Special Education Eligibility/Initial and Reevaluation Determination

Student Name: ___________________________ DOB: __________ ID#: _______ Date: ____________

A. Proceed through the flowchart until an eligibility determination is reached.

1. Does the student have one or more of the following types of disability?
   - Autism
   - Developmental delay
   - Intellectual
   - Sensory: Hearing, Vision, Deaf-Blind
   - Neurological
   - Emotional
   - Communication
   - Physical
   - Specific Learning
   - Health

   no

   yes

2. a) is the student making effective progress in school?
   (For reevaluations: Would the student continue to make progress in school without the provided special education services?)

   yes

   no

2. b) is the lack of progress a result of the student’s disability?

   yes

   no

2. c) does the student require specially designed instruction in order to make effective progress in school or does the student require related services in order to access the general curriculum?

   yes

   no

B. Answer this question for all students.

Is parent satisfied with school evaluation?

学生 is not eligible for Special Education but may be eligible for other services in other programs.

If yes, indicate disability type(s):

Stud, ient is not eligible for Special Education but may be eligible for accommodation(s) for disability(ies) under Section 504 of the Rehabilitation Act or may be eligible for other services in other programs.

Continue forward as previously discussed.

Discuss Extended Evaluation and rights to an Independent Educational Evaluation.

KEY EVALUATION FINDINGS
AND/OR NEXT STEPS
THE STUDENT IS ELIGIBLE FOR SPECIAL EDUCATION.