

A RESOURCE GUIDE
FOR PARENTS OF
CHILDREN WITH DISABILITIES

CHILDREN ARE SPECIAL

From one parent to another....

Learning that your child has or even may be suspected of having a disability is difficult. Absorbing the information, while at the same time trying to figure out what to do about it, is stressful for most parents. It is easy to become overwhelmed by concerns about what it all means for your child's future. While concerns about the future are understandable and certainly deserve to be addressed, it is really in your child's best interest to try to take a "one-step-at-a-time" approach. Looking too far down the road and worrying about what might or might not happen can quickly cloud your thinking and make it harder to focus on your child's immediate needs and how best to meet them. Try to remember as for all children—with or without disabilities—if we as parents do a good job of the present, the future will take care of itself.

The purpose of this resource guide is to help you understand special education:

- *what it is;*
- *how it works;*
- *who is involved;*
- *where to go with questions and concerns;*
- *when to ask those questions and raise those concerns; and*
- *why you as a parent have such an important role in making sure that your child's educational needs are accurately assessed and adequately addressed.*

Our hope is that this will be a meaningful guide that will make your special education journey, however short or long it may be, as smooth and rewarding as possible for you and your child. It is also our hope that as you read through this guide you will realize that the special education road need not be traveled alone. At each step along the way there are many highly qualified and deeply caring individuals who will assist you.

Organization of this resource guide:

This guide is divided into seven sections, with a question and answer format to help you easily find the answers to your questions. It was created by a group of parents of children with special needs and staff of the Special Education Department. At the end of most sections is a list of resources for you to seek additional information on the material presented in the section.

SECTION 1: **SUPPORTS FOR ALL STUDENTS**

What do I do if I suspect my child is having a problem?

If you suspect that something about your child is “not quite right,” don’t wait too long to begin to investigate. You might want to do some reading about the issue that concerns you and then speak to your child’s pediatrician. He or she should be able to answer your questions and/or send you to a specialist who can. It may be that your child’s pediatrician will advise you to “wait and see” because some issues are developmental and take care of themselves with time. Or the pediatrician may suggest some basic tests or evaluations that will answer your concerns.

If your concerns are specifically about difficulties your child is having in school, you may want to ask for a conference with your child’s teacher and other school professionals.

Same helpful suggestions from parents are:

1. No concern is foolish.
2. Don’t worry that you will be accused of being a neurotic parent.
3. You know your child better than anyone else. If your instincts tell you that there is a problem, follow your instincts.
4. It is far better to find out that everything is okay than to lose precious time because you are not positive that your concern is valid.
5. Don’t give up. It does happen that a physician or other professional will not recognize that your child has a difficulty. Don’t be afraid to keep pushing for the answers you need.

What programs are available to students?

It is the philosophy of the Stillwater Central School District that all students shall have a supportive learning environment. Students who are having difficulties or not meeting success in school may need one or more of the many support services provided by the schools.

Students may be supported by any of the following programs:

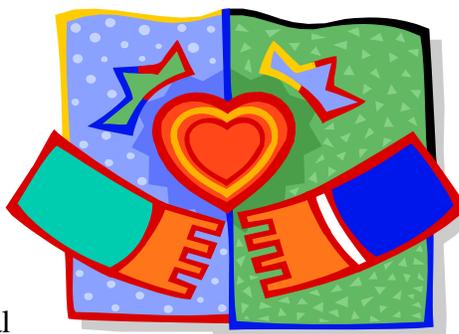
• Academic Intervention Services:

New York State mandates that all public school districts offer academic intervention services (AIS) to any student who is falling behind in meeting the state standards. Students are identified for AIS according to their performance on the state ELA, math, social studies and science exams in grades 3 through 8. Stillwater students who score in Performance Levels I and 2 are eligible to receive AIS in the designated subject area. AIS is additional instruction intended to assist students who are at risk of not achieving the State learning standards in English language arts, mathematics, social studies and/or science. AIS in reading and math are sometimes called remedial reading or remedial math.

• **School Counseling/Guidance:**

The school counselors provide support to students. In grades K-5, the program is designed in coordination with the teaching staff to prepare students to participate effectively in their current and future educational programs, to help students who exhibit any attendance, academic, behavioral or adjustment problems, and to encourage parental involvement.

In grades 7-12, the guidance program includes the following activities or services: an annual review of each student's educational progress and career plans; instruction at each grade level to help students learn about various careers and about career planning skills conducted by the school counselors or by classroom teachers in cooperation with school counselors; and other advisory and individual or group counseling to enable students to benefit from the curriculum, to help students develop and implement postsecondary education and career plans, to help students who exhibit any attendance, academic, behavioral or adjustment problems and to encourage parental involvement.



• **Social Work Counseling:**

The school social workers spend at least 25 percent of their time providing counseling support to students in general education.

The social worker may meet with a student once or several times to discuss social or emotional concerns that are affecting school. The school social worker can also help families locate community resources needed by the student and family.

How to find out about programs and services offered in school?

If you have concerns when you register your child for school, the school registrar will provide you with the names and phone numbers of individuals (principal, Pupil Personnel Services Office, school counselor) who can provide you with information.

Each building hosts an Open House in the fall of each year. Generally, this meeting will provide you with a chance to meet your child's teacher(s), become familiar with the building and learn about grade level expectations and various school programs. Each building also has a handbook available for parents and students. These handbooks give detailed explanations about the school's health policies, attendance, curriculum, school policies and procedures and homework expectations.

The Stillwater Central School District Web site www.scsd.org provides current information about school and district-wide activities. The school web pages provide information about the school and current activities and schedules for school activities, such as PTA meetings, open houses, testing, etc. Many teachers have classroom Web pages that describe classroom curriculum, homework, test schedules, etc. The Special Education Department also has its own Web page that provides information about programs and services available to students, as well as parent information sessions and programs.

What can I do if my child struggling in school?

If your child is not performing as you had expected or is experiencing frustration in the learning or school environment, either you or your child's teacher can ask for a parent/teacher conference. You

can ask the teacher or request the conference by speaking with your child's school counselor in the guidance office, or by speaking directly with the classroom teacher. At this meeting with you and your child's teacher or teachers, you can discuss your concerns and hear from the teachers how your child performs in school. This exchange of information may lead to a change in instructional strategies at school and/or a request for additional home support. Your child's difficulties may be due to academic concerns, organizational or study skills, or social or emotional concerns. Therefore, it is not unusual for one of the district's support staff to become involved in the discussions with you and the teacher to help your child.

Whatever your concern, it is important to identify any needs for support as early as possible so that your child can receive the support he or she may need. If your child continues to struggle, he/she may be referred to the school's Child Study team or Pupil Study Team. In the elementary we call this process the intervention team.

What is an Intervention Team?

At Stillwater, the Intervention Teams are one step in seeking a solution to a child's learning frustration. These teams exist in each of the three buildings. The teams are composed of both regular and special education teachers, support service personnel (e.g., school psychologist, behavior specialist or social worker) and building administration. The team will include your child's teacher(s) and school counselor and may include other school staff who are involved directly with your child. The Intervention Team is a problem-solving team that acts as an information and support source to the teacher and you, the parent, as well as the student. If a teacher or parent feels that the child is not learning as would be expected or if the child is having an unsuccessful experience in school, the intervention team may be recommended as part of the process.

The main objective of the team is to provide a forum for faculty and staff to share concerns and develop strategies that support students. In addition, the team seeks to identify strategies to help the classroom teacher(s) help the student. The team monitors the progress of the student and will make adjustments and recommend additional supports where necessary. If strategies continue to be ineffective in helping the student succeed, a referral to the Committee on Special Education may be recommended. Your child's difficulties may be due to academic concerns, organizational or study skills, or social or emotional concerns. Therefore, it is not unusual for one of the district's support staff to become involved in the discussions with you and the teacher to help your child.

Who can refer a student to the Intervention Team?

Any staff member who has been involved with the student may make a referral to the Intervention Team. You as the parent may also refer your child to the Intervention Team. This referral may also come from an outside agency or person who has been seeing the child, such as a physician or private counselor.

What role do I play in the Intervention Team Meetings?

You may be the individual who referred your child to the intervention team, or you may be involved as a source of information in assisting the team in developing a complete picture of your child. You may also be asked to help the team develop and implement strategies for both school and home to help your child be more successful. Sometimes a teacher may call an intervention team meeting to discuss classroom strategies, and the parent may not be involved.

What types of recommendations does the Intervention Team make?

Each student is an individual, so the recommendations from the intervention team cannot be predicted. The recommendations will depend on the needs of your child at the time. The following are examples of possible recommendations:

- *Repeating directions more than once.*
- *Using more visual aids, such as graphs and pictures.*
- *Asking the parent to read with the student for 15 minutes each night.*
- *Classroom management strategies for teachers to try, such as:
Giving the students time at the end of the period to write the homework assignment and organize their handouts from the class.*
- *Asking the parent to check the student assignment notebook each night.*
- *Using the same routine every day in class.*

Behavior management strategies, such as:

- *Discussing the expectations for all students.*
- *Communicating with the parent each day on how the student did in school and ask the parent to reward “a good day.”*
- *Posting the “classroom rules” on the board.*
- *Provide the student with clearly written expectations for behavior in the class, school environment.*
- *Support services, such as:*
 - *Additional reading or math instruction in a “reading lab” or “math lab.”*
 - *Social work counseling or guidance counseling individually or with a group of students.*
 - *A written behavior plan for all staff to follow, with communication to home.*
 - *Parent support training and/or After-school support to the student*

What kinds of records are kept by The Intervention Team

The intervention team maintains a folder with the referral and minutes that include the recommendations and follow-up notes. This folder is kept separate from your child's cumulative school folder. It is used only as an information source for successful programming for your child. If a referral is made to the Committee on Special Education, it is shared with that Committee. The information is accessible to you or anyone you would like it shared with outside the school, such as your child's physician or counselor. Your written permission is required to share it with anyone outside the school environment.

What if my child continues to struggle?

Each child is an individual learner with different characteristics. Investigating a learning or school difficulty can take the time and effort of many people, including you. It may be as simple as matching a particular type of instructional strategy to your child's learning style or providing a specific support service. It may be as complicated as trying a variety of strategies and program adjustments over a much longer period of time.

It is important to remember that each child's learning is affected by maturation, environment, development and emotional factors. Sometimes it takes just the right combination of approaches and student investment. Other times, it may seem like a frustrating journey of trial and error. When it appears that you and the school team have explored all avenues and little or no progress is seen, you or the Intervention Team will want to make a referral to the Committee on Special Education to determine whether your child has a disability that is impacting his/her learning.

Section 2: REFERRAL

How to make a referral to the Committee on Special Education (CSE)?

If you think that your child may have a disability that is impacting his/her learning or success in school, you can contact your child's school counselor, the building principal or the preschool/kindergarten, elementary or secondary Committee on Special Education chairperson. Each of these people will discuss your concerns with you and inform you of the process that must be followed to make a referral. You may also contact the preschool/kindergarten, elementary or secondary CSE secretary in the Special Education Department, who will explain how to make a referral and will send you the necessary paperwork. Your referral is a written statement asking that the school district evaluate your child to determine if he or she has a disability and needs special accommodations and/or special education services. The written referral should indicate that you suspect your child has a disability and include the reasons why you suspect a disability.

What is the Committee on Special Education (CSE)?

Stillwater has two Committees on Special Education—one for preschool students, and one for elementary and secondary students (gr. K-12). The Committee on Special Education is often referred to as the CSE. The Committee for Preschool Education is often referred to as the CPSE. The CSE/CPSE is a multi-disciplinary team that coordinates the:

- *Referral: This section describes the referral process;*
- *Evaluation: Section 3 describes the evaluation process; and*
- *Determination and placement:*
The CSE meets to determine a student's eligibility and placement and services if needed. Section 4 describes the CSE meeting.

Who is on the CSE?

The CSE is made up of the following individuals who are required by federal and state regulations:

- *Chairperson, an individual who represents the school district and who is qualified to provide or supervise special education services and is knowledgeable about the general education curriculum and the availability of resources in the district;*
- *You, the parent of the student;*
- *Regular education teacher of the student whenever the student is or may be participating in the regular education environment;*
- *Special education teacher of the student, or if appropriate, special education provider of the student, such as speech pathologist, social worker etc.;*
- *School psychologist who understands and can talk about the evaluation results and how these results affect instruction;*

- *Parent member (who is a district parent of a child with a disability), unless you request that the parent member not participate;*
- *Student, if appropriate;*
- *School physician, if requested in writing by you (or the school) at least 3 days in advance of the meeting; and*
- *Other individuals that have knowledge or special expertise regarding your child (as requested by the school or you).*

Who can make a referral to the CSE/CPSE?

You can make a referral to the CSE. All the individuals who can make a referral to the CSE include:

- *Professional staff member at school, such as the child's teacher or school counselor;*
- *The student if he or she is 18 years of age or older;*
- *A physician;*
- *The Intervention Team or Student Study Team (SST);*
- *A judicial officer, such as family court judge or probation officer; or*
- *The commissioner of a public agency, such as Social Services.*

What happens when a referral is made?

You will be notified whenever anyone refers your child to the CSE. You may be notified by the principal who may want to talk with you about the referral. If you or the principal believe that it is too early to make a referral and that there are support services or instructional strategies that should be tried first, you and the principal may talk about withdrawing the referral. If you and the person who made the referral agree to withdraw it, you will establish a time to get back together to see if the strategies or services have resolved the concerns.

The chairperson of the Committee on Special Education will also review the referral and determine what evaluations are needed to determine whether your child has a disability that is impacting learning. The CSE chairperson will also contact you about the referral. The CSE Chairperson will send you a letter notifying you of the referral. This notice will include:

- *A letter describing the referral process;*
- *A copy of **Special Education in New York State for Children Ages 3-21: A Parent's Guide**;*
- *A copy of your **Due Process Rights**;*
- *A consent form for you to provide written consent for the required evaluations to be completed; and*
- *A social history form for you to provide important information about your child's development to the Committee.*

When you receive notice that your child has been referred to the Committee on Special Education, you may want to discuss the referral. You may contact the CSE chairperson and ask about the referral.

What if I don't want my child referred?

If you do not believe that your child needs to be referred to the CSE or you believe that more should be tried within regular education to support your child's needs, you should contact your child's principal, the school psychologist or guidance counselor. You may request a meeting with any of the staff members at any time to discuss your concerns. If you and the individual making the referral agree that, with the provision of additional regular education support services, the referral is unwarranted the referral can be withdrawn. You, the Principal, and the individual making the referral must agree in writing to the additional regular education support services to be provided and the proposed duration of such program supports. This process can occur through the SST or Intervention Team.

SECTION 3: **THE EVALUATION**

What is an evaluation?

After a referral to the CSE, you will be asked for written consent for the school district to evaluate your child to determine if he or she has a disability and needs special education supports. The evaluation is a series of assessments or tests given in cognitive, academic and behavioral areas. These evaluations also include observations, teacher's comments, a social history review and parent comments and concerns.

Who is involved in the evaluation of my child?

A team of professionals from your school district will conduct a comprehensive assessment of your child's skill and abilities. The team may consist of your child's teachers, the school psychologist, school nurse, school social worker and any other people involved with your child's education. The school may also ask for your written consent to obtain information from your child's pediatrician or other community supports who work with your child.

What is my role in the evaluation?

You have an important role in the evaluation of your child. You will be asked to complete a social history that provides information about your child's development. The evaluator will also speak with you about your specific concerns and hopes for your child. If you have information about or copies of earlier evaluations of your child, you are asked to share them with the evaluation team. Any information that you can provide to help the team determine your child's strengths and needs in learning, social and emotional development, and physical development are welcomed by the school's evaluation team.

What types of evaluations will my child need?

Some of the evaluations your child may need include:

Physical examinations: Vision, hearing, physical development and medical needs will be obtained from your child's school health records. You may be asked to provide additional medical records or consent for the school to obtain such records.

Psychological evaluation: A psychological evaluation is required for all students to be considered by the CSE. The school psychologist may give tests to determine general intelligence, learning strengths and weaknesses, instructional needs and social-emotional strengths and needs. Or the school

psychologist may determine, by reviewing the educational record, that sufficient psychological testing has been completed and no further testing is needed.

Social history: *You will be asked to provide information about your child's development up to this point. For example, you may be asked when your child began speaking, walking, etc.*

Classroom observation: *A school psychologist or teacher will observe your child's learning styles, attention span and relationships to teachers and peers in the classroom setting.*

Educational evaluations: *A certified special education teacher or school psychologist may give individualized tests to assess your child's reading, writing, math and spelling skills.*

Related services evaluation: *District therapists (speech and language, occupational therapy or physical therapy) may be asked to test your child's speech, language, fine and gross motor development, hearing or vision as appropriate.*

Behavioral evaluation: *A variety of rating scales may be used to assess your child's social-emotional development.*

Vocational assessment: *Older students (age 12 and older) will be asked about future employment, work-related skills and interests.*

What do the different test scores mean?

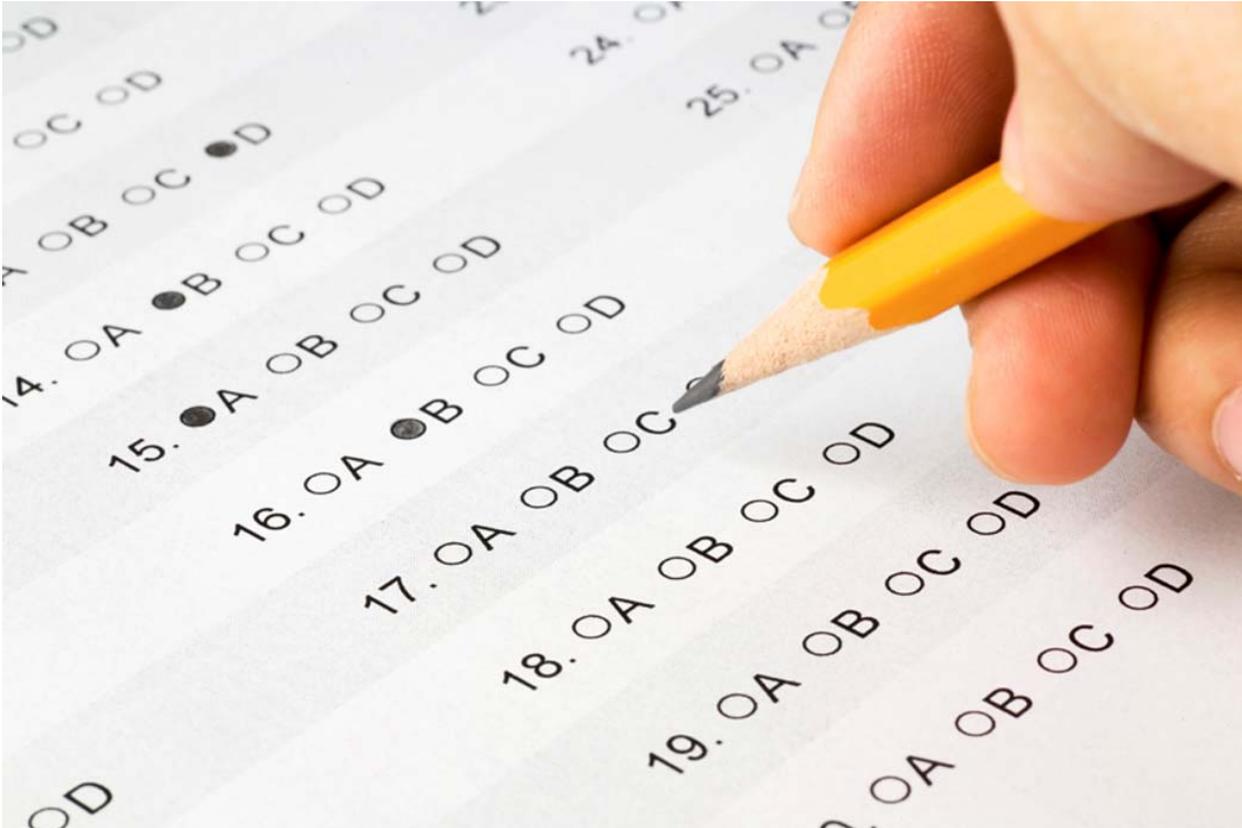
Teachers and psychologists use standardized tests, often norm- referenced tests, to provide the CSE with information to make decisions about eligibility for special education services and to determine need for specific services. At the meeting, you may often be confused when you hear discussions about percentiles, stanines and grade equivalents. Hopefully, the following information can help you understand the test scores of your child. But don't be afraid to ask for an explanation at the meeting. Regulations require that at least one member of the CSE be able to interpret test scores for the other members of the Committee. A norm-referenced test compares an individual student's performance on the test with other students of the same age or grade who have taken the test. The student's performance on the test can be stated as a percentile, a stanine, a standard, or grade or age equivalent score.

Age-equivalent scores *may seem easy to understand but are often misunderstood. An age- equivalent score means that the student has the same score as the average student at that grade level. It does not mean that the student has achieved the skills or knowledge at that grade level.*

Standard scores *tell how far the student's score is from the mean or average score of the norm group. On most tests the average is between 90 and 110.*

Stanine scores *are scores on a nine-unit scale from 1 to 9, where a score of 5 is right in the middle. The highest stanine is 9; the lowest is 1, Stanine scores of 4 and 6 are considered within the average range.*

Test scores from standardized tests are only one source of information that a CSE uses to discuss a student's progress and determine services needed for the coming year. Performance in class as indicated by report card grades, behavioral scales, authentic assessments, observational data and reading inventories are examples of other types of information that may be used. If you have information from testing your child has had previously outside of the district or from counselors or physicians your child sees, please share this with the CSE chairperson before the CSE meeting. This information may be very useful in determining whether your child has a disability.



Who pays for these evaluations?

These evaluations are at no cost to you as the school district pays for them. For medical evaluations (e.g., neurological, central auditory processing, if needed) you may be asked to use your health insurance to cover the cost of the evaluation.

How often is my child evaluated?

If it is determined that your child has a disability and needs an Individualized Education Plan (IEP), your child will be re-evaluated at least every three years. You or the school may decide to do a re-evaluation earlier, if needed.

What if I disagree with the evaluation from the school district?

If you disagree with the school district's evaluation, you have the right to obtain an independent evaluation and to request that it be at public expense. If you disagree with the school district's evaluation you must make your request for an Independent Education Evaluation (IEE) in writing to the Director of Special Education Services. In your written request, you must state what disagreement you have with the district's evaluation. The Special Education Office will send you a list of independent evaluators from which you can select an evaluator for your child. The PPS Office will send consent to the independent evaluator to contact you and make arrangements for the independent evaluation. The independent evaluator will charge the school district for the evaluation and will send both you and the school district a copy of the evaluation report.

What happens after the evaluation?

The CSE will meet to review the evaluation results and discuss the recommendations made in the evaluations. The CSE (and you because you are a member of the CSE) will decide whether your child has a disability and meets the eligibility criteria to be identified as a student with a disability under the Individuals with Disabilities Education Act (IDEA). If it is determined that your child is eligible, the CSE will develop an Individualized Education Plan for your child. If the CSE determines that your child is not eligible for an IEP, the CSE will discuss what recommendations should be made to your child's principal for supports through regular education.

SECTION 4: **THE INITIAL CSE MEETING**

Who is at the CSE meeting?

The CSE is appointed by the Board of Education to determine eligibility and to recommend the appropriate level of special education services for the student. Members of the CSE include:

- *You, the parent*
- *CSE chairperson*
- *Regular education teacher*
- *Special education teacher*
- *School psychologist*
- *Parent member*
- *Student, if appropriate*
- *School physician*
- *Other individuals who have knowledge or special expertise regarding your child*

Whom can I bring to the CSE meeting?

You can bring anyone who has knowledge or special expertise regarding your child. These people may include your child's therapists, doctors, etc. You may also bring an advocate or a friend or relative who can support you and help you advocate for your child's needs. You will need to notify the CSE chairperson if you plan to bring anyone to the CSE meeting with you so they can be added to the invitation documentation. Any outside evaluations must be sent to the Special Education office five days prior to the meeting.

How do I prepare for the CSE meeting?

- Make sure you have a copy of any reports and evaluations that will be reviewed at the CSE meeting.
- Review all the reports and evaluations.
- Write down any questions' concerns you have regarding your child.
- Learn about your child's suspected disability.
- Know your child's legal right to a free, appropriate public education (FAPE).

What happens at the CSE meeting?

The CSE chairperson will ask each member of the committee to introduce himself/herself and indicate his/her relationship to your child. If you have any questions about the presence of any member, you should ask for clarification. The chairperson will state the purpose of the meeting and indicate the evaluations that are to be reviewed. The chairperson will ask the evaluator or the member who can interpret test results (psychologist) to review the evaluation and any recommendations included in the evaluation. As each evaluation is reviewed, you and any other member of the Committee will have an

opportunity to ask for clarification of any part of the evaluation(s) that are not clearly understood. You should feel free to ask the evaluator to explain any terms that you do not understand.

Once the evaluations are reviewed, the chairperson will ask members to share their opinions about the evaluations and the question of whether your child meets the criteria as a student with a disability. The CSE members together will decide if your child is to be classified as a student with a disability. If there is not consensus among the Committee members, the CSE chairperson will make the determination.

If it is determined that your child has a disability, the CSE will develop an Individualized Education Plan (IEP) for your child. In most instances, an IEP has been drafted by the evaluator to be reviewed by the Committee. This plan will outline your child's current levels of performance and needs defined by the assessments and evaluations.

What are the possible outcomes of the CSE meeting?

There are several possible outcomes from the CSE meeting:

- ***The CSE may determine that your child does not meet the eligibility criteria as a student with a disability under the Individuals with Disabilities Education Act (IDEA). In other words, your child's difficulties do not have a significant adverse impact on progress in achieving the learning standards, and your child does not require special education services.***
- ***The CSE, which can also serve as the Section 504 Committee, may determine that your child does meet the eligibility criteria for a student with a Section 504 Plan. In other words, your child's difficulties have a significant impairment on a major life function, but your child does not require special education services mandated by IDEA. Your child will be identified as a student with a disability under Section 504 of the Vocational Rehabilitation Act. The Committee will develop a 504 plan that provides your child with accommodations.***
- ***The CSE may determine that your child does have a disability and requires special education services. The Committee will develop an Individualize Education Plan (IEP) for your child. The IEP will be sent to the Board of Education for approval, and you will receive a finalized copy in the mail after the meeting. The services and/or programs can begin following the approval by the Board.***

What is an Individualized Education Plan (IEP)?

An IEP is a plan that outlines your child's strengths and needs in a section called Present Levels of Educational Performance (PLEP). The PLEP describes your child's strengths and learning needs related to the disability and includes assessment data, teachers' observations and your observations and concerns in the following areas:
education and academic, social, physical and management.

Next, the IEP describes annual special education goals for your child that will help your child develop skills and strategies to minimize the impact of the disability. The IEP does not list goals relating to the general education curriculum and New York State learning standards but includes goals that help your child access the NYS learning standards for all students. The annual goals are for the coming year and are developed based on the learning needs identified in the PLEP. For example, if your child has needs

relating to the disability in reading, a goal to improve reading will be developed. For students who are 15 years or older, the IEP also includes post-secondary goals. These are your and your child's goals for your child's education, employment, and community living after high school.

Next, the IEP describes what special education and related services are needed to help your child achieve the IEP goals. The concept of least restrictive environment (LRE) is applied by the CSE in developing the services for your child. Least restrictive environment means the program and services developed for your child are those that:

- *are needed by your child;*
- *are provided with other students who do not have disabilities as much as possible; and are as close as possible to your child's home.*



What is a 504 Plan?

The 504 plan addresses four questions regarding your child's needs:

1. What is the nature of the problem causing a significant impairment on your child's learning or success in school?
2. What evaluations or documentation was used by the Committee to determine your child's disability?
3. How does the disability affect a major life activity?
4. What are the reasonable accommodations that are needed for your child to access the general education curriculum?

These accommodations may be testing accommodations, classroom accommodations, or supports and services needed for your child to access the school and its curriculum.

What if do not agree with the CSE decision?

If you disagree with the decision being made by the CSE at the meeting, you should state your disagreement at the meeting. The CSE chairperson will want to understand your concerns and what your specific disagreements are. The CSE chairperson may want to table the decision of the CSE and gather more information to address your concerns. If the CSE chairperson makes the decision even though there is not consensus, the chairperson will explain your due process rights based on your disagreement with the decision.

If you have concerns after the meeting and decide that you are not in agreement with the decisions made at the meeting, you should call the CSE chairperson. The CSE chairperson will want to understand your concerns and what your specific disagreements are. The chairperson may suggest that the CSE meet again to discuss and resolve your concerns within the Committee. The chairperson may explain your due process rights and tell you how you can appeal the decision of the CSE.

To appeal the decision of the CSE, you must file a due process complaint with the school district. A copy of the due process form is available in the *Special Education in New York State for Children Ages 3-21: A Parent's Guide*, published and distributed by the NYS Education Department, Office of Vocational and Educational Services for Individuals with Disabilities. This publication is also available on the NYS Education Department Web site, www.vesid.nysed.gov/specialed/home.html. You may also call the Special Education Office and request a copy of the form.

SECTION 5— EACH YEAR

What is an IEP amendment?

An IEP amendment is any change made to your child's IEP. Most changes to the IEP are made at a CSE meeting. Some minor changes can be made to your child's IEP if both you and the CSE chairperson agree in writing to the proposed changes. Changes made when your child moves to a lesser restrictive environment can be made with an amendment signed by the Chairperson and parent. Changes made to a more restrictive setting can only be made through a CSE subcommittee meeting. The Board of Education must then approve the recommended change.

How do I ask for an IEP amendment?

If you would like any part of your child's IEP changed, you should send a written request for a CSE meeting to the CSE secretary in the Special Education Office. In your request, you should state that you would like a CSE meeting for your child to discuss a change to his/her IEP. You should state the specific change you would like made to the IEP. The CSE secretary will share your request with the CSE chairperson and a CSE meeting will be scheduled within a reasonable time. The CSE chairperson may contact you to discuss your request and discuss if any specific information or individuals should be available at the CSE meeting. Some requests for amendments, as stated above, can be accomplished through written amendments.

Whom do I contact if I have questions about my child's special education services?

You should contact your child's service provider or case manager if you have questions about a specific service your child is receiving. For example, if you have questions about the speech/language services, contact your child's speech/language pathologist. If you continue to have questions or concerns after speaking with the service provider, you should contact your child's guidance counselor, principal or CSE chairperson.

What is the annual review process?

In the spring of each year, the Committee on Special Education (CSE) meets to discuss each student with an Individualized Education Plan (IEP). The purpose of the meeting is to review the progress the student has made as a result of this year's plan and to develop a plan for the coming year. Your participation in this meeting is important for your child. There is a lot to cover in the meeting and many participants. The following tips can help you get the most from your child's meeting.

How do prepare for the annual review meeting?

You should receive a copy of the draft IEP one week prior to the meeting. If you do not receive the draft IEP, call your child's special education teacher or CSE chairperson. Read through the draft. Make notes right on the draft of your questions and ideas. Make a list of questions you want to ask during the meeting.

If you have many questions or concerns about the draft IEP, call your child's special education teacher or your CSE chairperson for a discussion of your concerns before the meeting.

Resolve issues prior to the meeting. Plan to meet with your child's special education teacher before the meeting to discuss goals, objectives, services and any concerns and questions you have. This will help resolve any questions you have and will help the team include your input in the draft IEP.

Be open to possible solutions. Parents and school staff may have different opinions on the best way to address a student's educational needs. Differences can be resolved positively if all participants work cooperatively and collaboratively.

Express yourself. CSE meetings can be intimidating due to the large number of people who participate.

Be honest and clear in expressing your thoughts. The annual review meeting is to focus on your child's plan for next year. You may need to express your concerns about things that did not go as well as planned this year, but then move on. Stay positive and focused on what is needed for next year.

Bring help. If it is helpful to you, bring a friend to assist and support you. Another person who knows your child well may also be helpful to you. Other parents who are familiar with the IEP process may be helpful. If you are planning to bring someone with you, notify the CSE secretary or chairperson.

Negotiate and communicate. In some instances it may be necessary to negotiate issues. Communicate specific items you wish to discuss to the CSE chairperson prior to the meeting. A pre-conference may be helpful to discuss various options and ideas.

What else might happen at the annual review?

Your child may be due for his/her reevaluation at the time of the annual review. Remember, earlier we said that the CSE must reevaluate your child at least every three years. At the reevaluation, which may happen at the annual review, the CSE determines whether your child continues to have a disability that requires an IEP and special education services. If it is determined that your child no longer needs an IEP, your child will be declassified.

What does it mean to be declassified?

When a student is declassified, the student is no longer considered a student with a disability. When the CSE makes a decision to declassify a student, the CSE must document the reason for declassification and must answer the following questions:

Does the student require declassification support services?

Declassification support services are not special education services; they are provided as supports to the student or the student's teacher to aid in the transition from special education to full-time regular education. Declassification support services may be provided for up to one year and may include: psychological services, social work services, speech and language improvement services, some program modifications and testing accommodations if decided by the CSE.

Does the student require continuation of any test accommodations?

The CSE must review the test accommodations the student was receiving as part of his/her IEP and

determine whether the student should continue to receive any of these test accommodations. Your child may continue to receive any test accommodations decided at his/her declassification meeting throughout high school.

Does the student require continuation of a second language exemption?

The CSE must review whether the student had a second language exemption. If the student had a second language exemption as part of his/her IEP, the CSE must determine whether the student should continue to receive the second language exemption throughout high school.

The CSE documents this declassification information in a declassification plan, which becomes part of the student's cumulative file. This file follows the student from grade to grade throughout his/her public schooling.

SECTION 6:

HELPFUL HINTS FOR PARENTS

How can I develop a trusting home-school partnership?

It's helpful to you and your child to work in partnership with the school. While you might not always agree with them, the school teachers truly care about your child and want to provide him/her the best possible education. Here are some ways to develop a trusting partnership with your child's school:

Attend your child's school open house. Here you will have an opportunity to meet your child's teachers and learn about the school and classroom expectations for all students. With this information, you can help the school learn about your child's unique needs.

Contact your child's teacher (and other staff working with your child, such as a speech therapist, psychologist, or social worker) at the beginning of the year. No one knows more about your child and no one has more influence over your child than you. By working together you and the teacher can help your child have a successful school year.

Many schools have parent/teacher conferences during the year to offer you opportunities to learn more about your child's education, teacher, and school. Sharing information and working together helps your child. What you have to say is important. You have information about your child's strengths, talents, hobbies and interests that can help the teacher. Meeting with your child's teacher will help build strong parent-teacher partnerships. Meetings are successful when both parents and teachers work as partners to help children succeed in school.

Technology allows you to be on top of your child's education with the parent portal, teacher's websites and e-mail communication.

When you have a concern, talk to someone about it. Try to work out any differences informally with your school district as soon as they happen. Call or e-mail the person who you think knows most about your concern. Typically, you would use the following chain to discuss your concern. If you don't feel satisfied after speaking with the teacher or therapist, go to the next level.

- The teacher or therapist
- The subject supervisor
- The principal
- The CSE chairperson
- The director of Pupil Personnel Services
- The Superintendent
- The Board of Education

How do prepare for a Parent-Teacher conference?

- Ask your child if there is anything special you should share with or ask the teacher
- Make a list of what you want the teacher to know about your child.
- Make a list of questions you may have.

- Bring to the meeting ideas that you have for addressing any concerns you may have about your child's education.

SECTION 7:

RESOURCES

Acronyms:

ADA	Americans with Disabilities Act
ADD/ADHD	Attention Deficit Disorder Attention Deficit Hyperactivity Disorder
AE	Age Equivalent
AIS	Academic Intervention Services
APE	Adaptive Physical Education
ASD	Autism Spectrum Disorder
ASL	American Sign Language
AT	Assistive Technology
AU	Autism
BOCES	Board of Cooperative Educational Services
BOE	Board of Education
COTA	Certified Occupational Therapy Assistant
CPSE	Committee on Preschool Special Education
CSE	Committee on Special Education
CST	Child Study Team
DB	Deaf and Blind
DD	Developmental Disability
DHH	Deaf Hard of Hearing
ED	Emotionally Disturbed
ERSS	Educationally Related Support Services
ESY	Extended School Year
FAPE	Free and Appropriate Public Education
FBA	Functional Behavioral Assessment
FERPA	Family Educational Rights and Privacy Act
IDEA	Individuals with Disabilities Education Act
IEE	Independent Education Evaluation
IEP	Individualized Education Program
IH	Impartial Hearing
IHO	Impartial Hearing Officer
IQ	Intelligence Quotient
ITP	Individual Transition Plan
LD	Learning Disabled
LEA	Local Education Agency, local school district

OT	Occupational Therapy
PDD	Pervasive Developmental Disorder
PLEP	Present Levels of Educational Performance
PPS	Pupil Personnel Services
PT	Physical Therapy
SEA	State Education Agency
SED	State Education Department
SEIT	Special Education Itinerant Teacher Services
SI	Speech Impaired
SLP	Speech Language Pathologist
ST	Speech Therapy
TBI	Traumatic Brain Injury
VESID	Office of Vocational & Educational Services for Individuals with Disabilities
VI	Visually Impaired
LRE	Least Restrictive Environment
MD	Multiple disabilities
ID	Intellectual Disability
NCLB	No Child Left Behind (federal law)
OHI	Other Health Impaired
OI	Orthopedically Impaired

Glossary of Terms

Achievement test: a test that measures competency in a particular area of knowledge or skill; measures mastery or acquisition of skills.

Adapted physical education: a specially designed program of developmental activities, games, sports and rhythms suited to the interests, capacities and limitations of students with disabilities who may not safely or successfully engage in unrestricted participation in the activities of the regular physical education program.

Adaptive behavior: the effectiveness with which the individual copes with the natural and social demands of his environment.

Attention Deficit Hyperactivity Disorder (ADHD): the affects an individual’s ability to sustain and control age-appropriate attention, impulsiveness and activity level. The cause of ADHD is often genetic. It can also be due to environmental factors. ADHD children have difficulty regulating their own behavior or organizing and processing the information they are given. ADHD is now the clinical term for both ADD and ADHD, the “H” being evidence of hyperactive behavior.

Advocate: an individual who is not an attorney, who assists parents and children in working with school districts regarding the children’s special education programs.

Alternative assessments: a portfolio which explains your child’s present levels or abilities that is not a standardized test. This portfolio is used to get information about what students know and where they may need help (e.g., oral reports, projects, portfolios or collections of works, demonstrations, performances and experiments). These are based on your child’s Individual Education Plans.

Annual goals: a required component of an IEP. Goals are written for an individual student and can be set for a maximum of one year.

Annual review: an evaluation, conducted at least annually by the Committee on Special Education, of the status of each student with a disability and each student thought to have a disability who resides within the school district for the purpose of recommending the continuation, modification or termination of the provision of special education programs and services for the student to the Board of Education. At the annual review, the IEP for the coming year is prepared.

Approved private school: a private school that conforms to the requirements of federal and state laws and regulations governing the education of students with disabilities and that has been approved by the commissioner for the purpose of contracting with public schools for the instruction of students with disabilities.

Arbitration: a formal hearing conducted by one or more arbitrators who may be officially sanctioned to reach decisions that are “binding” on the parties. Each side presents arguments with much of the same formality of a court hearing. The arbitrator then decides how the dispute is to be resolved.

Assistive technology: device or equipment used to maintain or improve the capabilities of a child with a disability.

Assistive technology service: any service that directly assists a student with a disability in the selection, acquisition or use of an assistive technology device. The term includes evaluation; purchasing, leasing or otherwise providing for the acquisition of assistive technology devices by students with disabilities; selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing or replacing assistive technology devices; coordinating and using other therapies, interventions or services with assistive technology devices; training or technical assistance for a student with a disability; and training or other technical assistance for professionals who provide services to the student.

Association: the ability to categorize visually those relationships that go together; ability to understand relationships.

Attention: the ability to focus (attend) with eyes and/or ears for a period of time without losing the meaning of what is being said.

Audiology: this related service includes identification and determination of hearing loss, and referral for rehabilitation of hearing.

Auditory discrimination: the ability to discern likenesses or differences in sound.

Autism: a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three, that adversely affects a student’s educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines and unusual responses to sensory experiences. The term does not apply if a student’s educational performance is adversely affected primarily because the student has an emotional disturbance. A student who manifests the characteristics of autism after age three could be diagnosed as having autism.

Baseline measurement: the counting and recording of how often a certain behavior occurs. The baseline is usually the beginning data collection prior to initiating a change.

Basic skills: the skill in subjects like reading, writing, spelling and mathematics.

Behavior Intervention Plan [BIP]: an individualized plan of positive behavioral interventions in the IEP of a child whose behaviors interfere with his/her learning or that of others.

Chronologically age appropriate: a standard by which children's activities may be evaluated. Instruction and materials should be directed at the student's actual age, rather than to the interests and tastes of the child.

Cognitive: a term which refers to reasoning or intellectual capacity.

Compensate: a term meaning to make up for.

Conceptualization: the intellectual processing of information or experiences (thinking) at three different levels: Concrete level: An apple is round and has smooth skin; Functional level: The apple can be eaten or made into jelly; Abstract level: The apple is fruit.

Consent: an acknowledgement that you have been informed, in the language you speak or other kind of communication that you understand, of all the information about the activity for which your permission is asked; that you understand and agree in writing to the activity for which your permission is needed; that your permission is given freely and may be withdrawn at any time. However, if you withdraw your consent, it is not retroactive (i.e., it will not apply to actions already taken by the district).

Consultant teacher services: are direct and/or indirect services provided by a certified special education teacher to a student with a disability who attends regular education classes and/or to such student's regular education teachers. Direct consultant teacher services are services provided directly to the student to aid the student to benefit from the student's regular education classes. Indirect consultant teacher services refer to consultation provided to regular education teachers to assist them in adjusting the learning environment and/or modeling their instructional methods to meet the individual needs of a student with a disability who attends their classes.

Cooperative learning: an approach through which students learn in small, self-instructing groups and share responsibility for each others' learning.

Correlation: relationship between two scores or measures.

Criterion referenced tests [CRTs]: measure how well a student has learned a specific skill or subject. They are not tests that produce a number quotient but, rather, show what a student can or cannot do.

Critical thinking: the ability to find information and use it to reach a logical conclusion or to solve a problem.

Committee on Special Education (CSE): a multi-disciplinary team appointed by the Board of Education to determine eligibility and appropriate services for students with disabilities.

Cumulative file: General file maintained by the school; parent has right to inspect the file and have copies of any information in it.

Curriculum-based assessment: a methodology of increasing importance in special education in which a child's progress in the curriculum is measured at frequent intervals.

Deaf -blindness: simultaneous hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational problems that a child cannot be accommodated in special education programs solely for children with deafness or children with blindness.

Deafness: a hearing impairment that is so severe that a child is impaired in processing linguistic information through hearing, with or without amplification, which adversely affects educational performance.

Development: stages of growth from babyhood on up, observable in sequential steps. The approximate ages in which steps in development occur are charted in developmental scales. Development is usually measured in the following areas: fine motor, self-help, gross motor, social-emotional, cognitive and language.

Developmental lag or delay: a delay in the appearance of some steps or phases of growth in any of the above areas.

Diagnostic test: test that diagnoses or locates the areas of weaknesses or strengths.

Direct instruction: presents new content and skills in strict order. Students practice the content and skill in class exercises and homework and are evaluated by tests similar to practice exercises.

Disability: a physical, sensory, cognitive or affective impairment that causes the student to need special education.

Due process hearing: a procedure, designed to be fair, timely and impartial, for resolving disputes that arise between parents and school districts regarding the education of students with disabilities.

Educational goal: the level of educational achievement accepted as reasonable and desirable for a specific child at a specific time and at a specific rate of speed.

Emotional disturbance: a condition exhibiting—over a long period of time and to a marked degree—one or more of the following characteristics that adversely affects a student’s educational performance: an inability to learn that cannot be explained by intellectual, sensory or health factors; an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; inappropriate behaviors or feelings under normal circumstances; a generally pervasive mood of unhappiness or depression; or a tendency to develop physical symptoms or fears associated with personal or school problems. The term does not apply to students who are socially maladjusted, unless it is determined that they have an emotional disturbance.

English as a second language (ESL): programs to help children whose first language is not English study English.

Extended-school year services (ESY): special education and related services that are provided during the summer.

Expressive language: ability to communicate by using words, writing or gestures.

Functional behavioral assessment (FBA): an assessment that may be recommended or may have been completed for a student who has behaviors that interfere with his/her learning or the learning of others. The assessment looks at the behavior and tries to determine the cause of the behavior.

Family Educational Rights and Privacy Act (FERPA): A federal law that regulates the management of student records and disclosure of information from those records. The act has its own administrative enforcement mechanism.

Fine motor: functions that require tiny muscle movements (e.g., writing or typing).

Functional curriculum: a curriculum focused on practical life skills, and usually taught in the community-based setting, with concrete materials that are a regular part of everyday life. The purpose of this type of instruction is to maximize the student’s generalization to real life use of his/her skills.

Group, individual or consult services: may be listed on the IEP as G, I, or C. Individual means your child is being seen one-to-one with the service provider. Group means your child is with other students with the service provider. Consult means the provider is working with your child's teacher or other providers on behalf of your student.

Grade equivalent: the average raw score for all children in the same school. [For example, if the average raw score of all third graders is ten correct on a math test, this raw score is converted into a grade equivalent score of 3.0, meaning grade three, zero months.] These scores provide a very rough estimate of a child's mastery of academic work or capacity to learn.

Gross motor: functions that require large muscle movements (e.g., walking or jumping).

Independent Educational Evaluation (IEE): a procedure, test or assessment done by a qualified examiner who does not work for the school district or other public agency responsible for the child's education. You may get an IEE at district expense if you disagree with the evaluation arranged for by the school district. "At district expense" means that the school district pays for the full cost of the test.

Individualized Educational Plan [IEP]: a document developed at an IEP meeting that sets the standard by which subsequent special education services are usually determined appropriate.

IEP team: develops the Individual Education Plan. By law, the team should include parent(s), general education teacher, special education teacher, special services providers, school district representative, person knowledgeable in evaluating the child's disability, others invited by the parent or school district and, in some cases, the student.

Impartial Hearing Officer: an individual assigned by a Board of Education or by the Commissioner to conduct a hearing and render a decision. An Impartial Hearing Officer shall: (1) be an individual admitted to the practice of law in the State of New York who is currently in good standing and who has a minimum of two years practice and/or experience in the areas of education, special education, disability rights or civil rights; or be an individual certified by the State of New York as an impartial hearing officer on September 1, 2001.

Individual Evaluation: any procedures, tests or assessments used selectively with an individual student to determine whether a student has a disability and the extent of his/her special education needs. This includes a physical examination, an individual psychological evaluation (except where a school psychologist has determined that a psychological evaluation is unnecessary to evaluate a student of school age), a social history and other appropriate assessments or evaluations as may be necessary but does not include basic tests administered to, or procedures used with, all students in a school grade or class.

Individual psychological evaluation: a process by which a New York State-certified school psychologist or licensed psychologist uses, to the extent deemed necessary for purposes of educational planning, a variety of psychological and educational techniques and examinations in the student's native language to study and describe a student's developmental, learning, behavioral and other personality characteristics.

Initial evaluation: determines whether a student is eligible to receive special education services or needs an IEP.

Instruction: refers to the methods teachers use. Common methods of instruction are lecture, discussion, exercise, experiment, role play, small group and writing assignments.

Kinesthetic: through body movements.

Learning characteristics: physical factors, attention factors, preferred input channel, preferred response channel, level of cognitive development and capacity to work independently or not.

Learning disability: a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which manifests itself in an imperfect ability to listen, think, speak, read, write, spell or do mathematical calculations. The term includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. The term does not include learning problems that are primarily the result of visual, hearing or motor disabilities, mental retardation, emotional disturbance or environmental, cultural or economic disadvantage.

Least restrictive environment: the placement of an individual student with a disability in the least restrictive environment that shall:

provide the special education needed by the student; provide for education of the student to the maximum extent appropriate to the needs of the student with other students who do not have disabilities; and be as close as possible to the student's home.

Limited English Proficient (LEP): refers to students who are not at grade-level in reading and writing English and for whom English is second language.

Management needs: the environmental modifications and staff or material resources that the student needs to benefit from instruction.

Manifestation determination: a meeting of the IEP team when a child with a disability acts out in school, or violates a school rule. It is an investigation of whether or not the behavior is related to his/her disability (manifestation of the disability). Behaviors are a manifestation of a child's disabilities if those behaviors are directly caused by the student's disabilities. The meeting must be held if the student is suspended 10 or more days in a school year.

Mediation: a voluntary dispute resolution process for you and the school district to work out disagreements about the recommendations of the CSE or CPSE. All school districts must offer mediation to parents. You and a person chosen by the Board of Education meet with a qualified and impartial mediator from the Community Dispute Resolution Center (CDRC) in your county who helps in reaching an agreement about the recommendation for your child.

Mediator: a qualified and impartial individual who is trained in effective mediation techniques to resolve conflicts and who is knowledgeable in laws and regulations relating to the provision of special education services. An individual who serves as a mediator may not have a personal or professional interest which would conflict with his or her objectivity in the mediation process and may not be an employee of a school district or program serving students with disabilities.

Medical services: evaluative and diagnostic services provided by a licensed physician or by another appropriately licensed or registered health professional in consultation with, or under the supervision of, a licensed physician to determine whether a student has a medically related disability which may result in the student's need for special education and related services.

Memory sequence: ability to remember, in order, what has been seen.

Mental age: this refers to the score a person receives on an intelligence test. It compares scores to the results achieved by other children given the same test at the same age.

Intellectual Disability (ID): significantly below-average general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period, that adversely affects a student's educational performance.

Multiple disabilities: concurrent impairments (such as mental retardation-blindness, mental retardation-orthopedic impairment, etc.), the combination of which causes such severe educational needs that they cannot be accommodated in a special education program solely for one of the impairments. The term does not include deaf-blindness.

No Child Left Behind: federal law enacted in 2001 to improve education. The law requires each state to set high standards for what children should know and be able to do and requires schools to work toward achieving those standards for all students.

Norm: statistical term which describes the performance of some specified group; “Norm” indicates “normal” or usual or average performance.

Norm-referenced tests (NRTs): compare each student’s score to the scores of students who took the same exam before. Questions are usually based on the content of nationally-used textbooks, not what is taught locally, so students may be tested on things local schools do not teach. Examples: CAT, CTBS, MAT.

Objective tests: are tests in which a single answer key is used. Scorers have no option as to rightness or wrongness of the answer.

Occupational therapy: a special education related service which is usually focused on the development of a student’s fine-motor skills and/or the identification of adapted ways of accomplishing activities of daily living when a student’s disabilities preclude doing those tasks in typical ways.

US Office for Civil Rights (OCR): an agency of the federal government’s executive branch within the Department of Education. It is charged with enforcing a number of civil rights statutes including Section 504.

Orthopedic impairment: a severe orthopedic impairment that adversely affects a student’s educational performance. The term includes impairments caused by congenital anomaly (e.g., clubfoot or the absence of some member), impairments caused by disease (e.g., poliomyelitis or bone tuberculosis) and impairments from other causes (e.g., cerebral palsy, amputation and fractures or burns which cause contractures).

US Office of Special Education and Rehabilitative Services (USERS): an agency of the federal government’s executive branch within the Department of Education.

Other Health Impairment: having limited strength, vitality or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment due to chronic or acute health problems (including but not limited to a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, diabetes, attention deficit disorder or attention deficit hyperactivity disorder or Tourette’s syndrome) and adversely affects a student’s educational performance.

Parent counseling and training: assisting parents in understanding the special needs of their child, providing parents with information about child development and helping parents to acquire the necessary skills that will allow them to support the implementation of their child’s individualized education program.

Percentile rank: a score that reflects a comparison of one child’s performance with that of other students on the same test. Percentile rankings between 25% and 75% are within the average range.

Performance standards: what a student is supposed to be able to do by the end of a particular grade. For example, at the end of third grade, students are expected to know how to multiply numbers.

Present Levels of Educational Performance (PLEP): a section of the IEP that identifies your child's strengths and needs in the following areas: learning and academic, social, physical, and management.

Prior written notice: written notice that is given to you a reasonable time before the school district proposes to or refuses to start or change the identification, evaluation or educational placement or the provision of a free appropriate education to your child. It must be provided to you in the language you speak or other kind of communication that you understand unless it is clearly not possible to do so.

Procedural safeguards notice: the rights provided to parents and school districts in the special education process, including written prior notice, mediation and due process. Procedural safeguards notice is provided upon the initial referral for evaluation of your child; with each notice of a CSE or CPSE meeting; upon reevaluation of your child; when the district receives a letter from you requesting an impartial hearing; and when a decision is made to suspend or remove your child for discipline reasons that would result in a disciplinary change in placement.

Proficiency: mastery or the ability to do something at grade-level.

Receptive language: ability to attach meanings to words or gestures based on experience.

Re-evaluation: (formerly called the triennial evaluation) a review conducted by the Committee on Special Education to determine whether your child continues to be eligible as a student with a disability and whether the special education services provided to your child are appropriate and helping your child meet the NYS learning standards. A re-evaluation is conducted at least once every three years or earlier if conditions warrant one (for example, when a functional behavioral assessment is needed as a result of disciplinary action) or if either you or your child's teacher requests a re-evaluation.

Referral: notice to a school district that a child may be in need of special education.

Regression: the amount of loss of skills a child experiences over an instructional break.

Regular education teacher: (sometimes called general education teacher) a teacher (and member of the CSE) who is qualified to serve non-disabled students and is providing regular education instruction to the student. If the student is not receiving instruction from one or more regular education teachers, a teacher qualified to provide regular education in the type of program in which the student may be placed may serve as the student's regular education teacher.

Related services: developmental, corrective and other supportive services as are required to assist a student with a disability, including speech-language pathology, audiology services, interpreting services, psychological services, physical therapy, occupational therapy, counseling services (including rehabilitation counseling services), orientation and mobility services, medical services, parent counseling and training, school health services, school social work, assistive technology services, appropriate access to recreation (including therapeutic recreation), other appropriate developmental or corrective support services and other appropriate support services that assist in the early identification and assessment of disabling conditions in students).

Remedial services/remediation: a service within general education that provides extra support and instruction to students identified as performing below grade-level in reading, writing or mathematics.

Resource room program: a special education program for a student with a disability registered in either a special class or regular class who is in need of specialized supplementary instruction in an individual or small-group setting for a portion of the school day.

Rubrics: guides for grading tests or student work that describe what the work must include to be considered excellent or satisfactory.

School health services: nursing services provided by a qualified school nurse, or other health services provided by a qualified person, designed to enable a student with a disability to receive a free and appropriate public education as described in the Individualized Education Program (IEP) of the student.

Section 504: provision of the Rehabilitation Act of 1973 that prohibits recipients of federal funds from discrimination against persons with disabilities.

Short-term objectives: a requirement of the IEP for students with significant delays. Each annual goal must have at least one short-term objective.

Social development: the degree and quality of the student's relationships with peers and adults, feelings about self and social adjustment to school and community environments.

Social history: a report gathered and prepared by qualified school district personnel pertaining to the interpersonal, familial and environmental variables that influence a student's general adaptation to school, including but not limited to data on family composition, family history, developmental history of the student, health of the student, family interaction and school adjustment of the student.

Special class: a class consisting of students with disabilities who have been grouped together because of similar individual needs for the purpose of being provided specially designed instruction.

Specially-designed instruction: adapting, as appropriate to the needs of a student with a disability, the content, methodology or delivery of instruction to address the unique needs that result from the student's disability and to ensure access of the student to the general curriculum so that he or she can meet the educational standards that apply to all students.

Speech or language impairment: a communication disorder, such as stuttering, impaired articulation, language impairment or voice impairment that adversely affects a student's educational performance.

Standardized tests: tests that have norms (usually age or grade-based) reflecting the performance of a larger population.

Standards: what students are expected to know and be able to do, Standards should be clear, measurable, and rigorous but not too detailed.

Substantial regression: a student's inability to maintain developmental levels, due to a loss of skill or knowledge during July and August of such severity as to require an inordinate period of review at the beginning of the school year to reestablish and maintain IEP goals and objectives mastered at the end of the previous school year. A period of more than 8-10 weeks of review at the beginning of the school year would be considered inordinate.

Supplement aids and services: accommodations that may permit a student to profit from instruction in the least restrictive environment.

Surrogate parent: a person appointed to act in place of parents or guardians when a student's parents or guardians are not known or, after reasonable efforts by the Board of Education, their whereabouts cannot be determined; when the student is an unaccompanied homeless youth or a ward of the state and does not have a parent who meets the definition in state regulations; or when the rights of the parent to make educational decisions have been subrogated by a judge in accordance with state law.

Student with a disability: a student with a disability as defined in regulation, who has not attained the age of 21 prior to September 1st and who, because of mental, physical or emotional reasons, has been identified as having a disability and requires special services and programs approved by the department. The categories defined in regulation include: autism, deafness, deaf-blindness, emotional disturbance, hearing impairment, learning disability, intellectual disability, multiple disabilities, orthopedic impairment, other health impairment, speech or language impairment, traumatic brain injury and visual impairment including blindness.

Test accommodations: changes in how a test is administered that do not substantially alter what the test measures, including changes in presentation format, response format, test setting or test timing.

Transition plans: must be included in the IEP once a student turns 15. Transition plans describe how the school will help the student prepare for life after high school, in college, employment and/or independent living.

Transition services: a coordinated set of activities for a student with a disability, designed within a results-oriented process, that is focused on improving the academic and functional achievement of the student with a disability to facilitate the student's movement from school to post-school activities, including but not limited to post-secondary education, vocational education, integrated competitive employment (including supported employment), continuing and adult education, adult services, independent living or community participation. The coordinated set of activities must be based on the individual student's needs, taking into account the student's strengths, preferences and interests and shall include needed activities in the following areas:

instruction, related services, community experiences, the development of employment and other post-school adult living objectives and, when appropriate, acquisition of daily living skills and functional vocational evaluation.

Transitional support services: those temporary services, specified in a student's IEP, provided to a regular or special education teacher to aid in the provision of appropriate services to a student with a disability who is transferring to a regular program or to a program or service in a less restrictive environment.

Traumatic brain injury: an acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability, psychosocial impairment or both, which adversely affects educational performance. The term does not include brain injuries that are congenital or degenerative or brain injuries induced by birth trauma.

Travel training: a special education service that provides instruction, as appropriate, to students with significant cognitive disabilities, as well as any other students with disabilities who require this instruction, to enable them to develop an awareness of the environment in which they live and learn the skills to move effectively and safely from place to place within that environment (e.g., in school, in the home, at work and in the community).

Universal design: a concept or philosophy for designing and delivering products and services that are usable by people with the widest possible range of functional capabilities, including products and services that are directly usable (without requiring assistive technologies) and products and services that are made usable with assistive technologies.

Validity: the extent to which an instrument effectively measures what it is designed to measure.

Vocational and Educational Services for Individuals with Disabilities (VESID): the office in the NYS Education Department that oversees the educational and vocational services for individuals with

disabilities from age three throughout adulthood. There are local VESID offices that can help your child with the transition from high school to work or college and provide some services after high school.

Visual discrimination: ability to discern likenesses and differences in colors, shapes, objects, words and symbols.