

SCHOOL DISTRICT/AGENCY:

SCHOOL YEAR:

Date:

Number of Student Files Reviewed:

STUDENT FILE REVIEW

<input checked="" type="checkbox"/>	Area	Student Initials/Notes
<input type="checkbox"/>	Record of Access to Educational Records	
<input type="checkbox"/>	Record of Parent Contact	
<input type="checkbox"/>	Review of Existing Data	
<input type="checkbox"/>	-Initial Evaluation	
<input type="checkbox"/>	-Reevaluation	
<input type="checkbox"/>	Parent Consent for Evaluation	
Evaluation and Reevaluation		
<input type="checkbox"/>	MEEGS was completed within 45 school days from Parent Consent	
<input type="checkbox"/>	MEEGS team signatures were incomplete	
<input type="checkbox"/>	MEEGS components in noncompliance	
<input type="checkbox"/>	-Components match disability category	
<input type="checkbox"/>	-Parent consent obtained	
<input type="checkbox"/>	-Component addressed on Parent Consent Form not completed	
<input type="checkbox"/>	Reevaluations were completed after the three-year timeline	
<input type="checkbox"/>	Reevaluations were not appropriately documented	
<input type="checkbox"/>	Reevaluation team signatures were incomplete	
<input type="checkbox"/>	Child count was not consistent with category	
Notification of Meeting		
<input type="checkbox"/>	Missing	
<input type="checkbox"/>	Did not adequately address the purpose of the meeting	
<input type="checkbox"/>	Did not include the invitation of the student (if 16 and above)	
<input type="checkbox"/>	Did not include the invitation of other agency representatives, if appropriate	

On-Site Comprehensive Review Citations: Student and Administrative Records

Written Notice		
<input type="checkbox"/>	- Evaluation/Eligibility	
<input type="checkbox"/>	- IEP/Annual Review	
<input type="checkbox"/>	- Revocation of Consent, if applicable	
IEP Components		
<input type="checkbox"/>	Current IEP in effect	
<input type="checkbox"/>	IEP annual review within required timeline (1 year) - Current IEP date: - Previous IEP date:	
<input type="checkbox"/>	Present Levels of Performance - Current assessment data - Objective statements	
<input type="checkbox"/>	Strengths and educational needs	
<input type="checkbox"/>	Consideration of special factors	
<input type="checkbox"/>	Parent concerns	
IEP Components - Goals		
<input type="checkbox"/>	Measurable annual goals	
<input type="checkbox"/>	Benchmarks or short term objectives, if applicable	
<input type="checkbox"/>	Measures for progress in annual goals	
<input type="checkbox"/>	Methods of informing parents of progress toward annual goals	
<input type="checkbox"/>	Frequency of reporting progress to parents	
<input type="checkbox"/>	Progress toward current annual goals	
<input type="checkbox"/>	Extent of progress towards previous annual goals	
IEP Components - Services		
<input type="checkbox"/>	Special Education Services	
<input type="checkbox"/>	Placement setting (LRE continuum)	
<input type="checkbox"/>	- Amount/time/frequency of services	
<input type="checkbox"/>	- Projected starting and expected duration dates	
<input type="checkbox"/>	- Position/person responsible	

On-Site Comprehensive Review Citations: Student and Administrative Records

<input type="checkbox"/>	Related Services	
<input type="checkbox"/>	- Amount/time/frequency of services	
<input type="checkbox"/>	- Projected starting and expected duration dates	
<input type="checkbox"/>	- Position/person responsible	
<input type="checkbox"/>	Extent of nonparticipation in regular class	
IEP Components – Continuum of Placement		
<input type="checkbox"/>	Amount of time outside regular classroom	
<input type="checkbox"/>	Length of school day the same length as nondisabled	
<input type="checkbox"/>	Regular PE, adapted PE, NA	
<input type="checkbox"/>	Supplementary aids and services	
<input type="checkbox"/>	Accommodations	
IEP Components - Secondary Transition		
<input type="checkbox"/>	Student’s preferences and interests	
<input type="checkbox"/>	Course of study	
<input type="checkbox"/>	Post-secondary goals	
<input type="checkbox"/>	Annual transition goals - Employment - Education - Independent living (if necessary)	
<input type="checkbox"/>	Transition services and coordinated activities - Person(s) involved - Date of completion	
<input type="checkbox"/>	Curriculum participation	
<input type="checkbox"/>	Projected date of graduation	
<input type="checkbox"/>	Information/linkage for vocational education	
<input type="checkbox"/>	Referral to vocational rehabilitation counselor	
<input type="checkbox"/>	Transfer of rights at age of majority	
<input type="checkbox"/>	Other agency participation and linkages	

On-Site Comprehensive Review Citations: Student and Administrative Records

IEP Components – Assessment		
<input type="checkbox"/>	Participation in state/districtwide assessment	
<input type="checkbox"/>	State and districtwide assessment accommodations and modifications	
<input type="checkbox"/>	Participation in alternate assessment	
IEP Components - Extended School Year (ESY) Services		
<input type="checkbox"/>	Consideration of Extended School Year (ESY) services	
<input type="checkbox"/>	Services documented	
<input type="checkbox"/>	Type, time, frequency, and duration of services documented	
<input type="checkbox"/>	If team determines future meeting required, team met by that date	
IEP Components – Documentation of LRE		
<input type="checkbox"/>	Options considered and reasons not appropriate	
<input type="checkbox"/>	Normally attend/close to home	
<input type="checkbox"/>	Potential harmful effects	
<input type="checkbox"/>	Removal from regular education	
IEP Signature Page		
<input type="checkbox"/>	Team signatures	
<input type="checkbox"/>	-if team member not in attendance, parent consent was obtained	
<input type="checkbox"/>	If not in attendance, were the student’s preferences/interests considered	
<input type="checkbox"/>	Student participation for transition	
<input type="checkbox"/>	Documentation of parent participation	
<input type="checkbox"/>	Parent Information <ul style="list-style-type: none"> - Rights - Translation/interpretation - Parent Survey - LNH scholarship - OSD/OSB 	
<input type="checkbox"/>	Parent consent for initial placement	
<input type="checkbox"/>	Surrogate parent provided, if necessary	

ADMINISTRATIVE RECORDS REVIEW		
<input checked="" type="checkbox"/>	Area	Notes
<input type="checkbox"/>	Child Find: Public Awareness Activities	
<input type="checkbox"/>	Child Find: Notice to Parents	
<input type="checkbox"/>	Child Find: Screening/Referrals and Evaluation	
<input type="checkbox"/>	Confidentiality	
<input type="checkbox"/>	Letter of Destruction	
<input type="checkbox"/>	Family Education Rights and Privacy Act (FERPA)	
<input type="checkbox"/>	Notice to Parents (FERPA)	
<input type="checkbox"/>	Surrogate Parent Training	
<input type="checkbox"/>	Independent Educational Evaluation	
<input type="checkbox"/>	Interagency Agreements/Contracts	
<input type="checkbox"/>	Teacher Certification	
<input type="checkbox"/>	Caseload/Class-Size	
<input type="checkbox"/>	Paraprofessional Training Registry	
<input type="checkbox"/>	Educational Interpreter	
<input type="checkbox"/>	Participation in Assessments	
<input type="checkbox"/>	Extended School Year (ESY) Services	
<input type="checkbox"/>	Lindsey Nicole Henry Scholarship	
<input type="checkbox"/>	LEA Assurances/Agreements	
<input type="checkbox"/>	Private Schools	
<input type="checkbox"/>	Time and Effort Certifications	