

Notice of Action

Notice of Action must be given before our district takes certain actions.

Name: Jane Doe

Age: ##

Parent/Guardian:

Mr. and Mrs. Doe

ID#: #####

Grade: ##

Date Provided:

October 25, 2013

Date of Birth: ##/##/##

School/Site: Sunny Day School

Method of Provision: In person

By mail

Email

The following is to describe the action(s) Proposed or Refused by our district.

Box A: Consent is REQUIRED for these actions to be carried out:

- Initial evaluation
- Initial placement
- Reevaluation (with assessment):
 - Comprehensive Evaluation
 - Specialized Evaluation
 - Other (specify):
- Temporary placement
- Other (specify):

Box B: Consent is NOT REQUIRED for these actions to be carried out:

- Ineligibility for services
- Change in eligibility
- Change of placement
- Provision of FAPE
- Graduation with regular diploma
- Dismissal from Special Education Services
- Disciplinary Removal
- Other (specify):

Consent Granted for Action to Take Effect Immediately

- Parent agreed to immediate implementation of the action being proposed.

Explanation of Action: (The reason(s) for the proposal or refusal):

Jane's parents requested a full day paraprofessional to assist Jane with her IEP goals and accommodations. After a review of Jane's progress, the IEP team determined that she is advancing satisfactorily with her current level of services, which includes support from a paraprofessional for a portion of the day during reading, writing, and math instruction in the general classroom. The district is refusing to increase the time a paraprofessional works with Jane. The IEP committee did determine that Jane will receive an additional 30 minutes daily from the special education teacher to support her goals of developing organizational skills, reinforcing concepts taught in the general classroom, as well as developing skills of independence.

Basis for the Action: (A listing or attached description of each evaluation procedure, assessment, record, or report used as a basis for the action):

Teachers' observations and input, grades, parent input, anecdotal records, informal behavioral observations, and progress reports on IEP goals were considered when reaching this decision.

Options Considered and Reasons Rejected: (option(s) considered by the IEP team and reason(s) for rejection)

The IEP team reviewed the parent's request for a paraprofessional to be assigned to support Jane throughout her six- hour school day. At this time, Jane has been very successful with part-time help from the paraprofessional who supports two other students along with Jane during the core academic times. In addition, the team determined Jane might become too dependent on the para if support were provided full time, and the opportunity to become more self sufficient could be compromised

Other Factors Relevant to the Action:

Jane's para time was decreased last spring when her current IEP was reviewed and revised. Jane's progress in reading has steadily increased during this school year and other academic areas are showing good growth as well.

Informed Consent

Pertains to Box A Only

I understand the purposes(s) for which my consent is being requested. I understand that giving consent for the above stated purpose(s) is voluntary on my part and may be revoked at any time. A copy of "Information Regarding Consent" which explains protections that are specific to informed consent under the procedural safeguards of Part B of the Individuals with Disabilities Education Act (IDEA) may be accessed at:

https://arksped.ade.arkansas.gov/rules_regs_08/RevisionstoRulesandRegulationJuly2010/INFORMATION%20FOR%20PARENTS%20REGARDING%20CONSENT.pdf

Parent/Guardian/Student Signature:

Date:

Procedural Safeguards

Parents of a child with a disability, or the child with a disability, have protections under the procedural safeguards of Part B of the Individuals with Disabilities Education Act (IDEA). A copy of "Your Rights under the IDEA" may be accessed at:

https://arksped.ade.arkansas.gov/rules_regs_08/RevisionstoRulesandRegulationJuly2010/YOUR%20RIGHTS%20UNDER%20THE%20IDEA.pdf

https://arksped.ade.arkansas.gov/rules_regs_08/RevisionstoRulesandRegulationJuly2010/Spanish/Your%20Rights%20Under%20the%20IDEA%20-%20Spanish.pdf (Spanish version)

If you need assistance in understanding the provisions of the procedural safeguards, you may contact

Name:

Phone Number/E-mail:

Name:

Phone Number/E-mail:

For additional assistance, you may contact the ADE Special Education Unit at (501) 682-4221.

When parents revoke consent for services for their child, the child and his/her parents no longer have the protections provided under the procedural safeguards of Part B of the IDEA.

If you have any questions or concerns regarding this action, please contact:

Name/Title:

Phone Number/E-mail: