

NOTIFICATION OF NEW ENROLLEE IN SPECIAL EDUCATION

To be Completed at Time of Student's Enrollment

STUDENT: _____ D.O.B. _____

PRESENT SCHOOL: _____ GRADE: _____

PARENT/GUARDIAN: _____ PHONE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

LAST SCHOOL: _____ LAST SCHOOL CORPORATION _____

CITY: _____ STATE: _____

THE STUDENT MUST BE PROMPTLY UPLOADED TO THE DOE-RT REPORT.

A move-in case conference must be held within 10 school days of the student's enrollment. If moving in from out-of-state, a record review is necessary prior to the move-in conference. Forward a copy of this packet to the school psychologist. All information on newly enrolled special education students should be immediately sent to the Teacher of Record.

Please forward copies of the new enrollee information to: ECISS, School Psychologist (if moved in from out of state), School's Data Entry Person for DOE-RT Report.

Release of Information Sent to Previous School Yes _____ No _____

Current IEP Attached Yes _____ No _____

Current Evaluation Attached Yes _____ No _____

ECISS OFFICE USE ONLY

Area of Disability: 1-Primary 2-Secondary

Autism Spectrum		Blind/Low Vision	
Cognitive Disability (Mild)		Deaf/Hard of Hearing	
Cognitive Disability (Moderate)		Developmental Delay	
Emotional Disability		Language or Speech Impairment	
Multiple Disabilities		Other Health Impaired	
Orthopedic Impairment		Specific Learning Disability	
Traumatic Brain Injury		Deaf-Blind	