

1



SPECIAL EDUCATION: TRANSFER STUDENTS

Note:
You may want to have copies available as
we will be referring to the Department's
model forms
"Transfer: In-State Documentation Form"
and
"Transfer: Out-of-State Documentation Form"
during the webinar

July, 2014 Missouri Department of Elementary
and Secondary Education

2



SPECIAL EDUCATION: TRANSFER STUDENTS

Presented by
Special Education Compliance
Office of Special Education

July, 2014 Missouri Department of Elementary
and Secondary Education

Purpose of the Webinar

3

- Describe the process and compliance requirements
- Ensure a timely and seamless transfer from one school district to another for students with disabilities



Learning Outcomes

4

- Identify the procedures to have in place to identify students with disabilities immediately upon enrollment
- Know the steps in the transfer process
- Know how to use the Department's model forms for common transfer situations
- Know how to avoid common noncompliance issues associated with transfer students
- Access resources related to transfer procedures for students with disabilities

5

Transfer Students: Ensuring a smooth transition to their new school . .



Initial Contact / Enrollment Paperwork

6

- Train staff who process new enrollees to the district
 - “Trigger” words
- Check enrollment forms
 - Common language



Gaining information

7

Records

Receiving School: Request within two (2) days of enrollment

Sending School: Send within five (5) business days of receiving request for records



Interview

Receiving School: Talk with parents and staff from sending school

Sending School: Share information about student's evaluation and IEP



INTERVIEW INFORMATION DOCUMENTATION FORM

Student Name:	Date of Enrollment (m/d/y):
Name of Sending District:	Name of School Building:

1. Interview with Parent/Guardian/Student (18+)

Date of Interview:	Method: <input type="checkbox"/> Phone (____)-_____ <input type="checkbox"/> Inperson <input type="checkbox"/> Other: _____
--------------------	--

Name of parent/guardian/student (18+) interviewed :

Name/ Role of LEA personnel conducting interview:

Evaluation Information:

Has the student been found eligible for special education?

- No – STOP.
 Yes, complete information below

Date (m/d/y) of current evaluation: ____/____/____

Category of eligibility:

- Autism
 Deaf/Blindness
 Emotionally Disturbance
 Hearing Impaired/Deafness
 Intellectual Disability
 Multiple Disabilities
 Orthopedic Impairment
 Other Health Impaired

IEP Information

Does the student have current IEP?

- No – STOP.
 Yes, complete information below

Date (m/d/y) of current IEP: ____/____/____

Brief summary of Present Level of Performance:

Summary of Goals on the IEP:

Special Education/Related Services:

Description	Amount	Frequency	Location

8

9

The Transfer Process



Legal Requirements

10

- IDEA (300.323)
- MO State Plan for Special Education (Section IV)
- SPED Compliance: Program Review Standards and Indicators
 - In-State (500.10 – 500.290)
 - Out-of-State (550.10 – 550.270)



Beginning the Transfer Process

11

Is there reason to suspect that the new student is a student with a disability who was receiving or had previously received special education services based on enrollment paperwork, interviews and/or student records?

Yes



No



Is the student transferring from In-State or Out-of-State? Be sure to use the correct form so that you follow the required compliance procedures for the type of transfer of your student

Enroll the student in general education following district policies

Plan to Provide FAPE

12

IDEA requires that students with IEP's receive FAPE

IDEA requires that, if an IEP is received at enrollment and there is a delay in accepting or rejecting that IEP OR if the IEP is rejected and there is a delay in developing a new annual IEP, the public agency in consultation with the parent must provide FAPE to the child including services comparable to those in the previous IEP

Decisions about the IEP

13



**Accept = Implement
EXACTLY**

**NO IEP
Amendment
to Transfer
IEPs**



**Reject = provide
comparable services
until new annual IEP
is developed**



**NO
Interim
IEP**

MO STATE SAMPLE

<District Name>
IDEA IN-STATE Transfer Student
DOCUMENTATION FORM

REFER TO THE SPECIAL EDUCATION PROGRAM REVIEW: COMPLIANCE STANDARDS AND INDICATORS
 MANUAL, TRANSFER PROCEDURES SECTION, FOR A COMPLETE EXPLANATION OF REQUIRED
 DOCUMENTATION.

Student Name	Date of Birth	Grade
Date of Enrollment (m/d/y)	Date of student's first day of school attendance or first day of school if transfer occurs prior to the beginning of school year (m/d/y):	

Previous School

Name of School District	Building	
Address		
City	State	Zip
Phone	Fax	

Records Request: State and federal regulations require that when a student with a disability transfers from one school in the state to another school district in Missouri, the new school in which the child enrolls shall

14

Records Request: *State and federal regulations require that when a student with a disability transfers from one school in the state to another school district in Missouri, the new school in which the child enrolls shall take reasonable steps to promptly obtain the child's records, including the IEP and supporting documents and any other records relating to the provision of special education or related services to the child, from the previous school. The previous school in which the child was enrolled is required to take reasonable steps to promptly respond to such request from the new school.*

The Missouri Safe Schools Act requires receiving school districts to request records within two (2) business days of enrollment. Sending Missouri districts are required to send records within five (5) business days of receiving a request for records.

Records Received		
Evaluation Report	Requested (m/d/y)	Received (m/d/y)
IEP	Requested (m/d/y)	Received (m/d/y)
Other:	Requested (m/d/y)	Received (m/d/y)

Action Taken by LEA Personnel as a Result of Records Received:

No evaluation report and no IEP received, go to Section 2.

Evaluation report received, but no IEP, go to Section 3.

IEP received, but no evaluation report, go to Section 4.

Both evaluation report and IEP received, go to Section 5.

15 Updated July, 2014 Page 1

16

Transfer Scenarios



No Evaluation Report and No IEP

17

Did a review of information on enrollment form indicate the student was receiving or had previously received special education services?

Yes  No 

Did interviews indicate there is any reason to suspect that the student has a disability?

Yes  No 

No Evaluation Report and No IEP (In-State Transfer)

18

In-State

- Provide comparable services
- If evaluation report is received within 30 days of enrollment
 - Review and determine to Accept or Reject
 - If Accepted, convene IEP team to develop annual IEP
 - If Rejected, initiate reevaluation and proceed as noted below
 - If evaluation report is not received within 30 days of enrollment, initiate reevaluation
 - If eligible, convene IEP team to develop annual IEP
 - If ineligible, provide Notice of Action to parents



SECTION 2: NO EVALUATION REPORT AND NO IEP RECEIVED AT ENROLLMENT	
<input type="checkbox"/> Did review of information on enrollment form indicate that the child was receiving or had previously received Special Education Services? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> From interviews, is there any reason to <u>suspect</u> that the child is a child with a disability under IDEA? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Attach the Interview Documentation Form(s): <input type="checkbox"/> Parent /Guardian / Student Interview (age 18+) <input type="checkbox"/> Officials of Sending LEA	
DECISION: <input type="checkbox"/> NO reason to suspect the child has a disability. STOP—Place child in regular education. <input type="checkbox"/> YES, there is reason to suspect the child has a disability under IDEA—the LEA must provide comparable services based on interviews until eligibility determination can be made. Proceed below.	
Name/role of individual(s) making decision: _____ Date of Decisions (m/d/y) ____/____/____	
Name	Role
Name	Role
Name	Role
SUBSECTION 2a:	
<input type="checkbox"/> If a current evaluation report is received within 30 days of enrollment: <input type="checkbox"/> Complete Section 3	
<input type="checkbox"/> If a current evaluation report is NOT received <u>within 30 days</u> of enrollment: <input type="checkbox"/> Documentation is present that reevaluation procedures were initiated on (m/d/y) ____/____/____ Was the child determined eligible? Date of eligibility determination: (m/d/y) ____/____/____ <input type="checkbox"/> Yes <input type="radio"/> IEP team convened within 30 days of eligibility determination to develop an IEP. Date of IEP meeting: (m/d/y) ____/____/____ <input type="checkbox"/> No <input type="radio"/> Parent provided with prior written Notice of Action for Ineligibility/Change of Placement and child exited from services.	

19

No Evaluation Report and No IEP (Out-of-State Transfer)

20

- **Out-of-State**
 - **MAY** provide comparable services but not required unless there is sufficient reason to suspect a disability
 - Initiate **initial** evaluation
 - If eligible, convene IEP team to develop annual IEP
 - If ineligible, provide Notice of Action to parents



SECTION 2: NO EVALUATION REPORT AND NO IEP RECEIVED AT ENROLLMENT	
<input type="checkbox"/> Did review of information on enrollment form indicate that the child was receiving or had previously received Special Education Services? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> From interviews, is there any reason to suspect that the child is a child with a disability under IDEA? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Attach the Interview Documentation Form(s) <input type="checkbox"/> Parent/Guardian/ Student Interview (age 18+) <input type="checkbox"/> Officials of Sending LEA	
DECISION: <input type="checkbox"/> NO reason to suspect the child has a disability. STOP—Place child in regular education. <input type="checkbox"/> YES, there is reason to suspect the child has a disability under IDEA. Proceed below.	
Name/role of individual(s) making decision: _____ Date of Decisions (m/d/y) ____/____/____	
Name	Role
Name	Role
Name	Role
SUBSECTION 2a:	
<input type="checkbox"/> If the prior LEA confirms an IEP for the student, the new LEA provides comparable services based on interview information as there is sufficient reason to suspect the child has a disability until such time that initial eligibility in Missouri can be determined and an IEP developed, if the child is eligible.	
<input type="checkbox"/> Documentation is present that Initial Evaluation procedures were initiated on (m/d/y) ____/____/____	
Was the child determined eligible? Date of eligibility determination: (m/d/y) ____/____/____	
<input type="checkbox"/> Yes <ul style="list-style-type: none"> <input type="radio"/> IEP team convened within 30 days of eligibility determination to develop an IEP. Date of IEP meeting: (m/d/y) ____/____/____ <input type="radio"/> Parent provided with prior written Notice of Action for Initial Services. 	
<input type="checkbox"/> No <ul style="list-style-type: none"> <input type="radio"/> Parent provided with prior written Notice of Action for Ineligibility/Change of Placement and child exited from services. 	
SECTION 3: Evaluation Report Received, NO IEP received at enrollment	
EVALUATION REPORT	

Evaluation Report Received, No IEP

22

Is the evaluation report compliant and does it contain all information to determine eligibility in Missouri?

Reject
↓
Accept
→

In-State:
Initiate reevaluation
Must provide comparable services until eligibility is determined

Out-of-State:
Initiate initial evaluation
May provide comparable services until eligibility is determined

In-State:
Develop annual IEP ASAP
Must provide comparable services if any delay

Out-of-State:
Develop annual IEP ASAP

SECTION 3: Evaluation Report Received, NO IEP received at enrollment

EVALUATION REPORT
The public agency reviewed the Evaluation Report to determine whether to accept or reject it.

Date evaluation report reviewed and decision made regarding eligibility (m/d/y) ____/____/____

DECISION:

Accepted
Acceptance indicates that the evaluation report is compliant and includes all information necessary to determine eligibility in the State of Missouri. Proceed to Section 3a below.

Rejected
Reevaluation must be initiated to determine eligibility. Proceed to Section 3b below:

Name/role of individual(s) making decision:

Name	Role
Name	Role
Name	Role

SUBSECTION 3a:

Conduct interviews to determine services (attach Interview Form)
 Parent/Guardian/ Student Interview (age 18+)
 Officials of Sending School

Conduct an IEP meeting to develop an annual IEP for the student
 IEP developed on ____/____/____
Was there a delay conducting the IEP meeting or determining acceptance of the evaluation report?
o If Yes – Public agency, in consultation with the parent, provided FAPE to the child, including services comparable to those described in the previous IEP, until such time as the public agency could adopt the previous IEP or convene an IEP team meeting to develop a new IEP that is consistent with Federal and State law and regulations.

SUBSECTION 3b:

Conduct interviews to determine services (attach Interview Form)
 Parent/Guardian Interview
 Student Interview (age 18+)
 Officials of Sending School

Provide comparable services until eligibility can be determined.

Initiate reevaluation for the student. Documentation is present that reevaluation was initiated on ____/____/____
Was the child determined eligible? Date of eligibility determination: (m/d/y) ____/____/____
 Yes
o IEP team convened within 30 days of eligibility determination to develop an IEP. Date of IEP meeting: (m/d/y) ____/____/____
 No
o Parent provided with prior written Notice of Action for Ineligibility/Change of Placement and child exited from services.

23

SECTION 3: Evaluation Report Received, NO IEP received at enrollment

EVALUATION REPORT
 Immediately upon enrollment (if after beginning of school year)
OR
 If enrollment is prior to the beginning of the school year, by the beginning of the school year, the public agency reviewed the evaluation report to determine whether to accept or reject it.

Date evaluation report reviewed and decision made regarding eligibility (m/d/y) ____/____/____

DECISION:

Accepted
Acceptance indicates that the evaluation report is compliant and includes all information necessary to determine eligibility in the State of Missouri. Proceed to Section 3a below.

Rejected
Initial Evaluation must be initiated to determine eligibility. Proceed to Section 3b below:

Name/role of individual(s) making decision:

Name	Role
Name	Role

SUBSECTION 3a:

Conduct interviews to determine services (attach Interview Form)
 Parent/Guardian / Student Interview (age 18+)
 Officials of Sending School

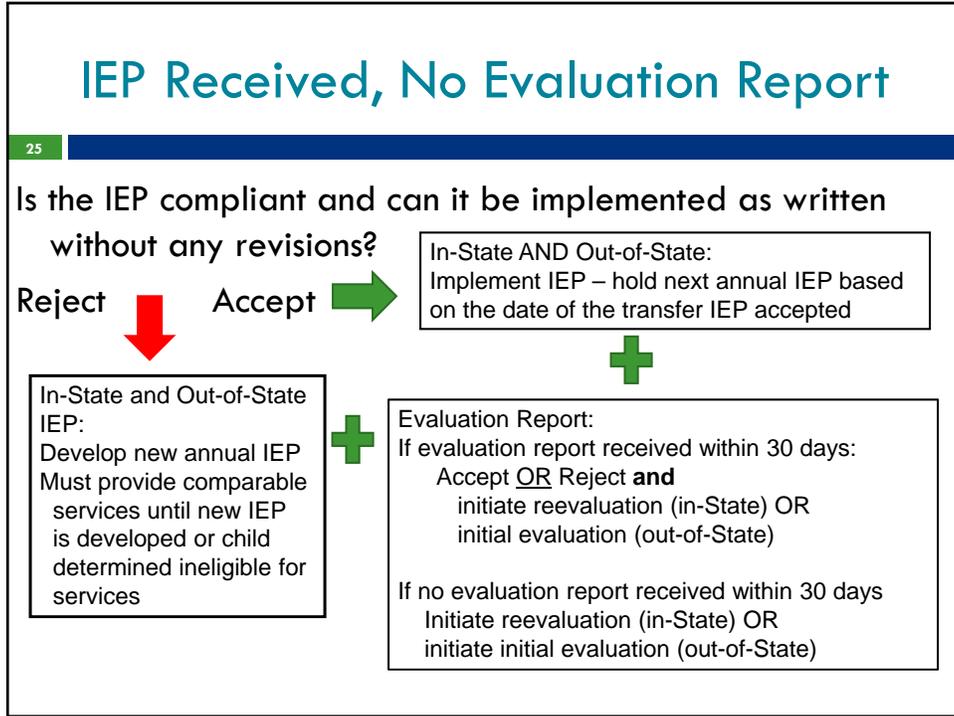
Conduct an IEP meeting to develop an annual IEP for the student
 IEP developed on ____/____/____
Was there a delay conducting the IEP meeting or determining acceptance of the evaluation report?
o If Yes – Public agency, in consultation with the parent, provided FAPE to the child, including services comparable to those described in the previous IEP, until such time as the public agency could adopt the previous IEP or convene an IEP team meeting to develop a new IEP that is consistent with Federal and State law and regulations.

SUBSECTION 3b:

If the prior LEA confirms an IEP for the student, the new LEA provides comparable services based on interview information as there is sufficient reason to suspect the child has a disability until such time that initial eligibility in Missouri can be determined and an IEP developed, if the child is eligible.

Initiate Initial Evaluation for the student. Documentation is present that evaluation was initiated on ____/____/____
Was the child determined eligible? Date of eligibility determination: (m/d/y) ____/____/____
 Yes
o IEP team convened within 30 days of eligibility determination to develop an IEP. Date of IEP meeting: (m/d/y) ____/____/____
o Parent provided with prior written Notice of Action for Initial Services.
 No
o Parent provided with prior written Notice of Action for Ineligibility/Change of Placement and child exited from services.

24



SECTION 4: IEP received, NO Evaluation Report received at enrollment

IEP
The public agency reviewed the IEP to determine whether to accept or reject it.

Date IEP reviewed and decision made to accept/reject: (m/d/y) ____/____/____

DECISION:

Accepted the transferred IEP – IEP Implemented on ____/____/____. Proceed to Section 4a.
Acceptance indicates the IEP is compliant with Missouri Regulations and can be implemented as written without any revisions.

Rejected the transferred IEP. Proceed to Section 4b.

Name Role of Individual(s) Making Decisions	
Name	Role
Name	Role
Name	Role

SUBSECTION 4a:

Was there a delay in determining acceptance of the IEP?

No, the IEP is implemented as written.

Yes, the Public Agency, in consultation with the parent, provided FAPE to the child, including services comparable to those described in the previous IEP, until such time as the public agency could adopt the previous IEP or convene an IEP team meeting to develop a new IEP that is consistent with Federal and State law and regulations. Date of IEP meeting to review/revise the IEP (m/d/y) ____/____/____

SECTION 4b:

The Public Agency, in consultation with the parent, provided FAPE to the child, including services comparable to those described in the previous IEP, until such time as the public agency could adopt the previous IEP or convene an IEP team meeting to develop a new IEP that is consistent with Federal and State law and regulations.

Date of IEP meeting to review/revise the IEP (m/d/y) ____/____/____

Was Evaluation Report received within 30 days of enrollment?

Yes, Date Evaluation Report Received (m/d/y) ____/____/____

No, Date Evaluation Report Received (m/d/y) ____/____/____

DECISION:

Accepted*
*Acceptance indicates that the evaluation report is compliant and includes all information necessary to determine eligibility in the State of Missouri.

Rejected, reevaluation must be initiated to determine eligibility*

No, reevaluation must be initiated to determine eligibility*

*Reevaluation initiated to determine eligibility due to rejection of the Evaluation Report OR not receiving an Evaluation Report.

Initiate reevaluation for the student. Documentation is present that reevaluation was initiated on ____/____/____

Was the child determined eligible as a result of the reevaluation?
Date of eligibility determination: (m/d/y) ____/____/____

26

SECTION 4: IEP received, NO Evaluation Report received at enrollment

IEP
The public agency reviewed the IEP to determine whether to accept or reject it.
Date IEP reviewed and decision made to accept or reject: (m/d/y) ____/____/____

DECISION:
 Accepted the transferred IEP – IEP Implemented on ____/____/____. Proceed to Section 4a below.
 Acceptance indicates the IEP is compliant according to Missouri Regulations and can be implemented as written without any revisions.
 Rejected the transferred IEP. Proceed to Section 4b below.

Name	Role of Individual(s) Making Decisions	Role

SUBSECTION 4a:
Was there a delay in determining acceptance of the IEP?
 No, the IEP is implemented as written.
 Yes, the Public Agency, in consultation with the parent, provided FAPE to the child, including services comparable to those described in the previous IEP, until such time as the public agency could adopt the previous IEP or convene an IEP team meeting to develop a new IEP that is consistent with Federal and State law and regulations. Date of IEP meeting to review/revise the IEP (m/d/y) ____/____/____

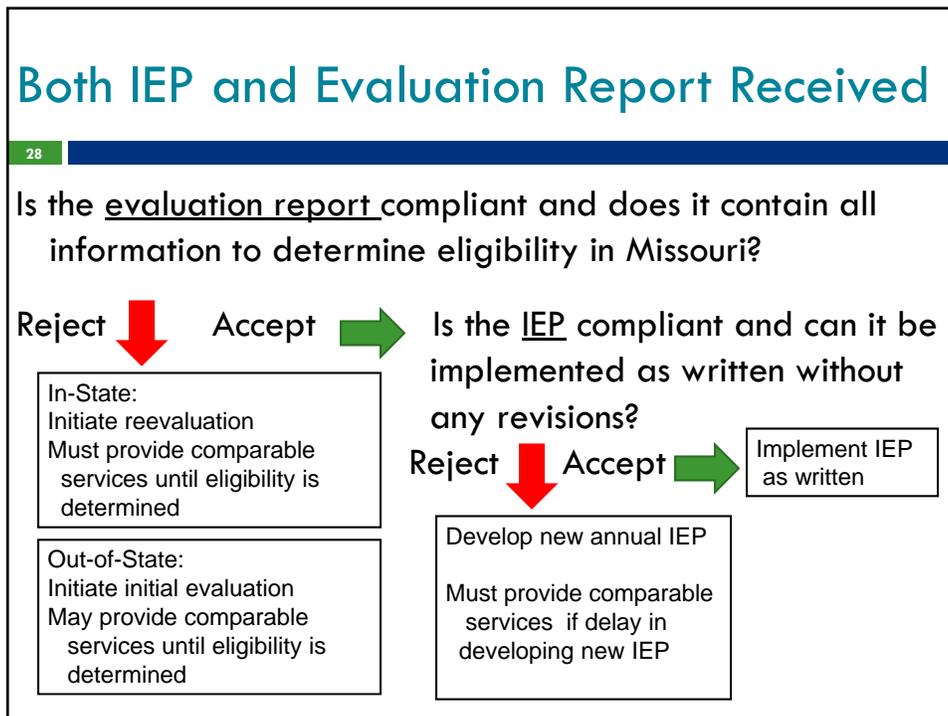
SUBSECTION 4b:
 The Public Agency, in consultation with the parent, provided FAPE to the child, including services comparable to those described in the rejected IEP, until such time as the public agency convenes an IEP team meeting to develop a new IEP that is consistent with Federal and State law and regulations.
 Date of IEP meeting to review/revise the IEP (m/d/y) ____/____/____

Was Evaluation Report received within 30 days of enrollment?
 Yes, Date Evaluation Report Received (m/d/y) ____/____/____
 Date Evaluation Report Reviewed (m/d/y) ____/____/____

DECISION:
 Accepted
 Acceptance indicates that the evaluation report is compliant and includes all information necessary to determine eligibility in the State of Missouri.
 Rejected, reevaluation must be initiated to determine eligibility**

No, Initial Evaluation must be initiated to determine eligibility*

*Initial Evaluation initiated to determine eligibility based on Missouri standards due to rejection of the Evaluation Report OR not receiving an Evaluation Report.
 Initiate Initial Evaluation for the student. Documentation is present that Initial Evaluation was initiated on ____/____/____
 Was the child determined eligible? Date of eligibility determination: (m/d/y) ____/____/____
 Yes



SECTION 5: IEP And Evaluation Report Received At Enrollment
EVALUATION REPORT
The public agency reviewed the Evaluation Report to determine whether to accept or reject it.

Date evaluation report reviewed and decision made regarding eligibility (m/d/y) ____/____/____

DECISION:

Accepted the transferred Evaluation Report. Acceptance indicates that the evaluation report is compliant and includes all information necessary to determine eligibility in the State of Missouri. Proceed to review of the transfer IEP below.

Rejected the transferred Evaluation Report. A reevaluation must be initiated to determine eligibility. Provide comparable services. Reevaluation initiated on (m/d/y) ____/____/____

Was the child determined eligible? Eligibility determined on (m/d/y) ____/____/____

Yes

- IEP team convened within 30 days of eligibility determination to develop an IEP

No

- Parent provided with prior written Notice of Action for Ineligibility/Change of Placement and child exited from services

Name/Role of Individual(s) Making Decision:

Name	Role
Name	Role
Name	Role

IEP
The public agency reviewed the IEP to determine whether to accept or reject it.

Date IEP reviewed and decision made to accept or reject: (m/d/y) ____/____/____

DECISION:

Accepted. Acceptance indicates the IEP is compliant according to Missouri Regulations and can be implemented as ~~written~~ without any revisions the transferred IEP. IEP Implemented on ____/____/____

Rejected the transferred IEP. The Public Agency, in consultation with the parent, provided FAPE to the child, including services comparable to those described in the previous IEP, until such time as the public agency could adopt the previous IEP or convene an IEP team meeting to develop a new IEP that is consistent with Federal and State law and regulations. Date of IEP meeting to review/revise the IEP (m/d/y) ____/____/____

Name/Role of Individual(s) Making Decision:

Name	Role
------	------

29

SECTION 5: IEP And Evaluation Report Received At Enrollment
EVALUATION REPORT
The public agency reviewed the Evaluation Report to determine whether to accept or reject it.

Date evaluation report reviewed and decision made regarding eligibility (m/d/y) ____/____/____

DECISION:

Accepted. Acceptance indicates that the evaluation report is compliant and includes all information necessary to determine eligibility in the State of Missouri. Proceed to review of the transfer IEP below.

Rejected. An initial evaluation must be initiated to determine eligibility. Initial Evaluation initiated on (m/d/y) ____/____/____

The LEA provides comparable services based on the transfer IEP, until such time that initial eligibility in Missouri can be determined and an IEP developed, if the child is eligible.

Was the child determined eligible? Eligibility determined on (m/d/y) ____/____/____

Yes

- o IEP team convened within 30 days of eligibility determination to review/revise the IEP, if needed. Date of IEP meeting: (m/d/y) ____/____/____
- o Parent provided with prior written Notice of Action for Initial Services.

No

- o Parent provided with prior written Notice of Action for Ineligibility/Change of Placement and child exited from services

Name/Role of Individual(s) Making Decision:

Name	Role
Name	Role
Name	Role

IEP
The public agency reviewed the IEP to determine whether to accept or reject it.

Date IEP reviewed and decision made to accept or reject: (m/d/y) ____/____/____

DECISION:

Accepted. Acceptance indicates the IEP is compliant according to Missouri Regulations and can be implemented as ~~written~~ without any revisions the transferred IEP. IEP Implemented on ____/____/____

Rejected the transferred IEP. The Public Agency, in consultation with the parent, provided FAPE to the child.

30

Special Situations to Keep in Mind. . .

31

- Highly Mobile Students
- Transfers between unaccredited and accredited LEAs
- Transfers of students in the process of being evaluated for special education



Highly Mobile Students

32



Includes children from military families, migrant children, children in foster care and children who are homeless

Follow the same transfer procedures as for all students



Interviews are key for getting information quickly

Unaccredited to Accredited LEA

33

- MO Supreme Court decision in June 2013
- In-State transfer procedures are followed
 - Students with IEPS must continue to receive special education and related services with no delay during the transfer process
- Refer to the Department website for current guidance at http://www.dese.mo.gov/documents/Transfer_Guidance.pdf



Student transfers with evaluation for special education “in progress”

34

Is there reason to suspect that the new student is a student with a disability who was receiving or had previously received special education services based on enrollment paperwork, interviews and/or student records?

No



Enroll the student in general education following district policies. However, there IS reason to suspect this may be a student with a disability in need of special education and related services based upon transfer information. This triggers the LEA's evaluation process.



Proceed with either an Agency or Parent referral for an initial special education evaluation. The RED should include information from the sending school's incomplete initial evaluation which can expedite the evaluation process.



35

Common Noncompliance Issues



Child Complaint Findings to Avoid

36

- ❑ Failure to identify the student upon enrollment resulting in a delay of provision of FAPE
- ❑ Failure to provide comparable services
- ❑ Failure to implement the IEP
 - Accept the IEP from the previous school but not implementing ALL of it
 - Amending the Transfer IEP



37

Know Your Resources



Department Website

38

A screenshot of the Missouri Department of Elementary & Secondary Education website. The page features a dark blue header with the department's logo and name. Below the header is a navigation menu with links for Home, About, Administrators, Educators, Parents & Students, Adults & Community, and School Data. The main content area is divided into several sections: "Learn More" with a list of topics including Assessment, Guidance & Counseling, Librarians, Curriculum, Educator Standards, Top 10 by 20, Career and Technical Education, Professional Development, and Special Education; "Teacher Evaluation" with a "Certification" sub-section; "Missouri Learning Standards" with an "Educator Preparation" sub-section; and "Popular Services" with a list of services including Educator Assessment, Fingerprint / Background Status, Personal / Education Information, Teacher Appreciation, and Web Applications. A green arrow points down to the search bar in the top right corner, and a red arrow points to the "Special Education" link in the "Learn More" section. At the bottom of the page, there is a banner image showing a young boy and a woman looking at a book together.

Special Education Homepage

39

Missouri DEPARTMENT OF ELEMENTARY & SECONDARY EDUCATION

MO.gov Governor Jay Nixon Find an Agency Online Services Search

Home About Administrators Educators Parents & Students Adults & Community School Data

Special Education

Home

Within the Division of Learning Services, the Office of Special Education administers state and federal funds to support services for students and adults with disabilities. This office also oversees the operation of three school systems administered by the State Board of Education. These are the **Missouri School for the Blind**, the **Missouri School for the Deaf** and the **Missouri Schools for Severely Disabled**. Through their outreach programs and consulting services, these school systems assist local school personnel and families throughout the state in meeting the needs of children with disabilities.

The Office of Special Education Consists of the following sections:

First Steps (Link to 3-21) This section works with other state and local agencies to coordinate the annual First Steps

Quick Links

- Office of Special Education Organizational Chart
- Special Education Data
- Special Education Finance
- State Plans for Special Education

Special Education

- News and Updates
- Advisory Panels
- Compliance
- Due Process/Child Complaint
- Early Childhood Special Ed.
- Effective Practices
- First Steps
- Program Monitoring
- Sheltered Workshops
- State Performance Plan
- Three-Tiered Models of Intervention
- Missouri School for the Blind

Compliance Links

40

students (ages 3-21) with disabilities.

Compliance: This section monitors special education programs for students with disabilities ages 3-21, in all public schools and approves private agencies to serve students enrolled in public schools. The section also conducts Child Complaint investigations.

Sheltered Workshops: Sheltered workshops provide employment for adults with disabilities. The Office of Special Education provides financial and technical support for all approved sheltered workshops in the state.

Compliance Effective Practices First Steps Sheltered Workshops

- Approved Private Agency
- Due Process/Child Complaints
- Educational Surrogate
- FAQS
- Individualized Education Program (IEP)
- General Special Education Guidance
- Laws and Regulations
- Postsecondary Transition
- Private & Home School
- Program Monitoring/IMACS
- Special Education Forms
- Speech Implementer

Administrative Memos

Webinars

Web Applications

Contact Information

Special Education
 Phone: 573-751-5739
 Fax: 573-526-4404
 speialeducation@dese.mo.gov

Editorial Section
 Special Education

Special Education Compliance Program Review Standards and Indicators Manual

41

Special Education Compliance Program Review Standards and Indicators



Missouri Department of Elementary and Secondary Education
Office of Special Education

Revised July 2014

Compliance Staff

Karen Allan, Director, Special Education Compliance Parts B

Phone: 573-751-0699, **Fax:** 573-526-5946 **Web Inquiries:** secompliance@dese.mo.gov

42

Part B - Ages 3-21

- ❑ Nancy Thomas, Assistant Director
- ❑ Dave Gerber, Supervisor
- ❑ Samantha Marsicovetere, Supervisor
- ❑ Rick Lewis, Supervisor
- ❑ Vacant, Supervisor
- ❑ Vacant, Supervisor
- ❑ Jennifer Moreland, Supervisor
- ❑ Margaret Wimer, Program Analyst

Educational Surrogate Program IMACS, Web, and Data Technical Assistance

- ❑ Sandy Kliethermes, Program Supervisor
- ❑ Margaret Wimer, Program Analyst

Part C - Ages Birth to 3

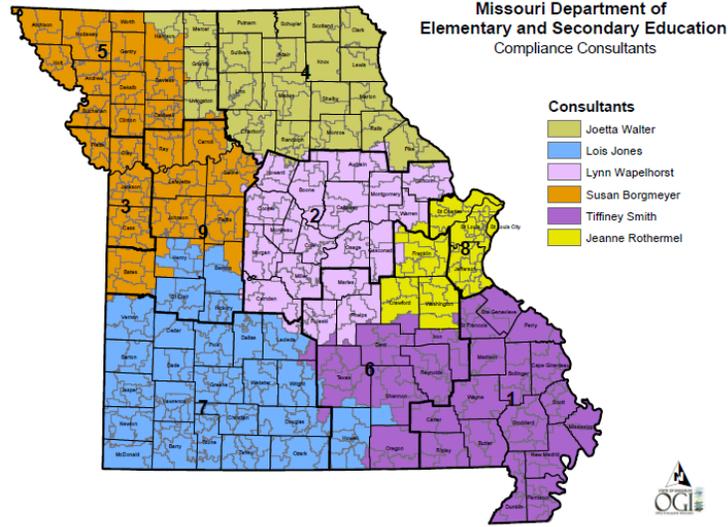
- ❑ Pam Thomas, Coordinator
- ❑ Pam Schroeder, Assistant Director
- ❑ Sara Massman, Supervisor
- ❑ Margaret Wimer, Program Analyst

Complaint System

- **Child Complaints**
 - ❑ Pam Schroeder, Assistant Director
 - ❑ Nancy Thomas, Assistant Director
 - ❑ Jennifer Moreland, Supervisor
 - ❑ Wanda Allen, Legal Assistant
- **Due Process**
 - ❑ Karen Allan, Director
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RPDC- Compliance Consultants

43



RPDC Compliance Consultants

44

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Thank you for participating!

