GEORGIA DEPARTMENT OF EDUCATION
DIVISION FOR SPECIAL EDUCATION SERVICES AND SUPPORTS

STUDENT RECORD REVIEW TO DETERMINE COMPLIANCE

TRAINING DOCUMENT

Date: _____ School: _____ LEA_____

Team Leader and Reviewer 1: _____ Reviewer 2: _____

Student Name:	DOB:
Eligibility Category(ies):	Initial Eligibility Date: Reevaluation Dates:
Annual IEP Date:	Current Grade:

Directions: Check "**Y**" if the data is present and meets compliance. Check "**N**" if the data is missing or if the data does not meet compliance. Check "**N/A**" if the question is not applicable to this student. **Date** in the yellow highlighted column indicates the date of review or specific dates of events in student record. In the **Evidence column**, check the boxes next to the evidence provided. The **note column** contains additional explanations for the reviewer.

A.	ACCESS SHEET 34 CFR 300.614		Possible Evidence	Note	Comment
1.	Is there an access sheet in the student folder?	☐ Yes ☐ No	Access Sheet	GOIEP districts maintain access sheets electronically. Access sheets must be signed by third parties. These are people who are not included on the Authorized Personnel to Access Records maintained by the district. Therefore, this sheet could be a blank sheet with name, date, and purpose on the header if no third party has been provided access.	
2.	Is the date, name of the person accessing the file and purpose for accessing the student file documented on the access sheet?	☐ Yes ☐ No	Access Sheet	Access Sheet; ask for it if not available.	

B.	PARENTAL CONSENT FOR EVALUATION 34 CFR 300.300 34 CFR 300.503 34 CFR 300.504	Initial Evaluation Date _____	Possible Evidence	Note	Comment
3.	Was parent consent obtained from the parent prior to evaluation?	☐ Yes ☐ No	☐ Date Parent Consent to Evaluate received: _____	Was parent consent obtained from the parent prior to the initial evaluation or prior to most recent evaluation?	
4.	Are the areas to be evaluated listed on the parent consent to evaluate?	☐ Yes ☐ No	☐ Parent consent to Evaluate	Look for the list of areas to be evaluated. For example, cognitive, achievement, social-emotional, adaptive etc.	
5.	Were parent rights provided when the parent consent to evaluate was signed?	☐ Yes ☐ No	☐ Parent consent to Evaluate ☐ Documentation that parent rights were provided	Look for the statement on the parent consent form that would indicate that parent rights have been provided.	

C.	INITIAL EVALUATION 34 CFR 300.304	Initial Evaluation Date _____	Possible Evidence	Note Complete this section only if the student has had an initial evaluation within the last 3 years of CFM	Comment
6.	Did the evaluation team use a variety of assessment tools to gather relevant academic, functional, and developmental information about the student to determine eligibility?	☐ Yes ☐ No ☐ N/A	☐ Psychological Report ☐ Eligibility Report	Individual Student Data on the Eligibility Report	
7.	Were the assessments and other evaluation materials selected to assess all needs and not merely those that are designed to provide a single general intelligence quotient?	☐ Yes ☐ No ☐ N/A	☐ Psychological Report ☐ Eligibility Report	Individual Student Data section on the Eligibility Report	

D.	INITIAL ELIGIBILITY 34 CFR 300.306 34 CFR 300.307 34 CFR 300.311	Initial Eligibility Date _____	Possible Evidence	Note Complete this section only of the student has had an initial eligibility meeting in the last 3 years of CFM	Comment
8.	Did the Eligibility Report include appropriate prereferral evidence-based interventions and results (includes SST)?	☐ Yes ☐ No ☐ N/A	☐ SST records ☐ Eligibility Report	**REQUIRED FOR SLD only, but** is considered best practice for all other areas, including eligibility for preschool students. Student progress monitoring data obtained from SST should be included on the eligibility report. Rarely, school personnel and parents/guardian may determine there is a reasonable cause to bypass SST. However, if the student was not already receiving scientific, research, or evidence-based interventions (i.e., SST) prior to being referred for special education consideration, these interventions and supports should have been implemented while the evaluation was in progress.	

9.	Was parent input included during the eligibility determination discussion?	☐ Yes ☐ No	☐ Eligibility Report	Individual Student Data Parent information can be anywhere on the eligibility report.	
10.	Did the team consider exclusionary factors prior to determining eligibility?	☐ Yes ☐ No	☐ Eligibility Report		
E.	**REEVALUATION PROCESS** **34 CFR 300.303** **34 CFR 300.304** **34 CFR 300.305** **34 CFR 300.306**	**Current Reeval** **Date** _____	**Possible Evidence**	**Note**	**Comment**
11.	Was the reevaluation process completed within the 3 year timeframe?	☐ Yes ☐ No ☐ N/A	☐ IEP ☐ Reevaluation Checklist	Reevaluation should be completed every 3 years	

F.	IEP MEETING NOTIFICATION 34 CFR 300.322	IEP Date _____	Possible Evidence	Note	Comment
12.	Does the parent notification of the IEP meeting include the time, purpose and location for the meeting?	☐ Yes ☐ No	☐ IEP Meeting notice ☐ Purpose ☐ Location ☐ Time ☐ Date_____	IEP meeting should be held annually. The amendment does not override the annual review date	
13.	Are the required participants for the IEP meeting listed on the parent notification?	☐ Yes ☐ No	Notification lists the following required participants: ☐ Parent ☐ LEA Representative ☐ Student's special education teacher ☐ Student's general education teacher(s) ☐ Student, if applicable ☐ Staff qualified to interpret educational implications of test results ☐ Other agency personnel, if appropriate (VR, DBHDD, Private Evaluators, Social Workers, etc) ☐ Transition and other agency personnel invited as appropriate with written parental consent	Individuals can be identified by position title.	

G.	IEP MEETING 34 CFR 300.321	IEP Date _____	Possible Evidence	Note	Comment
14.	Did the required participants attend the IEP meeting?	☐ Yes ☐ No	☐ **Parent: *Attended/ Not attended* (Circle one)** ☐ **LEA Representative** ☐ **Student's special education teacher** ☐ **Student's general education teacher(s)** ☐ Student, if applicable ☐ Staff qualified to interpret educational implications of test results ☐ Other agency personnel, if appropriate (VR, DBHDD, Private Evaluators, Social Workers, etc) ☐ Transition and other agency personnel invited as appropriate with written parental consent	The bolded personnel are required members of IEP Team.	

15.	Were proper excusal procedures followed?	☐ Yes ☐ No	Excusal letter	If a rquired member was absent, was the excusal notice signed by parent?.	
H.	**PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE** **34 CFR 300.320** **34 CFR 300.324**	**IEP Date** _____	**Possible Evidence**	**Note**	**Comment**
16.	Does the Present Levels of Academic Achievement and Functional Performance (PLAAFP) include information regarding results of the initial and/or most recent evaluation of the student?	☐ Yes ☐ No	☐ PLAFF section of the IEP ☐ Date(s) of testing ☐ Explanation describing what the test scores mean		
17.	Does the PLAAFP include recent state and/ or district assessments results?	☐ Yes ☐ No ☐ N/A	☐ State Assessment(s) ☐ Name(s): Date: ☐ District Assessment(s) ☐ Name(s): Date:	1st grader may have KG assessments 2nd & 3rd grade IEPs may not have scores from state and/or district assessments and it could be N/A State tests start in Grade 3 and are administered at the end of the grade. Grades 3-8 : End-of-Grade High School: End-of-Course	

H. Cont'd	PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE 34 CFR 300.320 34 CFR 300.324	IEP Date _____	Possible Evidence	Note	Comment
18.	Does the PLAAFP describe the student's academic, developmental and/or functional strengths?	☐ Yes ☐ No	☐ IEP		
19.	Does the PLAAFP describe the student's academic, developmental and/or functional needs?	☐ Yes ☐ No	☐ IEP		
20.	Does the PLAAFP include how the student's disability affects the student's involvement and progress in the general education curriculum or in the case of preschool students - participation in appropriate activities?	☐ Yes ☐ No	☐ IEP		
21.	Did the IEP team consider the concerns of the parents for enhancing the education of their child?	☐ Yes ☐ No	☐ IEP	If the student is 18, rights should have been transferred to the student and the student would provide input. Mark no if it says N/A	

I	CONSIDERATION OF SPECIAL FACTORS 34 CFR 300.324	IEP Date _____	Possible Evidence	Note	Comment
22.	Did the IEP team consider all special factors that may influence the student's educational programs?	☐ Yes ☐ No	**If Applicable:** ☐ Limited English Proficiency (LEP) ☐ Blind or visually impaired ☐ Behavior ☐ **Communication needs** ☐ Deaf/hard of hearing needs ☐ **Assistive Technology devices or services** ☐ **Alternative formats for instructional materials** **(Words bolded are required items on GoIEP)**	Consideration of Special Factors on the IEP Look for documentation that supports needs of student. For example, is there a BIP if behavior impedes learning? A BIP is not required for all students with behavioral difficulties. A behavior goal will address those needs as well. Districts must consider communication needs and assistive technology for all students.	
23.	If there is a Behavior Intervention plan, does it include target behavior and positive behavior interventions and supports?	☐ Yes ☐ No ☐ N/A	☐ BIP	Look to see if the Behavior Intervention Plan has positive interventions and supports. Mark N/A if there is no BIP.	

J.	TRANSITION SERVICES PLAN 34 CFR 300.320 34 CFR 300.43	IEP Date _____	Possible Evidence	Note	Comment
24.	Beginning by age 16 or 9th grade (whichever comes first)	☐ Yes ☐ No N/A	☐ Transition plan		
25.	Postsecondary outcome goal for Employment	☐ Yes ☐ No ☐ N/A	☐ Transition plan		
26.	Postsecondary outcome goal for Education/Training	☐ Yes ☐ No ☐ N/A	☐ Transition plan		
27.	Postsecondary outcome goal for Independent Living (if appropriate)	☐ Yes ☐ No ☐ N/A	☐ Transition plan		
28.	Transition IEP Measurable Goals to meet postsecondary goals	☐ Yes ☐ No ☐ N/A	☐ Transition plan		
29.	Postsecondary goals aligned with the transition assessments	☐ Yes ☐ No ☐ N/A	☐ Transition plan		
30.	Transition services and/or activities to facilitate movement to postsecondary outcomes	☐ Yes ☐ No ☐ N/R ☐ N/A	☐ Transition plan		

31.	Course of study to facilitate movement to post-school	☐ Yes ☐ No ☐ N/A	☐ Transition plan		
32.	Was the student invited?	☐ Yes ☐ No ☐ N/A	☐ Transition Plan ☐ Notice of IEP meeting		
33.	Was an agency representative invited?	☐ Yes ☐ No ☐ N/A	☐ Transition Plan ☐ Notice of IEP meeting		
34.	Was parent consent received prior to inviting agency representative?	☐ Yes ☐ No ☐ N/A	☐ Transition Plan ☐ Notice of IEP meeting		
35.	Was the student informed of the transfer of all due process rights to student at age 17?	☐ Yes ☐ No ☐ N/A	☐ IEP ☐ Transition plan		
36.	Were all due process rights transferred to the student at age 18?	☐ Yes ☐ No ☐ N/A	☐ IEP		
K.	**ANNUAL GOALS AND/OR SHORT-TERM OBJECTIVES 34 CFR 300.320**	**IEP Date** _____	**Possible Evidence**	**Note**	**Comment**
37.	Do the student's annual goals and short-term objectives align with the needs section of the PLAAFP?	☐ Yes ☐ No	☐ IEP goals ☐ Criteria for mastery ☐ Evaluation method (s)	Measurable Annual Goals and Short Term Objectives on the IEP Students who have alternate assessments are	

				required to have short-term objectives or benchmarks. It is not required for other students.	
38.	Are the goals and short-term objectives measurable?	☐ Yes ☐ No	☐ IEP goals and objectives		
39.	Does the IEP contain a statement regarding when progress on IEP goals is reported to parents?	☐ Yes ☐ No	☐ Time period when progress reports are sent		
L.	**STUDENT SUPPORTS FOR ACADEMIC AND NONACADEMIC ACTIVITIES 34 CFR 300.320**	**IEP Date** _____	**Possible Evidence**	**Note**	**Comment**
40.	Does the IEP include instructional accommodations?	☐ Yes ☐ No ☐ N/A	☐ IEP		
41..	Did the accommodations align with the students needs stated in the PLAAFP?	☐ Yes ☐ No ☐ N/A	☐ IEP		
42.	Does the IEP include accommodations that are necessary for the student to participate in classroom assessments?	☐ Yes ☐ No ☐ N/A	☐ IEP		

43.	Does the IEP include a statement of the special education and related services and supplementary aids and services to be provided to the student?	☐ Yes ☐ No	☐ IEP	If the student does not need any supports, it should be noted on the IEP. It should not be left blank. If it is blank, mark No.	
44.	Does the IEP include supports for school personnel?	☐ Yes ☐ No	☐ IEP	If the school personnel do not need any supports, it should be noted on the IEP. It should not be left blank. If it is blank, mark No.	
M.	**PARTICIPATION IN ASSESSMENTS/ACCOMMODATIONS 34 CFR 300.320**	**IEP Date** _____	**Possible Evidence**	**Note**	**Comment**
45.	Does the IEP have appropriate accommodations listed by subtest that enable the student to participate in district and state assessments (GAA, EOC, EOG etc.)?	☐ Yes ☐ No ☐ N/A	☐ State and district tests specific to each subtest and test ☐ State and district tests aligned with needs section of the PLAAFP ☐ State and district test accommodations used as instructional accommodation ☐ GAA: Statement explaning why student cannot participate in general		

			education assessment.		
N.	**SPECIAL EDUCATION/RELATED SERVICES** **34 CFR 300.34** **34 CFR 300.115** **34 CFR 300.116** **34 CFR 300.320**	**IEP Date** _____	**Possible Evidence**	**Note**	**Comment**
46.	Did the IEP team consider placement options for the student?	☐ Yes ☐ No	☐ Services section		
47.	Did the IEP team select options of services for the student?	☐ Yes ☐ No	☐ Frequency of services (hours, minutes, segments per day, week, or month indicated) ☐ Dates for initiation and duration of services (month/day/year) ☐ Special education location of services		

			☐ General education location of services		
48.	Did the IEP include an explanation of the extent, if any, to which the student will not participate with peers without disabilities in the regular class and/or in nonacademic and extracurricular activities?	☐ Yes ☐ No ☐ N/A	☐ IEP	If students are all in general education classes, this item will not be populated on the GOIEP form. In those situations mark N/A. If the student is in all general education classes districts may repond with a N/A	
O.	**EXTENDED SCHOOL YEAR** **34 CFR 300.106**	**IEP Date** _____	**Possible Evidence**	**Note**	**Comment**
49.	Did the IEP team consider Extended School Year (ESY) services to enable the student to make progress in the general education curriculum?	☐ Yes ☐ No	☐ IEP		

P.	**PARENTAL CONSENT FOR SERVICES** **34 CFR 300.300**	**Consent Date** _____	**Possible Evidence**	**Note**	**Comment**
50.	Did parent give consent for services?	☐ Yes ☐ No	☐ Parent consent	Look for consent for initial services only. Consent is signed only once when the student becomes initially eligible to receive services. This was formerly called the Consent for Placenment form.	