

**MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION  
OFFICE OF SPECIAL EDUCATION – COMPLIANCE  
MODEL FORMS REVISIONS  
JULY 31, 2015**

NAME OF FORM	UPDATE
Form D	<ol style="list-style-type: none"> <li>1. Update Part- 1 to reflect grade levels of each required state-wide assessments and to clarify information in notes.</li> <li>2. Create Part-2A to reflect the Grade-Level Assessments accommodations. Note that there will no longer be any Designated Supports as these have been combined with the Universal Tools available to all students.</li> <li>3. Create Part-2B to reflect the EOC accommodations changes. Note that there will no longer be any Designated Supports as these have been combined with the Universal Tools available to all students.</li> <li>4. Update Part-3 to allow for <b>ACT®</b> to make changes in the allowable accommodations later this fall and to clarify differences between the online and paper/pencil versions of the assessment.</li> <li>5. Update Part- 4 to clarify expectations for documenting MAP-A eligibility.</li> <li>6. Update Part-5 to match the changes in the WIDA accommodations.</li> </ol>
Form F	<ol style="list-style-type: none"> <li>1. Added the following description in the first paragraph   <p style="text-align: center;"><b><u>Differentiated Instruction</u></b> refers to adjustments in teaching methods or materials to accommodate each student's learning needs and preferences and is available for all students. These instructional strategies should <b><u>not</u></b> be documented on Form F.</p> </li> <li>2. Deleted to “Related Services” column under “Location”</li> <li>3. Added “<b>ALL</b> Classes” column under “Location”</li> </ol>
Form B	Change “addendum” to “amendment”
IEP form: 1. Present Level	<ol style="list-style-type: none"> <li>1. Add the following description under title “Present Level of Academic and Functional Performance”   <p>(Functional Performance refers to general ability and problem solving, attention and organization, communication, social skills, behavior, independent living, self-advocacy, learning style, vocational, employment)</p> </li> <li>2. Change wording of bullet # 6 to: <ul style="list-style-type: none"> <li>• A summary of formal and/or informal age appropriate transition assessments based on the student’s needs, preferences and interests (must be included no later than the first IEP to be in effect when the student turns age 16):</li> </ul> </li> </ol>

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<p>IEP form: 7. Regular Ed Participation</p>	<p>Add yellow highlighted statements and bold blue highlighted statements to clarify extent. Also delete red highlighted sections to clarify content :</p> <p><b>For Preschool:</b> Will all of this child’s special education and related services be provided with non-disabled peers in a regular education setting (designed primarily for children without disabilities)?</p> <p><input type="checkbox"/> Yes. <input type="checkbox"/> No. If no:</p> <p>a. To what extent will the child not receive special education and related services in a regular education setting? (minutes or % of special education and related service minutes on the IEP)_____</p> <p>b. Describe the reasons why the IEP team determined that provision of services in the regular education setting was not appropriate <b>for the child.</b></p> <p><b>For K-12:</b> The regular education environment <b>includes all academic instruction as well as meals, recess, assemblies, field trips, etc.</b> Will this student participate 100% of the time with non-disabled peers in the regular education environment?</p> <p><input type="checkbox"/> Yes.</p> <p><input type="checkbox"/> No. If no; <del>describe below to what extent the student will not participate and why full participation is not appropriate. _____ (child’s name) _____ will participate in regular education _____% of the time and special education _____% of time (must equal 100%). Full participation in regular education is not appropriate because _____</del></p> <p>a. To what extent will the child not participate in a regular education environment? (minutes or % of special education and related service minutes on the IEP in special education settings)_____</p> <p>b. Describe the reasons why the IEP team determined that provision of services in the regular education environment was not appropriate for the child.</p>
<p>Notice of Action</p>	<p>1. Add “initial eligibility for special education</p> <p>2. Divide “Description of Action” into actions requiring consent and action requiring prior written notice</p> <p>3. update webreply email address to <a href="mailto:secompliance@dese.mo.gov">secompliance@dese.mo.gov</a></p>
<p>Request for Consideration for Initial SPED Evaluation</p>	<p>Add highlighted statements In Section 2 for clarification:</p> <p><b>District Decision regarding the suspicion of a disability:</b></p> <p>Describe <b>all</b> factors considered: (e.g. attendance, grades, discipline history, second language influence, lack of instruction, medical concerns, etc.)</p> <p><b>Based upon the factors described above, the following decision is made:</b></p> <p><input type="checkbox"/> Disability is not suspected                      <input type="checkbox"/> Disability may exist and is suspected Complete Referral for Evaluation (page 2) based on <b>this</b> decision</p>

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Description of Areas to Be Assessed and Known Tests to be Used DOCUMENTATION FORM	<ol style="list-style-type: none"> <li>1. Update to include only the names of listed assessments, not the editions</li> <li>2. Add a section for required observation.</li> </ol>
First Steps Referral to ECSE Documentation Form	<p>Add highlighted statement to clarify “parent initial opt out and subsequent change of mind” impact on timelines:</p> <p><b>* If parent opts out of ECSE referral and subsequently changes mind PRIOR TO 90 days before child’s 3<sup>rd</sup> birthday, AND IF child is eligible, the IEP must still be in place BY CHILD’S 3<sup>rd</sup> BIRTHDAY.</b></p>
Student Invitation to a transition IEP meeting	<ol style="list-style-type: none"> <li>1. Change the word “activities” to “services” and reword the paragraph as follows: At this meeting we would like to talk with you about how you are doing in school, what you would like to do when you complete school, and what <b>activities services</b> your IEP should include. <b>These activities</b> All of these items will be considered when developing your IEP <del>will be added to your program</del> to help you prepare for the future, and <b>to</b> learn the skills that you will need as an adult to be successful in living, learning, and working after you complete school.</li> <li>2. Add a bullet to the student questions: <b>What education or training is needed for your job?</b></li> </ol>
Initial Evaluation Flow Chart - Parent	<ol style="list-style-type: none"> <li>1. Change the wording in the first red box as follows: If there is no reason to suspect a disability <del>and conduct a Review of Existing Data,</del> <b>do NOT conduct a Review of Existing Data, but do</b> provide the parent with a Notice of Action –Refused <u>within 30 calendar days</u> of parent referral.</li> <li>2. Add “written” in last green box on right side of page so it reads: Conduct Eligibility Determination Meeting <u>within 60 calendar days</u> of <b>written</b> receipt of consent for initial evaluation.</li> </ol>
Initial Evaluation Flow Chart - Agency	<p>Add “written” in last green box on right side of page so it reads:</p> <p>Conduct Eligibility Determination Meeting <u>within 60 calendar days</u> of <b>written</b> receipt of consent for initial evaluation</p>
Reevaluation Flow Chart	<ol style="list-style-type: none"> <li>1. After “additional data is needed, consent required” box, add another “or” and “Parent refused consent. Consider mediation or due process to obtain consent.”</li> <li>2. After “Current eligibility category continued” box, add “prior” to the “notify parent” box so it reads “Attach Red to prior evaluation report – this becomes most current evaluation for the student.”</li> </ol>

NAME OF FORM	UPDATE
In-State and Out-of-State Transfer Documentation Forms	Add new attachment to these two existing forms for documenting "Comparable Services"
Summary of Performance	<ol style="list-style-type: none"> <li>1. Update to include a summary of services provided by the IEP</li> <li>2. Update to include contact information for transition agencies / schools / etc. based on student's goals</li> </ol>
Authorization to attend IEP Meeting	Add place to record date of the IEP meeting; clarify wording of document
Evaluation Report	<ol style="list-style-type: none"> <li>1. Update the wording to clarify a "group of qualified professionals and the parent of the child" on pages 1 and 6</li> <li>2. Update the Team Participant page to clarify written agreement with SLD determination</li> </ol>
Notification of Meeting	Added a <input type="checkbox"/> in front of the LEA Representative in the list of participants invited to the IEP meeting