

PINELLAS COUNTY SCHOOLS
EXCEPTIONAL STUDENT EDUCATION (ESE) DEPARTMENT
PRIOR WRITTEN NOTICE

_____ of _____

Student Name:	Student Number:	Meeting Date:
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INELIGIBILITY

The Eligibility Determination Committee determined your child ineligible for the Exceptional Student Education Program(s) indicated on the enclosed Eligibility Determination Staffing Form.

This decision is based on review of your child's performance by the Eligibility Determination Committee. The factors relevant to the proposal indicated on the enclosed Eligibility Determination Staffing form and the enclosed Eligibility Criteria Indicators form(s) were reviewed. The option of determining your child eligible was considered, but rejected as your child does not meet eligibility criteria as documented on the enclosed Eligibility Determination Staffing form.

CHANGE IN ELIGIBILITY

In order to meet the educational needs of your child, the Eligibility Determination Committee proposed the change(s) in your child's eligibility for exceptional student education program(s) listed on the enclosed Eligibility Determination Staffing form. This change in eligibility may result in a change in ESE services and/or Least Restrictive Environment (LRE) as determined by the IEP team.

Unless dismissal from all exceptional education programs has been recommended, an Individual Education Plan (IEP)/Services Plan (SP) has been developed to meet your child's educational needs. The services included in your child's IEP/SP are designed to provide him/her with a free, appropriate public education. Your child's IEP/SP includes determination of the LRE in which services will be provided. If your child will receive services apart from his/her nondisabled peers, the IEP/SP includes an explanation of why that is necessary.

If your child was determined eligible for the gifted program only, an Education Plan (EP) has been developed. The services recommended in the EP were selected to meet his/her needs.

Continuation of your child's current eligibility without modification was an option considered for your child. This option was rejected as your child is in need of a change in eligibility. Refer to the enclosed Eligibility Criteria Indicators and/or Team Summary. If dismissal from a program is proposed, the option of continuing in the program was rejected as your child's performance demonstrates that she/he no longer needs the program and/or that she/he is no longer eligible for the program.

NO CHANGE IN ELIGIBILITY

The Eligibility Determination Committee determined that there is no change in your child's Exceptional Student Education (ESE) program(s) as indicated on the enclosed Eligibility Determination Staffing form. The option of change in eligibility was considered, but rejected as your child is not in need of change in eligibility.

INITIAL ELIGIBILITY

The Eligibility Determination Committee determined your child eligible for the Exceptional Student Education (ESE) program(s) indicated on the enclosed Eligibility Determination Staffing form.

An Individual Education Plan (IEP)/Services Plan (SP) has been developed to meet your child's educational needs. The services included in your child's IEP are designed to provide him/her with a free, appropriate public education. Your child's IEP/SP includes the determination of the Least Restrictive Environment (LRE) in which services will be provided. If your child will receive services apart from his/her nondisabled peers, the IEP/SP also includes an explanation of why that is necessary. The placement options which were not selected were rejected because they did not provide the least restrictive environment with needed services for your child.

If your child was determined eligible for the gifted program only, an Education Plan (EP) has been developed. The services recommended on the EP were selected to meet his/her educational needs. Other services were not recommended as they were not appropriate in meeting your child's needs.

CONSENT FOR INITIAL PLACEMENT: We must have your consent before your child can receive exceptional education services. Please check the box to indicate your decision, sign and date the form.

YES, I consent to the proposed educational placement. I have received and understand the Procedural Safeguards. I understand that I will receive prior written notice of any proposal to change my child's eligibility or exceptional education placement

NO, I do not consent to the proposed educational placement. I have received and understand the Procedural Safeguards.

Signature of Parent, Guardian or Surrogate Parent

Date