East Central Kansas Cooperative in Education

**DOCUMENTATION OF NEED FOR EXTENDED SCHOOL YEAR SERVICES**

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ IEP Meeting Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Grade:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Case Manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Dates of ESY:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Directions for using this form:**

During the IEP team meeting in which eligibility for ESY is determined, the IEP team should review and discuss each factor below, including the “Questions to consider:”, and determine which, if any, factors support the need for

Extended School year services for this student. Each factor should be marked with a checkmark  in the box to indicate

If Extended School Year Services are needed because of this justification. **Please complete all three pages.**

**FACTORS FOR TEAM CONSIDERATION AND SUPPORTIVE DATA:**

**1. REGRESSION/RECOUPMENT**: The IEP team must determine if without ESY services, there is a likelihood of substantial regression in an identified area of need addressed by the IEP caused by a school break and a failure to recover those lost skills in a reasonable time following the school break (e.g., six to eight weeks after summer break). Regression, for the purpose of this document, is a substantial loss of any skill addressed by the IEP. Some

degree of loss in skills typically occurs with all students during normal school breaks and would not be considered

substantial.

**Questions to consider:**

· Does regression/recoupment data suggest that this student’s skill losses over breaks are excessive and that it takes an unacceptably long period of time (more than 6 weeks) for lost skills to be regained upon return?

· What is the relative impact of short breaks on student performance?

. What will be the affect of his/her maintenance of skills/behaviors?

**Regression/Recoupment data for this student indicate that ESY services are needed.**

**\_\_\_\_YES \_\_\_NO IF YES List Documentation Instruments Used Below:**

 **2. DEGREE AND/OR RATE OF PROGRESS:** The IEP team must review the student’s progress toward the IEPgoals and determine if without these services, the student’s degree or rate of progress toward those goals,objectives or benchmarks will prevent the student from receiving benefit from his/her educational placement

during the regularschool year.

**Questions to consider:**

· Is there any pattern to the timing of progress (or lack of progress) that would indicate a need for ESYservices?

· Does the student make progress at expected levels given the nature/severity of the child’s    disability?

**The degree and/or rate of progress for this student indicate that ESY services are needed.**

**\_\_\_YES\_\_\_\_\_NO** **IF Yes List Documentation Instruments Used Below:**

3.**EMERGING SKILLS/BREAKTHROUGH OPPORTUNITIES:** The IEP team must review all IEP goals and

determine if any of these skills are at a breakthrough point. The IEP team must then determine if the interruption in services and instruction on those goals, objectives or benchmarks by the school break is likely to prevent the student from receiving benefit from his/her educational program during the regular school year without these services.

**Questions to consider:**

· Has the student reached a critical point of instruction or behavior management where a break in programming would have serious, detrimental effects?

**Emerging skills/breakthrough opportunities for this student indicate that ESY services are needed.**

**\_\_\_YES\_\_\_NO** **IF YES List documentation Instruments Used:**

4.**INTERFERING BEHAVIORS:** The IEP team must determine if without ESY services any interfering behavior(s) such as ritualistic, aggressive or self-injurious behavior(s) targeted by IEP goals will prevent the student from receiving benefit from his/her educational program during the school year. The team must also

determine that the interruption of programming which addresses the interfering behavior(s) is likely to prevent

the student from receiving benefit from his/her educational programming during the next school year.

**Questions to consider:**

· Does the student’s behavior (or interruption of programming addressing the behavior) prevent the student from receiving benefit from his/her educational program?

**Interfering behaviors for this student indicate that ESY services are needed.**

**\_\_\_YES\_\_\_NO** **IF YES List documentation Instuments Used:**

**5. NATURE AND/OR SEVERITY OF THE DISABILITY:** The IEP team must determine if without   ESY

services the nature and/or severity of the student’s disability is likely to prevent the student from

receiving benefit from his/her educational program during the regular school year.

**Questions to consider:**

· Could ESY Services markedly slow the rate of degeneration anticipated due to a student’s medical condition?

· Are the services an integral part of a program for populations of students with the same disabling

condition and would a break in programming have a serious, detrimental effect?

· Are there any other individual circumstances that make the provision of ESY services critical so that this

child can learn or participate in school activities upon return to school?

**The nature and/or severity of the disability for this student indicate that ESY services are** **needed.**

**\_\_\_YES\_\_\_NO** **IF YES List documentation Instuments Used:**

6.**SPECIAL CIRCUMSTANCES OR OTHER FACTORS:** The IEP team must determine if without ESY

services there are special circumstances that will prevent the student from receiving benefit from his/her

education program during the regular school year.

**Special circumstances or other factors for this student indicate that ESY services are needed.**

**\_\_\_YES\_\_\_NO** **IF YES List documentation Instuments Used:**

**ATTACH ALL DOCUMENTATION TO SUPPORT YOUR RESPONSES TO THE ABOVE QUESTIONS:**

7. **DRIVERS EDUCATION: Dates:\_\_\_\_\_\_\_\_\_\_\_\_ Number of Students:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Paras: \_\_\_\_\_\_\_\_\_**

The ESY eligibility decision is based upon an examination that includes, but is not limited to the following:

a. Teacher assessment of the student’s success with various instructional interventions;

b. Criterion-referenced and standardized test data;

c. Health and health-related factors, including physical and social/emotional functioning;

d. Past educational history, as appropriate, including any ESY services;

e. Direct observation of the student’s classroom performance;

f. IEP goals and objectives;

g. Student performance (pretest and posttest data);

h. Behavior checklists; and

i. Parent interviews and student interviews where appropriate.

Describe data considered:

**ESY PLANNING SHEET**

List Current Goals benchmarks, and progress to be addressed to maintain skills and behaviors;

**Recommendation of services**

Type of Support

Amount of time:

Frequency:

8. Transportation has been arranged with the district if needed. Do not check if it has not been arranged.

Address of Student:

9. Building Administrator has been informed of the dates and students who are being recommended for ESY.

10. IEP team (including parents) have met and agreed that services are needed.

11. ESY form has been sent to COOP with goals marked.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Case Manager Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Director Date