

Mid-Valley Special Education Cooperative

1304 Ronzheimer Ave St. Charles, IL 60174 (331) 228.4873 (331) 228.4891 fax

Serving children and families of the Batavia, St. Charles, Geneva, Kaneland and Central Community School Districts

Mid-Valley Placement Checklist

A completed form with supporting documents is requested to supply necessary information to MV staff and to complete student file. Mail, email (bonnie.carlson@d303.org) or fax (above) the complete packet to the Mid-Valley Office. A student cannot begin programming without this necessary information.

Person Providing Information: _____ Phone: _____ Email: _____

Student Name: _____ Home District: _____

Date Sent: _____ Student Start Date: _____

IEP Documents requested to complete student file:

Is the following information is available on PowerIEP? _____ Yes _____ No

If no, please provide copies of the following to the MV Office:

- _____ Annual Review/Current IEP (include all goals, FBA/BIP, transition plan)
- _____ Copy of most recent Case Study Evaluation, including any service provider reports.
- _____ If electronic versions of the reports are not attached to the IEP, please provide copies.

Additional Information (not found on PowerIEP) to complete student file:

For all programs:

- _____ Medical Emergency Plan for school
- _____ Specialized medical reports (audiological, neurological, etc.)
- _____ General Health records (proof of physical, immunization record, dental, vision)
- _____ Private Evaluation reports, if any
- _____ OT/PT prescription, if available
- _____ Free and Reduced Lunch application

Assessment:

- _____ PARCC w/accommodations
- _____ DLM
- _____ ACCESS for ELLs
- _____ Alternative ACCESS for ELLs

ELL Services

- _____ Services Required
- _____ Service Waived
- _____ NA

Additional Information for New Directions Program:

- _____ Academic Assessment Data (informal/formal assessments, PARCC/DLM, CBMs, work samples)
- _____ Academic Programming Information (reading/math programs utilized, current reading/math levels)
- _____ High School Transcripts, for High School students
- _____ Discipline record for current year / # of student suspension days this year

For all Programs:

Describe the technology that the student uses on a regular basis:

Signature of Person Providing the Information: _____