



HIGH PLAINS EDUCATIONAL COOPERATIVE

621 E. Oklahoma

“High Plains Educational Cooperative will assist and support the member districts in providing educational services which will maximize opportunities for all children to live, learn, and work in society.” *HPEC Mission Statement*

Ulysses, KS 67880
620-356-5577

PRIOR WRITTEN NOTICE
for
A. IDENTIFICATION, B. SPECIAL EDUCATION AND RELATED SERVICES,
C. EDUCATIONAL PLACEMENT, D. CHANGE IN SERVICES,
E. CHANGE IN PLACEMENT, AND F. REQUEST FOR CONSENT

DATE _____ **ADDRESS** _____

TO _____ **ON BEHALF OF** _____
(Parent/Legal Educational Decision Maker) (Student)

We met to review the evaluation/assessment data on your child, including any evaluations or information you provided, current classroom-based assessments and observations, and teacher or other staff observations to determine, with your input:

- Whether your child was eligible for special education
- Special education and related services needed by your child
- The appropriate educational placement to provide special education and related services identified in your child’s Individual Education Program (IEP)
- Any additions, changes or modifications to the special education and related services or educational placement that are needed to enable your child to meet the measurable annual goals set in the IEP and to participate, as appropriate, in the general curriculum.

To the maximum extent appropriate, your child is to be educated with other children in the general education classroom. Your child shall be removed from the general educational environment only when the nature or severity of his/her needs are such that education in general education classes, with support services, cannot be achieved satisfactorily. If services are not to be provided in the general education classroom, the reasons for that are given below, along with the results of our meeting.

A. IDENTIFICATION/ ELIGIBILITY (Parental Consent Not Required)

YOUR CHILD IS ELIGIBLE FOR SPECIAL EDUCATION

Your child meets the criteria as a child with an exceptionality

and

Special education services are necessary to enable your child to receive educational benefits in accordance with his/her abilities or capabilities

YOUR CHILD IS NOT ELIGIBLE FOR SPECIAL EDUCATION

Your child does not meet the criteria as a child with an exceptionality.

or

Special education services are not necessary to enable your child to receive educational benefits in accordance with his/her abilities or capabilities

B. SPECIAL EDUCATION & RELATED SERVICES (Parental Consent Required)

As explained on the following page, an Individual Education Program (IEP) proposing appropriate Special Education and related services was written for your child.

C. EDUCATIONAL PLACEMENT (Parental Consent Required)

As explained below, an Individual Education Program (IEP) proposing an appropriate instructional environment for delivering special education and related services was written for your child.

D. CHANGE IN SERVICES

CHANGE IN SERVICES (Parental Consent Not Required)

As explained below, we are proposing a change (not a material change) of a special education service, a related service, or a supplementary aid or service specified on your child's IEP.

or

MATERIAL CHANGE IN SERVICES (Parental Consent Required)

As explained below, we are proposing a change that results in a decrease or increase of 25% or more of the duration or frequency of a special education service, a related service, or a supplementary aid or a service specified on your child's IEP.

E. CHANGE IN PLACEMENT

CHANGE IN PLACEMENT (Parental Consent Not Required)

As explained below, we are proposing a change (not a substantial change) in placement from a less restrictive environment to a more restrictive environment, or from a more restrictive environment to a less restrictive environment.

or

SUBSTANTIAL CHANGE IN PLACEMENT (Parental Consent Required)

As explained below, we are proposing a change in placement that results in the movement of more than 25% of your child's school day from a less restrictive environment to a more restrictive environment, or from a more restrictive environment to a less restrictive environment.

F. REFUSAL (Parental Consent Not Required)

THE LEA REFUSES TO CHANGE SERVICES AS REQUESTED BY THE PARENT

or

THE LEA REFUSES TO CHANGE PLACEMENT AS REQUESTED BY THE PARENT

A DESCRIPTION OF THE ACTION AND REASONS: Proposed Implementation Date:

OPTIONS CONSIDERED REGARDING THE PROPOSED ACTION AND WHY REJECTED:

Accepted	Rejected	Reasons Rejected
<input type="checkbox"/>	<input type="checkbox"/>	provide no special services _____
<input type="checkbox"/>	<input type="checkbox"/>	initiate services _____
<input type="checkbox"/>	<input type="checkbox"/>	increase service time _____
<input type="checkbox"/>	<input type="checkbox"/>	decrease service time _____
<input type="checkbox"/>	<input type="checkbox"/>	add selected services _____
<input type="checkbox"/>	<input type="checkbox"/>	change services _____
<input type="checkbox"/>	<input type="checkbox"/>	discontinue selected services _____
<input type="checkbox"/>	<input type="checkbox"/>	add, discontinue or change goal _____
<input type="checkbox"/>	<input type="checkbox"/>	exit special education services _____
<input type="checkbox"/>	<input type="checkbox"/>	other _____
<input type="checkbox"/>	<input type="checkbox"/>	other _____

DESCRIPTION OF THE DATA USED AS BASIS FOR THE PROPOSED ACTION:

- Evaluation
- Team discussion
- Data collected for ETR/IEP
- Observation
- Record review
- Parent, teacher, student interviews
- Other

POSSIBLE HARMFUL EFFECTS OF THE RECOMMENDED ACTIONS WERE CONSIDERED AND DISCUSSED:

- Progress in current placement could be affected
- Decreased selfworth/esteem
- Stigma of a label
- Increased distractibility
- Exclusion from portions of general education program
- More/less restrictive
- Placement in special education has been shown to result in lower expectations for some exceptionalities
- Time factors

PROCEDURAL SAFEGUARDS TO PROTECT PARENT'S RIGHTS

Both state and federal laws concerning the education of children with exceptionalities include many parental rights. Receiving notices of action the school wants to take in regard to your child and being a part of your child's educational planning team are examples of your rights. These laws also require that the school follow certain procedures to make sure you know your rights and have an opportunity to exercise those rights.

You received a copy of your rights when a referral was made. You should carefully read them and, if you have any questions regarding your rights, you may contact: **High Plains Educational Cooperative at 620-356-5577 or 800-779-4732.**

ADDITIONAL INFORMATION

You may contact any of the following IDEA 97 funded resources to help you understand the federal and state laws for educating children with exceptionalities and parental rights (procedural safeguards) granted by those laws:

- Kansas State Dept. of Education 800-203-9462
- Families Together, Inc. (Garden City) 888-820-6364
- Disability Rights Center of Kansas 877-776-1541
- Keys for Networking 785-233-8732

Other Local Resources:

ACKNOWLEDGMENT

I have been fully informed of all information relevant to the proposed actions specified for my child in this notice. I understand the actions proposed. I understand my parental rights (procedural safeguards). I have contributed information included in my child's evaluation and will/have receive(d) a copy of my child's evaluation report have received will receive by _____.

_____ Date _____
(Parent/Legal Education Decision Maker)

_____ Date _____
(Parent/Legal Education Decision Maker)

CONSENT FOR SPECIAL EDUCATION ACTION

If the previous statements are correct, we ask that you give us consent to carry out special education action as indicated. Any disagreement we have regarding any of the above matters may be resolved by our mutual agreement, through mediation or through due process proceedings. An explanation of mediation and due process proceedings is provided upon request. If you are uncertain of your decision, you may take up to 30 days to consider the proposed action and to give or deny consent.

The proposed action(s) will begin within 10 school days (unless there is a reasonable justification for delay) upon receiving your written permission. If you have any questions regarding this notice, you may contact your local school psychologist or sign and date this form and return it in the enclosed envelope.

GIVE CONSENT

I give consent for the special education action specified in this notice for my child.
I understand this consent is voluntary and may be revoked at any time.

_____ Date _____
(Parent/Legal Education Decision Maker)

_____ Date _____
(Parent/Legal Education Decision Maker)

DO NOT GIVE CONSENT

I do not give consent for the special education action specified in this notice for my child.

_____ Date _____
(Parent/Legal Education Decision Maker)

_____ Date _____
(Parent/Legal Education Decision Maker)

REASON(S) FOR NOT GIVING CONSENT FOR THE PROPOSED ACTION(S):