06/26/2019 | Occupational Therapy | 2/Weekly/30 | Individual | Home Base - Preschool/Home Setting/NORTH COAST OT, PT AND SLP, PLLC |

Minutes Continue classification of Preschool Student with a Disability

Recommendation through June 2019: Special Education Itinerant Teacher services 4 times per week for 60 minutes Individual Speech services 3 times per week for 30 minutes Individual Occupational Therapy services 2 times per week for 30 minutes

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Board Action Sheet Meeting 06/20/2019

Committee: Committee on Preschool Special Education

ID DOB Gender Grade Disability 12Mth

12 Month Extended Year Recommendation:
Individual Speech services 2 times per week for 30 minutes
Individual Occupational Therapy services 2 times per week for 30 minutes
Fall 2019 Recommendation:

Fall 2019 Recommendation:

BOCES Beginning Years 8.1:4 classroom placement 5 times per week for 330 minutes Individual Speech services 5 times per week for 30 minutes Individual Occupational Therapy services 2 times per week for 30 minutes Individual Supplementary School Personnel services 5 times per week for 330 minutes Parent Counseling and Training services 2 times per month for 60 minutes Indirect Social Worker services 1 time per month for 60 minutes Special Transportation services

Physical Therapy Evaluation

000077577

09/05/2015

F

Preschool Student with a Disability

X

06/20/19 - Annual Review

Outcome: IEP Change: Remains Classified

| rimary | y Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location Coordinating Service Provider |
|--------|--------------|--------------------------|-----------------------------|-----------------|-------------------------|--|
| URRE | NT YEAR | | | | | Transpired Contract Total Contract |
| Yes . | 01/17/2019 | 06/26/2019 | Special Education Itinerant | 2/Weekly/60 | Direct - Individual | Home Base - Preschool/Home Setting/COUNTY OF ST LAWRENCE |
| | 01/17/2019 | 06/26/2019 | Occupational Therapy | 2/Weekly/30 | Individua | Home Base - Preschool/Home Setting/COUNTY OF ST LAWRENCE |
| | 01/17/2019 | 06/26/2019 | Speech | 2/Weekly/30 | Individual | Home Base - Preschool/Home Setting/COUNTY OF ST LAWRENCE |

Minutes Continue classification of Preschool Student with a Disability

Recommendation through June 2019: Special Education Itinerant Teacher services 2 times per week for 60 minutes

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Board Action Sheet Meeting 06/20/2019

Committee: Committee on Preschool Special Education

DOB Gender Grade Disability 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:

Special Education Itinerant Teacher services 2 times per week for 60 minutes Individual Occupational Therapy services 2 times per week for 30 minutes Individual Physical Therapy services 2 times per week for 30 minutes Individual Speech services 2 times per week for 30 minutes

Fall 2019 Recommendation:

Special Education Itinerant Teacher services 2 times per week for 60 minutes Individual Occupational Therapy services 2 times per week for 30 minutes Individual Physical Therapy services 2 times per week for 30 minutes Individual Speech services 2 times per week for 30 minutes

000077430

11/06/2015

Ρ

Preschool Student with a Disability

X

06/20/19 - Annual Review

Outcome: IEP Change: Remains Classified

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location Coordinating Service Provider |
|---------|------------|--------------------------|-----------------------------|-----------------|-------------------------|---|
| CURREN | IT YEAR | | | | | Containing Control 10 1000 |
| | 10/09/2018 | 06/26/2019 | Speech | 2/Weekly/30 | Individual | Madill Elementary (PS)/Speech Classroom/COUNTY OF ST LAWRENCE |
| Yes | 12/04/2018 | 06/26/2019 | Special Education Itinerant | 3/Weekly/60 | Direct - Individual | Home Base - Preschool/Home Setting/NORTH COAST OT, PT AND SLP, PLLC |
| | 02/05/2019 | 06/26/2019 | Occupational Therapy | 1/Weekly/30 | Individual | Home Base - Preschool/Home Setting/COUNTY OF ST LAWRENCE |

Minutes Continue classification of Preschool Student with a Disability

Recommendation through June 2019; Special Education Itinerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 30 minutes

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Board Action Sheet Meeting 06/20/2019

Committee: Committee on Preschool Special Education

ID DOB Gender Grade Disability 12Mth
Individual Occupational Therapy 1 time per week for 30 minutes

12 Month Extended Year Recommendation:

Special Education Itinerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 30 minutes

Individual Occupational Therapy 2 times per week for 30 minutes

Fall 2019 Recommendation:

District 12:1:1 classroom placement 5 times per week for 150 minutes Individual Speech services 2 times per week for 30 minutes Individual Occupational Therapy services 2 times per week for 30 minutes

000077449 01/14/2016

M

Р

Preschool Student with a Disability

Outcome: IEP Change: Remains Classified

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location Coordinating Service Provider |
|---------|------------|--------------------------|-----------------------------|-----------------|-------------------------|---|
| CURREN | IT YEAR | | | | | |
| Yes | 01/07/2019 | 06/26/2019 | Special Education Itinerant | 2/Weekly/60 | Direct - Individual | Home Base - Preschool/Home Setting/NORTH COAST OT, PT AND SLP, PLLC |
| | 01/07/2019 | 06/26/2019 | Speech | 2/Weekly/30 | Individual | John F Kennedy Elementary/Speech Classroom/OGDENSBURG CITY |

Minutes Continue classification of Preschool Student with a Disability

Recommendation through June 2019:

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:

Special Education Itinerant Teacher services 3 times per week for 60 minutes

Individual Speech services 2 times per week for 30 minutes

Fall 2019 Recommendation

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06/20/19 - Annual Review

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Board Action Sheet Meeting 06/20/2019 Committee: Committee on Preschool Special Education

12Mth

ID DOB Gender Grade Disability

Special Education Itinerant Teacher services 3 times per week for 60 minutes
Individual Speech services 2 times per week for 30 minutes

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Ogdensburg City School District Board Action Sheet Meeting 06/20/2019

Total Meetings 5

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Ogdensburg City School District Board Action Sheet Meeting 06/19/2019

Committee: CSE

| | | ID 000077 | DOB 590 04/26/2012 | Gender M | Grade 001 | Disab Speech | ility /Language Impairment | 12Mth |
|----------|------------|--------------------------|----------------------------------|---------------|---|-----------------|--|---|
| 6/19/19 | - Amendme | ent with No N | th No Meeting Held | | Outcome: IEP Change: Remains Classified | | | |
| Primary | Start Date | Fut End Date End Date | Service | | Frq/Cyl/M | inutes | Delivery Recommendation | School/Location |
| CURREN | T YEAR | | | | | | | |
| Yes | 12/04/2018 | 06/26/2019 | Speech | | 3/6 Day 0 | ycle/30 | Individual | Madill Elementary (PS)/Speech Classroom |
| | 12/04/2018 | 06/26/2019 | Counseling | | 1/Weekly | 30 | Group | Madill Elementary (BL)/Counselors Office |
| | 12/04/2018 | 06/26/2019 | Speech | | ch 3/6 Day Cycle | | Group | Madill Elementary (PS)/Speech Classroom |
| <u> </u> | 12/04/2018 | 06/26/2019 | Occupational Thera | вру | 2/6 Day C | ycle/30 | Group | Madill Elementary (BL)/Provider Location |
| | 12/04/2018 | 11/27/2018 | Individual Suppleme Personnel | entary School | 6 times po 330 minu | | | General Ed. & Special Ed. Classrooms |
| | 12/04/2018 | 06/26/2019 | Individual Suppleme Personnel | entary School | 6 times pr 330 minu | | To encourage participation, facilitate appropriate social interactions with his peers and monitor/address atypical sensory behaviors (hand movements, arm sucking, finger chewing) as per his behavior support plan. | General Ed. & Special Ed. Classrooms |

Minutes Continue classification of Speech/Language Impairment

Fall 2019 Recommendation:
Individual Speech services 3 times per cycle for 30 minutes
Group Speech services 3 times per cycle for 30 minutes
Individual Counseling services 2 times per week for 30 minutes
Group Occupational Therapy services 2 times per cycle for 30 minutes
Shared Supplementary School Personnel services 6 times per cycle for 330 minutes

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Ogdensburg City School District

Board Action Sheet
Meeting 06/19/2019
Committee: CSE

DOB Gender Grade Disability 12Mth

Total Meetings 1

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Board Action Sheet Meeting 06/19/2019

Committee: 504 Accommodation Plan Committee

| ID | DOB | Gender | Grade | Disability | 12Mth |
|-----------|------------|--------|-------|-------------------------|-------|
| 000025109 | 05/25/2007 | M | 005 | Non-Disabled | |
| | | | | As of 07/02/19: | |
| | | | | Continue COA Dischiller | |

06/19/19 - 504 Referral

Outcome: Create Accommodation Plan

Minutes Eligible for classification of Section 504 Disability

Fall 2019 Recommendation:
Section 504 Accommodations 6 times per cycle for 390 minutes
Direct Consultant Teacher services 6 times per cycle for 40 minutes in the area of English
Individual Speech services 2 times per cycle for 30 minutes

Total Meetings 1

Board Action Sheet Meeting 06/19/2019

Committee: Committee on Special Education

| | ID | DOB | Gender | Grade | Disability | 12Mth |
|-------------------------|-------------------------|--------------------|--------|---------|---|-------|
| | 000022031 | 05/29/2003 | М | 010 | Non-Disabled | |
| 06/19/19 - New Referral | | Referral: 03/21/20 | | 21/2019 | Outcome: Not Eligible | |
| <u>Minutes</u> Ineli | igible | | | | | |
| | 000030105 | 03/26/2013 | М | JK | Non-Disabled As of 07/02/19: | |
| 06/19/19 - New Referral | 06/19/19 - New Referral | | | 06/2019 | Speech/Language Impairment Outcome: Initial Placement | |

Minutes Eligible for classification of Speech/Language Impairment

Fall 2019 Recommendation:

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

000077112

04/13/2012

As of 07/02/19:

06/19/19 - New Referral

Referral: 03/29/2019

Other Health Impairment

Outcome: Initial Placement

Minutes Eligible for classification of Other Health Impairment

Fall 2019 Recommendation:

Resource Room Services 6 times per cycle for 40 minutes Individual Skilled Nursing services 6 times per cycle for 15 minutes

Individual Supplementary School Personnel services 6 times per cycle for 360 minutes

М

Behavioral Consultant services 600 minutes per year

000025109

05/25/2007

Non-Disabled

06/19/19 - New Referral

Referral: 03/13/2019

Outcome: Not Eligible

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Ogdensburg City School District Board Action Sheet Meeting 06/19/2019 Committee: Committee on Special Education

DOB Gender Grade Disability Minutes Ineligible

Refer to the Section 504 Committee

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Ogdensburg City School District Board Action Sheet Meeting 06/19/2019

Total Meetings 4

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Ogdensburg City School District Board Action Sheet Meeting 06/18/2019

Committee: Committee on Special Education

| | 000077160 | DOB 09/06/2013 | Gender | | ability er Health Impairment | |
|----------------------------------|--|---|--|------------------|---|--|
| 06/18/19 - Program | | 03/00/2013 | 141 | | e rieaui impairment come: IEP Change: Remaii | ns Classified |
| | | | | | | |
| Primary Start Date | Fut End Date Servic End Date | 6 | | Frq/Cyt/Minutes | Delivery Recommendation | School/Location |
| CURRENT YEAR | | - 100 | | | | |
| Yes 01/08/2019 | 06/26/2019 Speed | h | | 3/6 Day Cycle/30 | Group | Madill Elementary (PS)/Speech Classroom |
| Minutes | Continue classification | of Other Healt | h Impairment | | | |
| | Recommendation thro Group Speech service Behavioral Consultant | s 3 times per c | ycle for 30 minutes | ninutes | | |
| | 12 Month Extended Ye None | ear Recommen | dation. | | | |
| | Fall 2019 Recommend District 6:1:1 classroor Group Speech service Individual Counseling Individual Supplement Behavioral Consultant | m placement 6 t es 3 times per cy services 1 time tary School Pers services 900 m | ycle for 30 minutes per cycle for 30 mi sonnel services 6 ti | | utes | |
| | Special Transportation | 1 services | | | | |
| | Special Transportation | | N | 000 | aine Direktik | |
| 06/18/19 - Annual R | Special Transportation 000029045 | 12/06/2010 | м | | ning Disability come: IEP Change: Remair | ns Classified |
| | Special Transportation 000029045 | 12/06/2010 | M | - D-1200 | | ns Classified School/Location |
| | Special Transportation 000029045 eview Fut End Date Service | 12/06/2010 | M | Out | come: IEP Change: Remain | |
| Primary Start Date CURRENT YEAR | Special Transportation 000029045 eview Fut End Date Service | 12/06/2010 e | W | Out | come: IEP Change: Remain | |

Board Action Sheet Meeting 06/18/2019

Committee: Committee on Special Education

| ID. | DOB | Gender | Grade Disa | bility | 12Mtl |
|----------------------|----------------------------------|-----------------|-----------------------------------|--------------------|---|
| 12/18/2018 06/26/201 | 9 Speech | | 6/6 Day Cycle/30 | Individual | Kennedy Elementary (PS)/Speech Classroom |
| 12/18/2018 01/10/201 | 9 Individual Supple Personnel | ementary School | 6 times per cycle 390 minutes/ | Throughout the day | General Ed. & Special Ed. Classrooms |
| 12/18/2018 04/22/201 | 9 Individual Supple Personnel | ementary School | 6 times per cycle 390 minutes/ | Throughout the day | General Ed. & Special Ed. Classrooms |

Minutes Continue classification of Learning Disability

Recommendation through June 2019: District 12:1:1 classroom placement 6 times per cycle for 330 minutes Individual Speech services 6 times per cycle for 30 minutes Indirect Speech Consult 120 minutes per year Special Transportation services

12 Month Extended Year Recommendation: None

Fall 2019 Recommendation:
District 12:1:1 classroom placement 6 times per cycle for 330 minutes Individual Speech services 3 times per cycle for 30 minutes
Group Speech services 3 times per cycle for 30 minutes
Individual Indirect Speech Consult 220 minutes per year
Special Transportation services

Ogdensburg City School District Board Action Sheet Meeting 06/18/2019

Total Meetings 2

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Ogdensburg City School District Board Action Sheet Meeting 06/18/2019

Committee: Committee on Preschool Special Education

| 06/18/19 | - New Refe | 1D 000077627 rral | DOB 03/18/2016 | Gender M Referral: 0 | Grade P 13/22/2019 | Disability Non-Disabled Outcome: Not | Elicible | | 12Mti |
|---------------|---|--|---|------------------------------|--------------------------|--------------------------------------|-------------------|---|-------|
| | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | Noterial, v | 312212013 | Outcome. Not | Elidiple | | |
| | Minutes | Ineligible | | | | | | | |
| | | 000077576 | 02/28/2015 | М | Р | Preschool Student | with a Disability | | х |
| 06/18/19 | - Annual R | eview | | | | Outcome: IEP | Change: Remain | ns Classified | |
| Primary | Start Date | Fut End Date Ser End Date | vice | | Frq/Cyl/M | inutes Delivery | Recommendation | School/Location Coordinating Service Provide | |
| CURREN Yes | | 06/26/2019 Spe | ech | | 2/Weekly/ | /30 Individua | al . | Home Base - Preschool/Hom Setting/COUNTY OF ST LAWRENCE | |
| | Minutes | Continue classificat | tion of Preschool S | tudent with a Dis | ability | | | | |
| | | Recommendation to Individual Speech s | hrough June 2019 services 2 times pe | r week for 30 mir | nutes | | | | |
| | | 12 Month Extended Individual Speech s | l Year Recommend ervices 2 times pe | dation; r week for 30 mir | nutes | | | | |
| | | Fall 2019 Recomme Individual Speech s | | r week for 30 mir | autes | | | | |
| 00140140 | 410 | 000077448 | 09/27/2015 | F | Ρ | Preschool Student | | | X |
| 06/18/19 - | Annual Re | eview | | | | Outcome: IEP | Change: Remain | s Classified | |
| E CHARLES | A March | Fut End Date Sen End Date | vice | | Frq/Cyl/Mi | nutes Delivery | Recommendation | School/Location Coordinating Service Provider | |
| Yes | T YEAR 11/05/2018 | 06/26/2019 Spe | ech | | 2/Weekly/ | 30 Individua | 2176= | Madill Etementary (preschool)/Speech | |
| | | | | | -11:1 | | | | |

Ogdensburg City School District

Board Action Sheet

Meeting 06/18/2019

Committee: Committee on Preschool Special Education

| - | 1 | ID | DOB | Gender | Grade Dis | ability | 12Mt |
|---------------|-----------------------|--|---|----------------------------------|-----------------|----------------------------------|--|
| | | | | | | | Classroom/COUNTY OF ST LAWRENCE |
| | Minutes | Continue classificat | tion of Preschool (| Student with a Disabil | ity | | |
| | | Recommendation t Individual Speech s | hrough June 2019 services 2 times po | t er week for 30 minute | s | | |
| | | 12 Month Extended Individual Speech s | | dation: er week for 30 minute | s | | |
| | | Fall 2019 Recommi Individual Speech s | | er week for 30 minute | s | | |
| | | 000077604 | 02/08/2016 | м | P Pres | school Student with a Disability | х |
| 6/18/19 | - Annual R | eview | | | Out | come: IEP Change: Remain | ns Classified |
| Bally. | | Fut End Date Sen End Date | /ice | | Frq/Cyl/Minutes | Delivery Recommendation | School/Location Coordinating Service Provider |
| CURREN Yes | NT YEAR 02/07/2019 | 06/26/2019 Spe | ech | | 2/Weekly/30 | Individual | Home Base - Preschool/Speech Classroom/COUNTY OF ST LAWRENCE |
| | Minutes | Continue classificat | ion of Preschool S | Student with a Disabili | ty | | |
| | | Recommendation the Individual Speech s | | er week for 30 minute | s | | |
| | | 12 Month Extended Individual Speech s | | dation: r week for 30 minute: | S | | |
| | | | | | | | |

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Board Action Sheet Meeting 06/18/2019

Committee: Committee on Preschool Special Education

| | ID | DOB | Gender | Grade D | isability | 12Mth |
|------------------------|-----------|------------|--------|---------|------------------------------------|--------------|
| | 000077510 | 11/13/2015 | М | P Pi | reschool Student with a Disability | X |
| 06/18/19 - Annual Revi | iew | | | 0 | utcome: IEP Change: Remain | s Classified |
| Primary Start Date Fo | | | | | | |

2/Weekly/30

Individual

Minutes Continue classification of Preschool Student with a Disability

11/20/2018 06/26/2019 Speech

Yes

Recommendation through June 2019: Individual Speech services 2 times per week for 30 minutes

12 Month Extended Year Recommendation:
District 12:1:1 Integrated classroom placement 5 times per week for 150 minutes Individual Speech services 2 times per week for 30 minutes

Fall 2019 Recommendation:
District 12:1:1 Integrated classroom placement 5 times per week for 150 minutes Individual Speech services 3 times per week for 30 minutes

Kennedy Elementary (PS)/Speech Classroom/COUNTY OF ST

LAWRENCE

Ogdensburg City School District Board Action Sheet Meeting 06/18/2019

Total Meetings 5

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Board Action Sheet Meeting 06/12/2019

Committee: Committee on Special Education

| | ID | DOB | Gender | Grade | Disability | 12Mth |
|--|-----------|------------|--------|-------|-------------------------|---------------------------------------|
| | 000030109 | 08/21/2012 | М | K | Other Health Impairment | · · · · · · · · · · · · · · · · · · · |

06/12/19 - Annual Review

Outcome: IEP Change: Remains Classified

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location |
|---------|------------|--------------------------|---------------------------------------|-----------------------------------|--|--|
| CURREN | IT YEAR | | | | | • |
| Yes | 09/05/2018 | 07/02/2019 | Resource Room | 6/6 Day Cycle/40 | | Kennedy Elementary (PS)/Resource Room |
| | 09/05/2018 | 07/02/2019 | Speech | 6/6 Day Cycle/30 | Group | Kennedy Elementary (PS)/Speech Classroom |
| | 09/05/2018 | 07/02/2019 | Occupational Therapy | 1/6 Day Cycle/30 | Group | Kennedy Elementary (BL)/Provider Location |
| | 09/05/2018 | 06/19/2018 | Shared Supplementary School Personnel | 6 times per cycle 180 minutes/ | In the areas of ELA, Math, and Writing | General Ed. & Special Ed. Classrooms |
| | 09/05/2018 | 07/02/2019 | Shared Supplementary School Personnel | 6 times per cycle 180 minutes/ | In the areas of ELA, Math and Writing | General Ed. & Special Ed. Classrooms |

Minutes Continue classification of Other Health Impairment

Recommendation through June 2019:
Resource Room services 6 times per cycle for 40 minutes
Group Occupational Therapy services 1 time per cycle for 30 minutes
Group Speech services 6 times per cycle for 30 minutes
Shared Supplementary School Personnel services 6 times per cycle for 180 minutes

12 Month Extended Year Recommendation: None

Fall 2019 Recommendation:

District 12:1:1 classroom placement 6 times per cycle for 320 minutes Group Occupational Therapy services 1 time per cycle for 30 minutes Group Speech services 6 times per cycle for 30 minutes

Board Action Sheet Meeting 06/12/2019

Committee: Committee on Special Education

| | ID | DOB | Gender | Grade | Disability | 12Mth |
|--------------------------|-----------|------------|--------|-------|---|-------|
| | 000077524 | 02/12/2007 | М | 006 | Emotional Disturbance | |
| 06/12/19 - Annual Review | f | | | | Outcome: IEP Change: Remains Classified | |
| | | | | | | |

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location |
|---------|------------|--------------------------|---------------------------------------|-----------------------------------|-------------------------|---|
| CURREN | IT YEAR | | | | | |
| Yes | 12/18/2018 | 06/26/2019 | Resource Room | 6/6 Day Cycle/40 | | Madill Elementary (PS)/Resource Room |
| | 12/18/2018 | 06/26/2019 | Counseling | 3/Weekly/30 | Individual | Madill Elementary (PS)/Counselors Office |
| | 12/18/2018 | 06/26/2019 | Consultant Teacher | 6/6 Day Cycle/30 | Direct - Mathematics | Madill Elementary (PS)/General Education Classroom |
| | 12/18/2018 | 06/26/2019 | Shared Supplementary School Personnel | 6 times per cycle 120 minutes/ | | General Ed. & Special Ed. Classrooms |

Minutes Continue classification of Emotional Disturbance

Recommendation through June 2019: 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

Individual Counseling services 3 times per week for 30 minutes

Shared Supplementary School Personnel services 6 times per cycle for 120 minutes
Behavioral Consultant services 600 minutes per year

12 Month Extended Year Recommendation:

None

Fall 2019 Recommendation:

BOCES 8.1:1 classroom placement 6 times per cycle for 360 minutes (Lisbon)

Individual Counseling services 1 time per week for 30 minutes

Group Counseling services 1 time per week for 30 minutes

Individual Skilled Nursing services 6 times per cycle for 15 minutes

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

Behavioral Consultant services 1800 minutes per year

Special Transportation services

Board Action Sheet Meeting 06/12/2019

Committee: Committee on Special Education

| QUIT SEEDER OF SEEDERS SEEDE | ID | DOB | Gender | Grade | Disability | 12Mth |
|------------------------------------|-----------|------------|--------|-------|---|-------|
| | 000025069 | 11/25/2008 | M | 004 | Emotional Disturbance | |
| 06/12/19 - Transfer Student/Intake | | | | | Outcome: IEP Change: Remains Classified | |

Minutes Continue classification of Emotional Disturbance

Recommendation through June 2019:

BOCES 6:1:1 classroom placement 6 times per cycle for 360 minutes (Lisbon)

Individual Speech services 1 time per week for 30 minutes

Group Speech services 1 time per week for 30 minutes

Individual Occupational Therapy services 1 time per week for 30 minutes

Individual Counseling services 1 time per week for 30 minutes Group Counseling services 1 time per week for 30 minutes

Shared Supplementary Personnel 6 times per cycle for 360 minutes

Individual Indirect Occupational Therapy Consultant services 240 minutes per year

Behavioral Consultant services 1500 minutes per year

12 Month Extended Year Recommendation:

BOCES 6:1:1 classroom placement 5 times per week for 360 minutes

Individual Speech services 1 time per week for 30 minutes

Individual Counseling services 1 time per week for 30 minutes

Group Counseling services 1 time per week for 30 minutes

Individual Occupational Therapy services 1 time per week for 30 minutes

Behavioral Consultant services 180 minutes for the summer

Fall 2019 Recommendation:

No changes

000021251

03/15/2002

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Learning Disability

06/12/19 - Annual Review Outcome: IEP Change: Remains Classified

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location |
|--------------|-----------------------|--------------------------|---------------|------------------|-------------------------|---------------------------------------|
| CURRE Yes | NT YEAR 09/05/2018 | 01/16/2019 | Resource Room | 6/6 Day Cycle/40 | | OFA Grades 9-12 (PS)/Resource Room |

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Ogdensburg City School District Board Action Sheet

Board Action Sheet Meeting 06/12/2019

Committee: Committee on Special Education

ID DOB Gender Grade Disability

Minutes Continue classification of Learning Disability

Recommendation through June 2019:
Resource Room services 6 times per cycle for 40 minutes

None
Fall 2019 Recommendation:
BOCES TASC Program

12 Month Extended Year Recommendation:

BOCES TASC Program Vocational Education services

Ogdensburg City School District Board Action Sheet Meeting 06/12/2019

Total Meetings 4

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Ogdensburg City School District Board Action Sheet Meeting 06/12/2019

Committee: 504 Accommodation Plan Committee

| ID: | DOB | Gender | Grade | Disability | 12Mth |
|---------------|------------|--------|-------|------------------------|---------|
| 000021038 | 12/19/2001 | F | 011 | Section 504 Disability | 12.0(1) |

06/12/19 - 504 Referral

Outcome: Create Accommodation Plan

Minutes Eligible for classification of Section 504 Disability

Recommendation through June 2019; Recommendation through June 2019: Section 504 Accommodations 6 times per cycle for 415 minutes

12 Months Extended Year Recommendation:

None

Fall 2019 Recommendation:

No changes

Total Meetings 1

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Ogdensburg City School District Board Action Sheet Meeting 06/11/2019

Committee: Committee on Special Education

| | | 0000230 | DOB 42 03/16/2004 | Gender M | Grade 009 | Disab | | 12M |
|---------|-------------|---|--|------------------------------|--------------|-----------------|--|---------------------------------------|
| 6/11/19 | - Annual Ro | | 42 03/10/200- | . 141 | 003 | | ng Disability ome: IEP Change: Remair | ns Classified |
| Primary | Start Date | Fut End Date End Date | Service | | Frq/Cyl/Mi | nutes | Delivery Recommendation | School/Location |
| CURREN | TYEAR | | | | | | | |
| Yes | 09/05/2018 | 06/18/2019 | Resource Room | | 6/6 Day C | cle/40 | | OFA Grades 9-12 (PS)/Resource Room |
| | Minutes | es Continue classification of Learning Disability | | | 1ºBaire | 7 HB. 7 G Bluis | <u> </u> | |
| | | Recommendati Resource Room | ion through June 20 in services 6 times p | 19: er cycle for 40 minut | es | | | |
| | | 12 Month Exter None | nded Year Recomm | endation | | - 69 | | |
| | | Fall 2019 Reco | mmendation: | | | | | |

06/11/19 - Program Review

000023267

06/11/2005

007

Other Health Impairment

Outcome: IEP Change: Remains Classified

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location |
|---------|------------|--------------------------|---------------------------------------|-----------------------------------|----------------------------------|--|
| CURREN | IT YEAR | | | - | | |
| Yes | 09/05/2018 | 06/26/2019 | Ratio 15:1:1 | 6/6 Day Cycle/160 | 15 students/1 teacher/1 aide | OFA Grades 7-8 (PS)/15:1:1 Classroom |
| | 09/05/2018 | 06/26/2019 | Consultant Teacher | 6/6 Day Cycle/40 | Direct - Science | OFA Grades 7-8 (PS)/General Education Classroom |
| | 09/05/2018 | 09/12/2018 | Shared Supplementary School Personnel | 12 times per cycle 40 minutes/ | In the areas of Science & Health | General Ed. & Special Ed. Classrooms |

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Board Action Sheet Meeting 06/11/2019

Committee: Committee on Special Education

| ID ID | DOB Gender | Grade Disat | oility | 12Mtl |
|-----------------------|-------------------------------------|-----------------------------------|----------------------------------|--|
| 09/05/2018 06/26/2019 | Shared Supplementary School Personn | 12 times per cycle 40 minutes/ | In the areas of Science & Health | General Ed. & Special Ed. Classrooms |
| 11/06/2018 06/26/2019 | Counseling | 1/Monthly/60 | Individual | OFA Grades 7-8 (PS)/Counselors Office |

Minutes Continue classification of Other Health Impairment

Recommendation through June 2019:

District 15:11 classroom placement 6 times per cycle for 160 minutes
Direct Consultant Teacher services 6 times per cycle for 40 minutes in the area of science

Individual Counseling services 1 time per month for 60 minutes

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

12 Month Extended Year Recommendation:

None

Fall 2019 Recommendation:

BOCES 12:1:1 classroom placement 6 times per cycle for 360 minutes Individual Counseling services 1 time per cycle for 30 minutes Group Counseling services 1 time per cycle for 30 minutes

Special Transportation services

000023065

06/21/2004

F

Other Health Impairment

06/11/19 - Program Review

Outcome: IEP Change: Remains Classified

| Primar | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location |
|--------|------------|--------------------------|--|-----------------------------------|---|---|
| CURRI | NT YEAR | | | | | |
| Yes | 03/19/2019 | 06/26/2019 | Ratio 12:1:1 | 6/6 Day Cycle/45 | 12 students/1 teacher/1 aide - Instructional Study Hall | Heuvelton Central School (PN)/12:1:1 Classroom |
| | 03/19/2019 | 06/26/2019 | Counseling | 2/6 Day Cycle/30 | Individual | Heuvelton Central School (PN)/Provider Location |
| | 03/19/2019 | 03/21/2019 | Individual Supplementary School Personnel | 6 times per cycle 180 minutes/ | | General Ed. & Special Ed. Classrooms |

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Board Action Sheet Meeting 06/11/2019 Committee: Committee on Special Education

| ID | DOB | Gender | Grade | Disability | 12Mth | |
|-----------------------|--|--------|-----------------------------------|------------|---|--|
| 03/19/2019 06/26/2019 | Individual Supplementary School Personnel | | 6 times per cycle 180 minutes/ | | General Ed. & Special Ed. Classrooms | |

Minutes Continue classification of Other Health Impairment

Fall 2019 Recommendation:

BOCES 6:1:2 Crossroads program placement 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 30 minutes
Special Transportation services

Ogdensburg City School District Board Action Sheet Meeting 06/11/2019

Total Meetings 3

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Board Action Sheet Meeting 06/07/2019

Committee: Committee on Special Education

| | ID | DOB | Gender | Grade | Disability | 12Mth |
|--------------------------|-----------|------------|--------|-------|---|-------|
| | 000019175 | 04/05/2001 | М | 012 | Autism | |
| 06/07/19 - Annual Review | v | | | | Outcome: IEP Change: Remains Classified | |

| 06/07/ | /19 - / | ۱nnual | Rev | iew |
|--------|---------|--------|-----|-----|
|--------|---------|--------|-----|-----|

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location |
|---------|------------|--------------------------|--|-----------------------------------|---------------------------------|--|
| CURREN | IT YEAR | | | | | |
| res . | 09/04/2018 | 03/19/2019 | Ratio 12:1:1 | 6/6 Day Cycle/220 | 12 students/1 teacher/1 aide | OFA Grades 9-12 (BL)/12:1:1 Classroom |
| | 09/04/2018 | 03/19/2019 | Adaptive Physical Education | 3/6 Day Cycle/40 | | OFA Grades 9-12 (PS)/Gym/Pool |
| | 09/04/2018 | 03/19/2019 | Job Coach | 6/6 Day Cycle/150 | | OFA Grades 9-12 (BL)/Job Site |
| | 09/04/2018 | 03/19/2019 | Work Experience Program | 6/6 Day Cycle/150 | BOCES | OFA Grades 9-12 (BL)/Northwest Tech |
| | 09/04/2018 | 03/08/2018 | Individual Supplementary School Personnel | 6 times per cycle 220 minutes/ | Assist John throughout the day. | across environments |
| | 09/04/2018 | 03/19/2019 | Individual Supplementary School Personnel | 6 times per cycle 180 minutes/ | Assist John throughout the day. | across environments |

Minutes Continue classification of Autism

Recommendation through June 2019: BOCES 12:1:1 classroom placement 6 times per cycle for 220 minutes Adaptive Physical Education services 3 times per cycle for 40 minutes BOCES Community Based Work Program 6 times per cycle for 150 minutes Individual Job Coach 6 times per cycle for 150 minutes Individual Supplementary School Personnel services 6 times per cycle for 180 minutes

Special Transportation services

Graduate in June 2019

000077632

06/07/2005

007

Learning Disability

06/07/19 - Transfer Student/Intake

Outcome: IEP Change: Remains Classified

Board Action Sheet Meeting 06/07/2019

Grade Disability

Committee: Committee on Special Education

ID DOB Ge
Minutes Continue dassification of Learning Disability

Recommendation through June 2019: 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 Individual Counseling services 2 times per month for 30 minutes

12 Month Extended Year Recommendation:

Fall 2019 Recommendation:
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

Ogdensburg City School District Board Action Sheet Meeting 06/07/2019

Total Meetings 2

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Board Action Sheet Meeting 06/06/2019

Committee: Committee on Special Education

| | ID | DOB | Gender | Grade | Disability | 1ZWH) |
|--------------------|---------------------|------------|--------|-----------|---|-------------|
| 06/06/19 - Program | 000077500 Review | 09/10/2014 | М | P | Preschool Student with a Disability As of 09/01/19: Speech/Language Impairment Outcome: IEP Change: Remains Class | ssified |
| Primary Start Date | Fut End Date Serv | ice | | Frg/Cvl/l | Minutes Delivery Recommendation School | pl/Location |

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location Coordinating Service Provider |
|---------|------------|--------------------------|--|----------------------------------|-------------------------|---|
| CURREN | IT YEAR | | | | | |
| Yes | 12/04/2018 | 06/26/2019 | Speech | 2/Weekly/30 | Individual | Madill Elementary (PS)/Speech Classroom/COUNTY OF ST LAWRENCE |
| | 12/04/2018 | 06/26/2019 | Physical Therapy | 2/Weekly/30 | Individual | Madill Elementary (PS)/Madill School/COUNTY OF ST LAWRENCE |
| | 12/04/2018 | 06/26/2019 | Occupational Therapy | 2/Weekly/30 | Individual | Madill Elementary (PS)/Madill School/COUNTY OF ST LAWRENCE |
| | 12/04/2018 | 06/26/2019 | Individual Supplementary School Personnel | 5 times per week 165 minutes/ | | Madill School |

Minutes Eligible for classification of Speech/Language Impairment

Fall 2019 Recommendation:

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

Individual Speech services 6 times per cycle for 30 minutes

Individual Occupational Therapy services 2 times per cycle for 30 minutes Individual Physical Therapy services 2 times per week for 30 minutes

Individual Supplementary School Personnel services 6 times per cycle for 330 minutes

Behavioral Consultant services 900 minutes per year

000077465

12/19/2013

Preschool Student with a Disability |

As of 09/01/19:

Speech/Language Impairment

Outcome: IEP Change: Remains Classified

06/06/19 - Program Review

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Ogdensburg City School District Board Action Sheet Meeting 06/06/2019 Committee: Committee on Special Education

| Primary S | | | | | | The second of th | 12Mth |
|---------------|------------|--------------------------|---|------------------------|----------------------|--|---|
| | | Fut End Date End Date | Service | | Frq/Cyl/Minu | tes Delivery Recommendation | School/Location Coordinating Service Provider |
| CURRENT Yes 0 | | 06/26/2019 | Speech | | 3/Weekly/30 | Individual | Kennedy Elementary (PS)/Speech Classroom/COUNTY OF ST LAWRENCE |
| | Minutes | Eligible for cla | ssification of Speech/La | nguage Impairment | | | 3811 |
| | | | ommendation: n services 3 times per cy | cle for 30 minutes | | | |
|)6/06/19 - F | Program F | 000077: | 218 08/01/2014 | м | | Preschool Student with a Disability As of 09/01/19: Speech/Language Impairment Outcome: IEP Change: Remai | X Classified |
| | | | | | | outcome, ici onange, iveniai | iis Classilleu |
| Primary S | | Fut End Date End Date | Service | | Frq/Cyl/Minu | tes Delivery Recommendation | School/Location Coordinating Service Provider |
| Yes 0 | | 04/30/2019 | Special Education Itin | nerant | 2/Weekly/60 | Direct - Group | Home Base - Preschool/Home Setting/NORTH COAST OT, PT AND SLP, PLLC |
| 0 | 09/05/2018 | 04/30/2019 | Speech | | 2/Weekly/30 | Group | Home Base - Preschool/Home Setting/COUNTY OF ST LAWRENCE |
| | Minutes | Eligible for cla | ssification of Speech/La | nguage Impairment | 1 2 | | |
| | | Direct Consult | tion through June 2019: cant Teacher services 6 leech services 3 times per | times per cycle for 30 |) minutes in the are | ea of English | |
| | | 0000772 | 250 08/01/2014 | F | Р | Preschool Student with a Disability | х |

Board Action Sheet Meeting 06/06/2019

Committee: Committee on Special Education

| ID. | DOB | Gender | Grade | Disability | 12Mth |
|-----|-----|--------|-------|----------------------------|-------|
| | | | | As of 09/01/19: | |
| | | | | Speech/Language Impairment | |

06/06/19 - Program Review

Outcome: IEP Change: Remains Classified

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location Coordinating Service Provider |
|---------|------------|--------------------------|-----------------------------|-----------------|-------------------------|---|
| CURREN | IT YEAR | | | | | |
| Yes | 09/05/2018 | 04/30/2019 | Special Education Itinerant | 2/Weekly/60 | Direct - Group | Home Base - Preschool/Home Setting/NORTH COAST OT, PT AND SLP, PLLC |
| | 09/05/2018 | 04/30/2019 | Speech | 2/Weekly/30 | Group | Home Base - Preschool/Home Setting/COUNTY OF ST LAWRENCE |

Minutes Eligible for classification of Speech/Language Impairment

Fall 2019 Recommendation:
Direct Consultant Teacher services 6 times per cycle for 30 minutes in the area of English Individual Speech services 3 times per cycle for 30 minutes

Ogdensburg City School District Board Action Sheet Meeting 06/06/2019

Total Meetings 4

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Board Action Sheet Meeting 06/06/2019

Committee: Committee on Preschool Special Education

| 12Mth | Disability | Grade | Gender | DOB | IU | |
|-------|---|-------|--------|------------|-----------|-------------------------|
| | Preschool Student with a Disability | Р | М | 03/05/2015 | 000077511 | |
| | Outcome: IEP Change: Remains Classified | | | | iew | 06/06/19 - Annual Revi |
| | Outcome: IEP Change: Remains Classified | | | | ew | volvol 19 - Annuai Kevi |

Minutes Continue classification of Preschool Student with a Disability

Recommendation through June 2019:

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:

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

Individual Speech services 2 times per week for 30 minutes

Fall 2019 Recommendation:

District 8:1:1 classroom placement 5 times per week for 165 minutes Individual Speech services 3 times per week for 30 minutes

000077500 09/10/2014 M P Preschool Student with a Disability X
06/06/19 - Annual Review Outcome: Refer to Special Education

Minutes Continue classification of Preschool Student with a Disability

Recommendation through June 2019: Individual Speech services 2 times per week for 30 minutes Individual Physical Therapy services 2 times per week for 30 minutes Individual Occupational Therapy services 2 times per week for 30 minutes Individual Supplementary School Personnel services 5 times per week for 165 minutes Behavioral Consultant services 600 minutes per year

12 Month Extended Year Recommendation: 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 Behavioral Consultant services 3 hours for the summer

Refer to the Committee on Special Education

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Ogdensburg City School District

Board Action Sheet

Meeting 06/06/2019

Committee: Committee on Preschool Special Education

| | | ID | DOB | Gender | Grade | Disability | 12Mth |
|------------|-------------|---|--|---|--|---|-------|
| 06/06/19 - | · Annual Re | 000077465 eview | 12/19/2013 | F | Р | Preschool Student with a Disability Outcome: Refer to Special Education | |
| | Minutes | Continue classification | on of Preschool S | Student with a Dis | sability | | |
| | | Recommendation the Individual Speech se | | | nutes | | |
| | | 12 Month Extended None | Year Recommen | dation: | | | |
| | | Refer to the Commit | tee on Special Ed | lucation | | | |
| 06/06/19 - | Annual Re | 000077218 eview | 08/01/2014 | М | Р | Preschool Student with a Disability Outcome: Refer to Special Education | x |
| | Minutes | | on of Drocobool C | turient with a Dis | ability | | |
| | | Continue classification | in or rieschool a | AGGERN WIGHT & DIS | sability | | |
| | | Recommendation the Group Special Educa Group Speech service | ough June 2019 ation Itinerant Tea | acher services 2 | times per week for | 60 minutes | |
| | | Recommendation the Group Special Educa | rough June 2019 ation Itinerant Textes 2 times per w Year Recommentation Itinerant Tex | acher services 2 eek for 30 minute dation: acher services 4 | times per week for es times per week for | | |
| | | Recommendation the Group Special Educa Group Speech service 12 Month Extended Group Special Educa | ough June 2019 ation Itinerant Tea es 2 times per w Year Recommena ation Itinerant Tea es 2 times per w | acher services 2 eek for 30 minute dation: acher services 4 eek for 30 minute | times per week for es times per week for | | |

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Board Action Sheet Meeting 06/06/2019

Committee: Committee on Preschool Special Education

12Mth

ID DOB Gender Grade Disability

Minutes Continue classification of Preschool Student with a Disability

Recommendation through June 2019: Group Special Education Itinerant Teacher services 2 times per week for 60 minutes Group Speech services 2 times per week for 30 minutes

12 Month Extended Year Recommendation: Group Special Education Itinerant Teacher services 4 times per week for 60 minutes Group Speech services 2 times per week for 30 minutes

Refer to the Committee on Special Education

Ogdensburg City School District Board Action Sheet Meeting 06/05/2019

Committee: OFA Grades 9-12 Subcommittee

| | | | ID | DOB | Gender | Grade | Disab | ility | 12Mth |
|-------|----------|------------|-------------------------------|---|---------|-------------|------------|-------------------------|---|
| | - | | 000018 | 013 10/18/2001 | М | 011 | Learnin | g Disability | |
| | 06/05/19 | Annual R | eview | | | | Outco | ome: IEP Change: Remain | s Classified |
| | Primary | Start Date | Fut End Date End Date | Service | | Frq/Cyl/Mit | nutes | Delivery Recommendation | School/Location |
| 20.10 | CURREN | TYEAR | | -0% | | | | | |
| | Yes | 09/05/2018 | 06/26/2019 | Resource Room | | 3/6 Day Cy | rcle/40 | | OFA Grades 9-12 (PS)/Resource Room |
| | | 09/05/2018 | 06/26/2019 | Consultant Teacher | | 3/6 Day Cy | /cle/40 | Direct - English | OFA Grades 9-12 (PS)/General Education Classroom |
| | | Minutes | Continue class | sification of Learning Dis | ability | | | | |
| | | | Resource Roo Vocational Ed | ation through June 2019 om services 6 times per e ducation services 6 times portation services | | | of Buildin | ng Trades | |
| | | | 12 Month Exte None | ended Year Recommend | ation | | | | |
| | | | Fall 2019 Rec No changes | commendation: | | | | | |

Total Meetings 1

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Ogdensburg City School District Board Action Sheet Meeting 06/04/2019

Committee: Madill CSE Sub-Committee

| | | 0000301 | 121 09/07/ | /2013 M | JK | Other H | ealth Impairment | | Х |
|---------|------------|--------------------------|--------------|---------|--------------|---------|-------------------------|---|---------|
| 6/04/19 | - Annual R | eview | | | | Outco | me: IEP Change: Remain | s Classified | |
| Primary | Start Date | Fut End Date End Date | Service | | Frq/Cyl/Minu | ıtes | Delivery Recommendation | School/Location | |
| CURREN | IT YEAR | | | | | | | | |
| Yes | 09/05/2018 | 06/18/2019 | Occupational | Therapy | 2/6 Day Cyc | le/30 | Individual | Madill Elementary (BL)/Prov Location | vider . |

Recommendation through June 2019. Individual Occupational Therapy services 2 times per cycle for 30 minutes

12 Month Extended Year Recommendation

Fall 2019 Recommendation: No changes

Total Meetings 1

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Ogdensburg City School District Board Action Sheet Meeting 06/04/2019

Committee: Committee on Special Education

| | | ID | | DOB | Gender | Grade | Disab | | 12Mth |
|----------|-------------|--|-------------|----------------|---------------------|-------------|-------------------|--|--|
| | | 000077 | 180 | 04/25/2014 | М | Р | As of 0 | ool Student with a Disability 9/04/19; /Language Impairment | |
|)6/04/19 | - Program | Review | | | | | Outco | me: IEP Change: Remair | s Classified |
| Primary | Start Date | Fut End Date End Date | Service | | | Frq/Cyl/Min | utes | Delivery Recommendation | School/Location Coordinating Service Provider |
| CURREN | IT YEAR | | | | | | | Con Market | 2700000 |
| Yes | 04/11/2019 | 06/26/2019 | Ratio 1: | 2:1:1 Integral | ed Setting | 5/Weekly/1 | 50 | 12 students/1 teacher/1 aide | John F Kennedy Elementary/12:1:1 Classroom/OGDENSBURG CITY SD |
| | 04/11/2019 | 06/26/2019 | Speech | | | 3/Weekly/3 | 0 | Individual | John F Kennedy Elementary/Speech Classroom/OGDENSBURG CITY SD |
| | Minutes | Eligible for cla | ssification | n of Speech/La | nguage Impairment | | | | |
| | | Fall 2019 Rec Group Speech Special Trans | services | 3 times per cy | ycle for 30 minutes | | | | |
| 06/04/19 | - Program I | 000077 Review | 568 | 10/09/2014 | E. | Ρ | As of 0 Speech | ool Student with a Disability 9/04/19: /Language Impairment eme: IEP Change: Remain | X s Classified |
| | | | | | | | | | |
| E LEVEL | 13000000 | Fut End Date End Date | Service | | | Frq/Cyl/Min | utes | Delivery Recommendation | School/Location Coordinating Service Provider |
| CURREN | | | | | | | | Processor | |
| Yes | 03/29/2019 | 06/26/2019 | Speech | 1 | | 3/Weekly/3 | 0 | Individual | Kennedy Elementary (PS)/Speech Classroom/COUNTY OF ST LAWRENCE |

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Board Action Sheet Meeting 06/04/2019

Committee: Committee on Special Education

ID DOB Gender Grade Disability 12Mth

Minutes Eligible for classification of Speech/Language Impairment

Fall 2019 Recommendation: Individual Speech services 6 times per cycle for 30 minutes

000077459 04/17/2014 M

Preschool Student with a Disability | As of 09/04/19:

Speech/Language Impairment

Outcome: IEP Change: Remains Classified

Primary Start Date Fut End Date Service Frq/Cyl/Minutes **Delivery Recommendation** School/Location End Date Coordinating Service Provider **CURRENT YEAR** Yes 12/10/2018 06/26/2019 Speech 2/Weekly/30 Individual John F Kennedy Elementary/Speech Classroom/COUNTY OF ST LAWRENCE

Minutes Eligible for classification of Speech/Language Impairment

Fall 2019 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
Individual Speech services 6 times per cycle for 30 minutes

Occupational Therapy Evaluation Physical Therapy Evaluation

06/04/19 - Program Review

000077386 03/27/2014 F P Pr

Preschool Student with a Disability | As of 09/04/19: Speech/Language Impairment

06/04/19 - Program Review Outcome: IEP Change: Remains Classified

Primary Start Date Fut End Date Service Frq/Cyt/Minutes Delivery Recommendation School/Location Coordinating Service Provider

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Board Action Sheet Meeting 06/04/2019

Committee: Committee on Special Education

| | ID | DOB | Gender | Grade | Disability | 12Mth |
|------|-----------------------|-------------------|-----------|-------------|---------------------|---|
| URRE | ENT YEAR | | | | | |
| 'es | 04/23/2019 06/26/2019 | Special Education | ltinerant | 2/Weekly/60 | Direct - Individual | Kennedy Elementary (PS)/Kennedy School/NORTH COAST OT, PT AND SLP, PLLC |
| | 04/23/2019 06/26/2019 | Occupational Then | ару | 2/Weekly/30 | Individual | Kennedy Elementary (PS)/Kennedy School/COUNTY OF ST LAWRENCE |
| | 04/23/2019 06/26/2019 | Physical Therapy | | 2/Weekly/30 | Individual | Kennedy Elementary (PS)/Kennedy School/COUNTY OF ST LAWRENCE |
| | 04/23/2019 06/26/2019 | Speech | | 2/Weekly/30 | Group | Kennedy Elementary (PS)/Kennedy School/COUNTY OF ST LAWRENCE |

Minutes Eligible for classification of Speech/Language Impairment

Fall 2019 Recommendation:
Direct Consultant Teacher services 6 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 Individual Physical Therapy services 2 times per week for 30 minutes

000077387

03/27/2014

M

P

Preschool Student with a Disability | As of 09/04/19;

Speech/Language Impairment

Outcome: IEP Change: Remains Classified

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location Coordinating Service Provider |
|---------|-----------------------|--------------------------|-----------------------------|-----------------|-------------------------|---|
| Yes | NT YEAR 04/23/2019 | 06/26/2019 | Special Education Itinerant | 2/Weekly/60 | Direct - Individual | Kennedy Elementary (PS)/Kennedy School/NORTH COAST OT, PT AND SLP, PLLC |

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06/04/19 - Program Review

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Board Action Sheet

Meeting 06/04/2019
Committee: Committee on Special Education

| | ID | DOB | Gender | Grade Di | sability | 12Mth |
|----------------|----------|----------------------|--------|-------------|------------|--|
| 04/23/2019 06 | /26/2019 | Occupational Therapy | | 2/Weekly/30 | Individual | Kennedy Elementary (PS)/Kennedy School/COUNTY OF ST LAWRENCE |
| 04/23/2019 06/ | 26/2019 | Physical Therapy | | 2/Weekly/30 | Individual | Kennedy Elementary (PS)/Kennedy School/COUNTY OF ST LAWRENCE |
| 04/23/2019 06/ | 26/2019 | Speech | | 2/Weekly/30 | Group | Kennedy Elementary (PS)/Kennedy School/COUNTY OF ST LAWRENCE |

Minutes Eligible for classification of Speech/Language Impairment

Fall 2019 Recommendation:

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

Group Speech services 3 times per cycle for 30 minutes

Individual Occupational Therapy services 2 times per cycle for 30 minutes Individual Physical Therapy services 2 times per week for 30 minutes

000077424

08/10/2014

Preschool Student with a Disability |

As of 09/04/19:

Speech/Language Impairment

Outcome: IEP Change: Remains Classified

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location Coordinating Service Provider |
|---------|------------|--------------------------|-----------------------------|-----------------|-------------------------|--|
| CURREN | IT YEAR | | | | | |
| Yes | 09/05/2018 | 07/02/2019 | Special Education Itinerant | 2/Weekly/60 | Direct - Individual | John F Kennedy Elementary/Kennedy School/NORTH COAST OT, PT AND SLP, PLLC |
| | 09/05/2018 | 07/02/2019 | Speech | 2/Weekly/30 | Individual | John F Kennedy Elementary/Speech Classroom/COUNTY OF ST LAWRENCE |

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06/04/19 - Program Review

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Board Action Sheet

Meeting 06/04/2019
Committee: Committee on Special Education

DOB Grade Disability

Minutes Eligible for classification of Speech/Language Impairment

Fall Recommendation 2019: Direct Consultant Teacher services 6 times per cycle for 30 minutes in the area of English Individual Speech services 3 times per cycle for 30 minutes Group Speech services 3 times per cycle for 30 minutes Special Transportation services

000077151

02/01/2014

Preschool Student with a Disability |

As of 09/04/19:

Other Health Impairment Outcome: IEP Change: Remains Classified

06/04/19 - Program Review

| Primary | Start Date | Fut End Date End Date | Service | Frq/Cyl/Minutes | Delivery Recommendation | School/Location Coordinating Service Provider |
|---------|------------|--------------------------|--|----------------------------------|------------------------------|---|
| CURREN | NT YEAR | | | | | |
| Yes | 09/05/2018 | 06/18/2019 | Ratio 12:1:1 Integrated Setting | 5/Weekly/150 | 12 students/1 teacher/1 aide | John F Kennedy Elementary/12:1:1 Classroom/OGDENSBURG CITY SD |
| | 09/05/2018 | 06/18/2019 | Speech | 5/Weekly/30 | Individual | Kennedy Elementary (PS)/Speech Classroom/OGDENSBURG CITY SD |
| | 09/05/2018 | 06/13/2018 | Individual Supplementary School Personnel | 5 times per week 150 minutes/ | | General Ed. & Special Ed. Classrooms |
| | 09/05/2018 | 06/18/2019 | Individual Supplementary School Personnel | 5 times per week 150 minutes/ | | General Ed. & Special Ed. Classrooms |

Minutes Eligible for classification of Other Health Impairment

Fall 2019 Recommendation:
Direct Consultant Teacher services 6 times per cycle for 30 minutes in the area of English Individual Speech services 6 times per cycle for 30 minutes

Individual Supplementary School Personnel services 6 times per cycle for 360 minutes

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Ogdensburg City School District

Board Action Sheet

Meeting 06/04/2019

Committee: Committee on Special Education

Gender Grade Disability

ID DOB Occupational Therapy Evaluation Physical Therapy Evaluation

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Ogdensburg City School District Board Action Sheet Meeting 06/04/2019

Total Meetings 7

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Ogdensburg City School District Board Action Sheet Meeting 06/04/2019

Committee: Committee on Preschool Special Education

| nnual Re | eview | | | | | | | | | |
|--------------------|---|---|---|--|---|---|--|--|--|--|
| tart Date | | | | | Outcome: Refer to Special Ec | lucation | | | | |
| art Date | Fut End Date Servi End Date | ce | | Frq/Cyl/Minu | ates Delivery Recommendation | School/Location Coordinating Service Provider | | | | |
| ETING 7/09/2019 | 08/19/2019 Spee | ech | | 2/Weekly/30 | Individual | Home Base - Preschool/Home Setting/COUNTY OF ST LAWRENCE | | | | |
| Minutes | Continue classification | on of Preschool S | tudent with a Disat | oility | | | | | | |
| | | | r week for 30 minu | tes | | | | | | |
| | | | | | | | | | | |
| | Refer to the Committee on Special Education | | | | | | | | | |
| nnual Re | 000077459 eview | 04/17/2014 | М | P | Preschool Student with a Disability Outcome: Refer to Special Ed | ducation | | | | |
| Minutes | Continue classification | on of Preschool S | tudent with a Disal | oility | | | | | | |
| | | | r week for 30 minu | tes | | | | | | |
| | 12 Month Extended None | Year Recommend | dation | | | | | | | |
| | Refer to the Commit | tee on Special Ed | ucation | | | | | | | |
| | 000077424 | 08/10/2014 | F | Р | Preschool Student with a Disability | x | | | | |
| 1 | Minutes Annual Re | Minutes Continue classification Recommendation (6 Individual Speech se 12 Month Extended Individual Speech se Refer to the Commit 000077459 Innual Review Minutes Continue classification Recommendation the Individual Speech se 12 Month Extended None Refer to the Commit | Minutes Continue classification of Preschool S Recommendation (6/18/19 - 6/26/19): Individual Speech services 3 times per 12 Month Extended Year Recommend Individual Speech services 2 times per Refer to the Committee on Special Education of Preschool S Recommendation through June 2019: Individual Speech services 2 times per 12 Month Extended Year Recomment None Refer to the Committee on Special Education of Preschool S Recommendation through June 2019: Individual Speech services 2 times per 12 Month Extended Year Recomment None Refer to the Committee on Special Education | Minutes Continue classification of Preschool Student with a Disate Recommendation (6/18/19 - 6/26/19): Individual Speech services 3 times per week for 30 minutes 12 Month Extended Year Recommendation (7/9/19 - 8/11 Individual Speech services 2 times per week for 30 minutes Refer to the Committee on Special Education 000077459 04/17/2014 Minutes Continue classification of Preschool Student with a Disate Recommendation through June 2019: Individual Speech services 2 times per week for 30 minutes 12 Month Extended Year Recommendation: None Refer to the Committee on Special Education 000077424 08/10/2014 F | Minutes Continue classification of Preschool Student with a Disability Recommendation (6/18/19 - 6/26/19); Individual Speech services 3 times per week for 30 minutes 12 Month Extended Year Recommendation (7/9/19 - 8/19/19); Individual Speech services 2 times per week for 30 minutes Refer to the Committee on Special Education 000077459 04/17/2014 M P Innual Review Minutes Continue classification of Preschool Student with a Disability Recommendation through June 2019; Individual Speech services 2 times per week for 30 minutes 12 Month Extended Year Recommendation: None Refer to the Committee on Special Education 000077424 08/10/2014 F P | Minutes Continue classification of Preschool Student with a Disability Recommendation (6/18/19 - 6/26/19): Individual Speech services 3 times per week for 30 minutes 12 Month Extended Year Recommendation (7/9/19 - 8/19/19): Individual Speech services 2 times per week for 30 minutes Refer to the Committee on Special Education 000077459 04/17/2014 M P Preschool Student with a Disability Annual Review Outcome: Refer to Special Education Minutes Continue classification of Preschool Student with a Disability Recommendation through June 2019 Individual Speech services 2 times per week for 30 minutes 12 Month Extended Year Recommendation None Refer to the Committee on Special Education 000077424 08/10/2014 F P Preschool Student with a Disability | | | | |

Board Action Sheet Meeting 06/04/2019

Committee: Committee on Preschool Special Education

| 06/04/19 - Annual Re | ID oview | DOB | Gender | Grade | Disability Outcome: Refer to Special Education | 12M th |
|----------------------|--|--|--|-------|---|---------------|
| <u>Minutes</u> | Continue classification Recommendation the Individual Speech set 12 Month Extended Individual Speech set Refer to the Committee. | rough June 2019; ervices 2 times per Year Recommend ervices 2 times per | week for 30 minu ation: week for 30 minu | | | |
| 06/04/19 - Annual Re | 000077151 eview | 02/01/2014 | F | P | Preschool Student with a Disability Outcome: Refer to Special Education | x |

Minutes Continue classification of Preschool Student with a Disability

Recommendation through June 2019.

District 12:1:1 integrated classroom placement 5 times per week for 150 minutes Indirect Teacher of Hearing Impairment Consult services 5 times per week for 60 minutes Individual Speech services 5 times per week for 30 minutes Individual Supplementary School Personnel services 5 times per week for 150 minutes

12 Month Extended Year Recommendation:
District 12:1:1 integrated classroom placement 5 times per week for 150 minutes Individual Speech services 3 times per week for 30 minutes

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

Refer to the Committee on Special Education

Ogdensburg City School District Board Action Sheet Meeting 06/04/2019

Total Meetings 4

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