

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 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): ESY

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 progress so far on her IEP goals is slower than anticipated, and she is not likely to achieve the goals by the end of the year. The IEP committee held a Separate Programming Conference to review and revise Jane's goals. The committee increased Jane's resource time and added ESY services. Jane's placement on the continuum will change from regular class (more than 80% of day in general ed.) to regular class (40-79% of day in general ed.).

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

The review IEP goal progress, benchmark scores, work samples, and success in the general classroom indicated that Jane requires additional time in resource pull-out services for reading.

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

The IEP team considered maintaining Jane's level of special education resource assistance. Jane's current reading level, rate of progress, and needs in the general classroom clearly demonstrated the need for increasing the IEP's service time.

Other Factors Relevant to the Action:

Jane will be provided ESY services for one hour three times a week for eight weeks. Jane's IEP goals for reading

Name:

ID#:

comprehension will be addressed during ESY services, due to the significant and severe regression without recoupment during breaks of more than one week.

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: