

**Director Notification Form Revised 10-3-2023**

This is a formal notification to the Director of Special Education Services that the Child Study Committee has made the determination to refer the following student for initial evaluation or reevaluation for special education services and related services:

**Student:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**School:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Ethnic/Race Code:** \_\_\_\_\_

**Student's Case Manager:** \_\_\_\_\_ **Date Received at C.O.** \_\_\_\_\_

**Date Parent Signed Consent** \_\_\_\_\_

**Type of Eval.:**      \_\_\_\_\_ **Initial**      \_\_\_\_\_ **Triennial**      \_\_\_\_\_ **Re-Eval.**      \_\_\_\_\_ **Other**

**Evaluation Due Date:** \_\_\_\_\_

**All Components are Due to Kerri at the Central Office TWO WEEKS prior to the Eligibility Meeting Date.**

**Completed:**

**Staff Member:**

_____ Psychological	_____ Grayson Byrd/_____	_____ Heidi Hawkins/_____
_____ Educational	_____	_____ / _____
_____ Observation	_____	_____ / _____
_____ Current Classroom Performance	_____	_____ / _____
_____ Speech and Language	_____	_____ / _____
_____ Vision	_____	_____ / _____
_____ Hearing Screening	Nurse/Speech Teacher _____	_____ / _____
_____ Physical Therapy	Mini-Miracles Staff/Emailed: _____	_____ / _____
_____ Occupational Therapy	Mini-Miracles Staff/Emailed: _____	_____ / _____
_____ Medical	Parentally Provided _____	_____ / _____
_____ Audiological	Director Approval Needed _____	_____ / _____
_____ Sociocultural	Director Approval Needed _____	_____ / _____
_____ Assistive Technology	Director Approval Needed _____	_____ / _____
_____ Developmental	Joy Berry _____	_____ / _____
_____ Other: _____	_____	_____ / _____
_____ Review of Records:	_____	_____ / _____

**This form is to be sent immediately to the Department of Special Education Services following the Child Study meeting, and will be returned to those listed above with a scheduled Eligibility Meeting Date and Time.**

**THIS PAGE TO BE COMPLETED AT CENTRAL OFFICE:**

Eligibility Meeting Date: \_\_\_\_\_ Time: \_\_\_\_\_ Place: \_\_\_\_\_

Notes & Documentation: