
PARENT REFERRAL FOR SPECIAL EDUCATION SERVICES (SED-P002)

WENATCHEE SCHOOL DISTRICT

1.0 SCOPE:

- 1.1 This outlines the procedure the Special Education Department follows when a parent makes a referral for the evaluation of a child for special education services.

The online version of this procedure is official; therefore, all printed versions are unofficial copies.

2.0 RESPONSIBILITY:

- 2.1 Director of Special Education, Assistant Director of Special Education, CST, MDT

3.0 APPROVAL AUTHORITY:

- 3.1 Director of Special Education or Assistant Director of Special Education

4.0 DEFINITIONS:

- 4.1 CST – Building Child Study Team may include school counselor, general education teachers, school psychologist, Special Education teachers, appropriate building staff members, and parent(s).
- 4.2 MDT – Special Education Multidisciplinary Team may include speech and language pathologist, physical therapist, occupational therapist, parent(s), school psychologist, appropriate Special Education staff members, and general education staff.
- 4.3 IEE – Independent Educational Evaluation

5.0 PROCEDURE:

- 5.1 Parents make a direct referral to Special Education in writing, or verbally if the individual is unable to write, for evaluation of their child.
- 5.2 Designee from Special Education collects relevant information from the parents and others, including the General Education staff at the student's school site.
 - 5.2.1 The Special Education Evaluation Team has 25 school days to determine whether the child will be evaluated for special education services.
- 5.3 If the decision is to evaluate the student, the Records Clerk will notify the parents by the end of the 25-day timeline.
 - 5.3.1 Records Clerk sends out Consent for Initial Evaluation Form and Notice of Procedural Safeguards for Special Education Students and Their Families.
- 5.4 If the decision is not to evaluate the student, the parents and building are notified in writing, and the student is referred back to the CST.
 - 5.4.1 Parents may request an IEE.
- 5.5 The evaluation will commence once the Consent for Initial Evaluation form has been signed and returned by the parent.

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5.5.1 Return of the signed Consent for Initial Evaluation form begins the 35-day timeline for completion of the student's evaluation.

5.5.2 If parent fails to return signed consent, the Records Clerk will send out a second copy to parents.

5.5.3 Failure or refusal by the parent to sign will end the process. The CST will be notified.

5.5.4 If parents disagree with the district's evaluation report, they may request an IEE.

6.0 ASSOCIATED DOCUMENTS:

6.1 Referral Form SED-F001

6.2 Child Study Team Documentation

6.3 Consent for Initial Evaluation SED-F008

7.0 RECORD RETENTION TABLE:

*NOTE: Special Education files the original evaluation, the latest evaluation, and the latest Individualized Education Plan. The documents listed here are included in this.

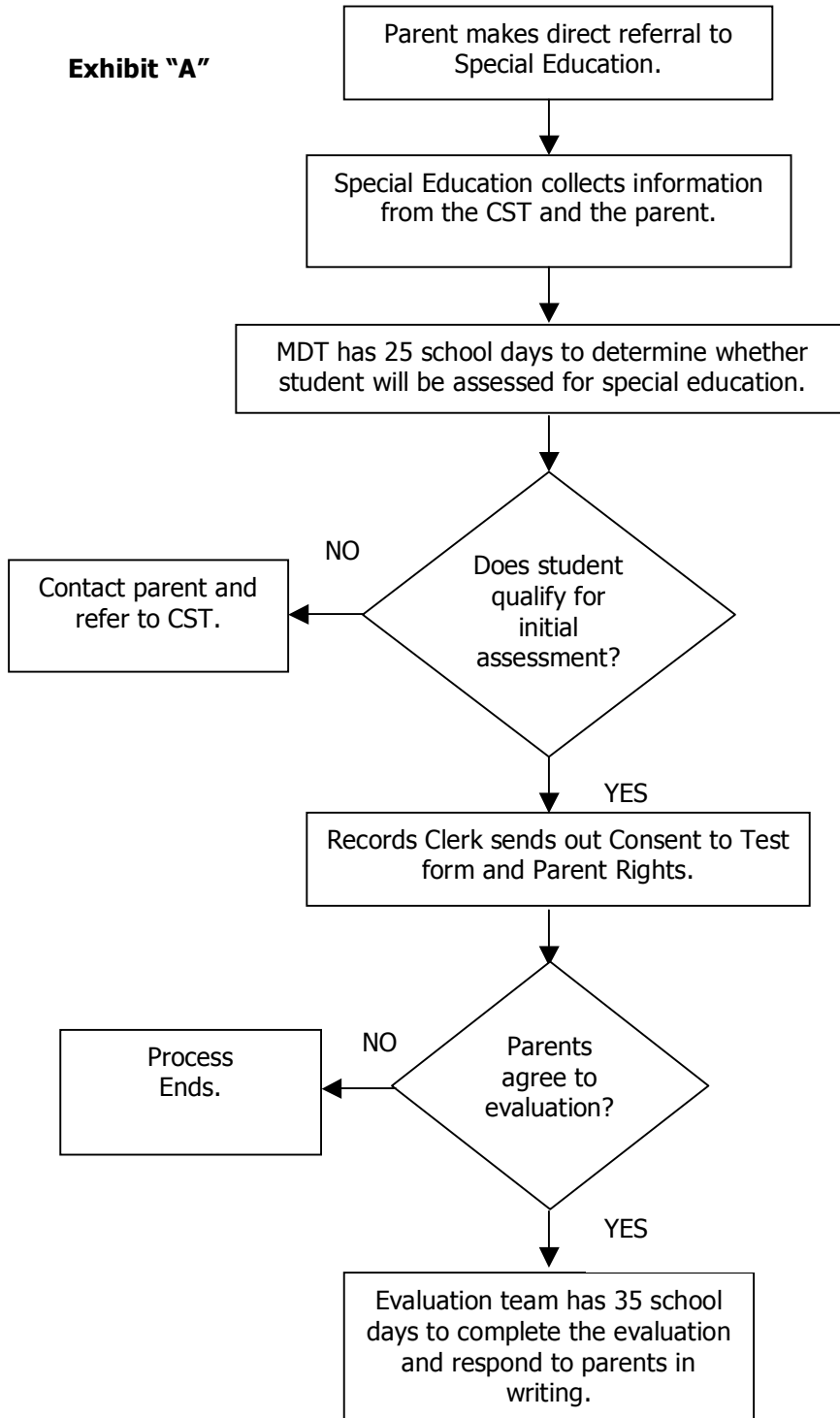
<u>Identification</u>	<u>Storage</u>	<u>Retention</u>	<u>Disposition</u>	<u>Protection</u>
All documents in 6.0 above	Special Education Cumulative File; Student's building site	According to state and federal guidelines, six years after service ends	Letter sent to last known address; if no response, records destroyed after one month	Stored in one location; fireproof

8.0 REVISION HISTORY:

<u>Date:</u>	<u>Rev:</u>	<u>Description of Revision:</u>
10-May-01	A	Original Release
25-Jan-02	B	Clarified contact information in 5.1 and notification information in 5.4; made clerical correction in 5.2.1
4-Feb-02	C	Updated protection information
16-Jan-03	D	Updated records approval authority to include Assistant Director of Special Education, retention details, and form numbers
12-Sept-03	E	Updated records retention data, replacing seven years with six
04-Nov-04	F	Added parent(s) to CST definition; added general education staff to MDT definition; replaced "student's twenty-first birthday" with "service ends" in retention data
06-Nov-07	G	Updated 5.5.3 to reflect process will end without parent's signature, and CST will be notified.

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**** End of procedure ****