

Notice of Action

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

Name: Richard Jones
Age: #
Parent/Guardian:
Mr. and Mrs. Jones

ID#: #####
Grade: #
Date Provided:
October 1, 2016

Date of Birth: ##/##/####
School/Site: Anywhere 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):

Today Richard violated the code of student conduct by initiating a fight with another student and will be suspended for 10 days with a recommendation for expulsion for an additional 35 days. On October 15, 2015 a change in placement will occur because Richard will have been removed from his current educational setting as outlined in his IEP for 11 days. Richard will receive the services outlined on his IEP at the ALE beginning October 15 and will return to his current school setting on November 11. A Manifestation Determination will be held on or before October 15, 2016 to determine if the conduct was caused by, or had a direct and substantial relationship to Richard's disability.

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

Richard violated the code of student conduct by initiating a fight with another student.

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

We considered returning Richard to his current educational setting after his 10-day suspension, but this fight resulted in serious bodily injury to the other student.

Other Factors Relevant to the Action:

None at this time.

Name:

ID#:

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: