



# Special Education Eligibility Report

**Student Name: Johnny Appleseed**

**Date of Birth: 1/5/2004**

**Initial**  **Reevaluation Date: 5/18/2010**

## 1. STUDENT INFORMATION

Student's Name:	Johnny Appleseed
School District: School: Grade:	Winesap County Granny Smith Elementary K
Primary Language:	English
Birth Date: GTID:	1/5/2004 0123456789123

## 2. CASE HISTORY

Reason the child was referred for special education evaluation →	Johnny is both deaf and blind and also exhibits significant developmental delays, which is having a profound impact on his educational programming.
Has the child attended (or is the child attending) a preschool or Head Start program?  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Please name the program or school: Gala Preschool Program
Is this child age appropriate for grade level?  <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	If no, please check all of the following that apply:  <ul style="list-style-type: none"> <li>• Retained: <input type="checkbox"/> (Specify Grade): _____</li> <li>• Started School Late: <input checked="" type="checkbox"/></li> <li>• Held Out of School by Parents: <input type="checkbox"/></li> </ul>
Is the child's hearing/vision within normal limits (attach documentation)?  <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	If no, attach documentation and explain. Johnny is profoundly deaf and legally blind. Eye report 2/3/2010- Optic Nerve Coloboma's and aniridia OU. OD 20/200 OS-20/400. Johnny is blind as per state guidelines. Audiological Examination- 4/13/2010- Profound Sensori-neural Bilateral Hearing Loss. Mondini defect- absence of the semi-circular canals of the cochlea is present which causes the hearing loss and also balance problems. Amplification will not improve hearing. Johnny is unable to hear speech sounds. Pure tone average 90+db. The use of Sign language is imperative for communication. Reports attached. Johnny is deaf as per state guidelines.
Does the child have significant health concerns, major childhood illness/disease, or a diagnosed syndrome?	If yes, please explain: Johnny has a diagnosis of CHARGE Syndrome. He exhibits the heart and ear anomalies associated with CHARGE. He also has the Optic nerve Coloboma's OU. Choanal atresia and cleft lip and



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<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	palate, were present at birth. As a result he has had multiple surgeries and faces still more surgeries in the future. Acid reflux and Kidney reflux are also issues. Due to these health issues, Early Intervention services and preschool services were present but sporadic.
Does the child take medication on a regular basis?  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	If yes, please explain:  Johnny is on medications for his heart. He has breathing issues and takes medication for allergies. He uses an inhaler and nebulizer. He takes medication to reduce acid reflux and to improve kidney function. List of medications is attached.
Does the child have motor /coordination/mobility needs?          <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	If yes, please explain:  Johnny learned to walk very late. However, is able to walk remarkably well all things considered. He does need Orientation and Mobility training in order to travel safely and efficiency in his environment. Gait issues and gross motor is an area of concern. Balance is an issue of great concern. Low muscle tone was also an area of concern. PT services are indicated based on assessment by the PT. Fine motor skills are an area of need. Developmental profile as well as the assessments performed by the OT indicates the need for OT services to decrease tactile defensiveness so that Johnny can explore his world more effectively tactually. A sensory diet is indicated for Johnny.
Does the child have adaptive or medical needs (e.g., eye glasses, wheelchair, walker, hearing aids, leg braces, feeding tube, etc.)?  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	If yes, please explain:  Pre-Cane device for mobility. Hearing aids will not improve hearing. Johnny is not a candidate for a cochlear implant at this point due to decreased cognitive functioning and sensory issues. Glasses will not improve Johnny's vision. Splinting has been suggested by the OT and PT to improve motor functioning.
Does the child have other significant issues not covered in the previous questions?  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	If yes, please explain:  Johnny has significant developmental delays in the areas of cognitive functioning, adaptive behavior, and academic achievement. He exhibits deficits in all areas of the Expanded Core Curriculum for the Blind and Visually Impaired.

### 3. SUMMARY OF INTERVENTIONS PRIOR TO REFERRAL

For initial eligibility - List the Interventions provided for which data will be provided in Section 4. →	List of interventions provided. Due to the coexistence of both a hearing and vision loss and significant developmental delays that are having a severe impact on Johnny's ability to communicate and learn, the team concurred that a direct referral to special education was warranted in order to meet Johnny's needs as quickly as possible.
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<p>For reevaluation and additional areas of concern, list specially designed instruction which includes: <b>Adapting of Content, Methodology (specialized program), or Instructional Delivery provided.</b></p>	<p>Describe the specially designed instruction which includes: <b>Adapting of Content, Methodology (specialized program), or Instructional Delivery provided.</b></p> <p>Communication- Begin sensory diet to decrease sensory defensiveness. Gradually introduce object paired with signs to start building connections between the object and the words that they represent. Air signs can be used within a distance of 8" signed at eye level Tactile defensiveness prevents the use of tactile sign at the present time.</p> <p>Orientation and Mobility- For safe travel</p>
<p>Does the child require immediate consideration of special education eligibility?</p> <p>This should be an infrequent and rare occurrence and must be clearly documented.</p>	<p>Please justify:</p> <p>Yes Due to the combination of hearing and vision loss along with significant developmental delays, it is imperative that Johnny begin to learn to communicate effectively. He also needs immediate help with travel skills and the areas of the expanded core curriculum in particular social skills.</p>



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### 4. SUMMARY OF PROGRESS MONITORING DATA TOWARD ACHIEVING STANDARDS

	Area 1	Area 2	Area 3	Area 4
<p><b>Area(s) of Difficulty (curriculum areas, behavioral concerns)</b></p> <p><b>Reevaluation: goal areas and areas of concern</b></p>	<p>Educational teams concurred to go directly to referral for special education due to the profound impact that the dual sensory impairment and decreased cognitive functioning is having on Johnny's ability to learn and communicate.</p>			
<p><b>Initial eligibility provide Scientific, Research or Evidence Based Intervention(s) OR Reevaluation provide Adapting of Content, Methodology (specialized program), or Instructional Delivery</b></p> <p><b>Include with each intervention or specially designed instruction entry</b></p> <p><b>-Baseline Performance Data (date, data and performance summary):</b></p> <p><b>-Intervention Data (dates, data and performance</b></p>	<p>Educational teams concurred to go directly to referral for special education due to the profound impact that the dual sensory impairment and decreased cognitive functioning is having on Johnny's ability to learn and communicate.</p>			



## Special Education Eligibility Report

Student Name: **Johnny Appleseed**

Date of Birth: **January 5, 2004**

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	Area 1	Area 2	Area 3	Area 4
summary):				



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### 5. RESULTS OF DISTRICT, STATE AND BENCHMARK ASSESSMENTS

Date	Name of Statewide, Local, and Benchmark Assessments; GAA	Results
		No District or State assessments have been administered.



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### 6. INDIVIDUAL STUDENT DATA [complete all areas]

Domain	Report(s) / Assessment(s) & Scores	Date	Results Strengths	Results Weaknesses
<b>Sensory:</b> (Hearing /Vision)	Eye Report	2/3/2010	Student has object perception and some residual vision within 8 inches with object placed directly in front of eyes.	Distance vision is extremely impaired. Field loss in the lower quadrants results in decreased visual awareness of objects placed below eye level.
	Audiological-	4/13/10	Student is profoundly deaf in both ears with no residual hearing in either ear. Amplification will not improve hearing. Building a strong communication base is critical to Johnny's education success.	Profound bilateral sensori-neural hearing loss. Student has no residual hearing. Amplification will not improve hearing. Due to Mondini defect balance is impaired as well.
<b>Medical:</b>	Medical reports from Dr. Fuji- Pediatric ENT Dr. Yates- Pediatrician	1/15/10 3/14/10	Johnny has a good appetite but prefers creamy textured foods like pudding, jello, and yogurt. He is beginning to eat creamy soups, thin mashed potatoes, and some pureed fruits. These can be used as reinforcers.  Johnny is able to grasp objects for short periods of time.	Both reports have medical diagnosis of CHARGE Syndrome. Both indicate no residual hearing and deceased vision. Acid reflux and kidney reflux noted. Low muscle tone and chronic recurrent ear and upper respiratory infections. More surgeries to correct facial and ear anomalies are indicated. Small for age. Growth delayed.
<b>Motor:</b>	PT evaluation revealed low muscle tone and balance issues.	3/20/10	Johnny is able to walk remarkably well considering his sensory impairments and balance issues.	Low muscle tone and balance issues.
	OT evaluation indicated sensory issues which need to be addressed through a	3/15/10	Johnny is able to grasp objects but releases them almost immediately before tactually	Sensory issues requiring sensory diet. Lack of strength in hands.



## Special Education Eligibility Report

**Student Name: Johnny Appleseed**

**Date of Birth: January 5, 2004**

**Date: May 19, 2010**

Domain	Report(s) / Assessment(s) & Scores	Date	Results Strengths	Results Weaknesses
	sensory diet. Reduced strength in hands.		examining them.	
<b>Sensory Processing:</b> (difficulty managing sensory input by reaction to visual, tactile, and aural stimuli which impedes participation in social activities, school functioning and typical life)	OT evaluation indicated a lack of sensory integration. A sensory diet is indicated in order to help Johnny explore his world tactually. He is unable to use his hearing at all. He does have some residual vision directly in front of his eyes within 8 inches. He is easily over stimulated.	3/15/10	Visual processing is a relative strength although Johnny is legally blind.	Auditory processing is not possible due to profound bilateral sensori-neural hearing loss secondary to CHARGE Syndrome. Tactile processing is limited due to severe tactile defensiveness.
<b>Communication/Language:</b> (speech sound production, language [including pragmatics], fluency, voice/resonance, oral motor competency, prosody)	Speech/Language Evaluation Receptive Language: 6 months Expressive Language : 3 months	4/10/10	Receptive Language is a relative strength although extremely delayed. Sign language is critical. Air signs must be formed directly in front of the eyes within 8 inches. Tactile signing is not yet possible due to sensory issues.	Expressive language is a relative weakness and is extremely delayed. Sign language is critical. Air signs must be formed directly in front of the eyes within 8 inches. Tactile signing is not yet possible due to sensory issues.
<b>Social:</b> (if applicable, include social history documenting services and interventions that have been considered or provided from outside the school)	Vineland Adaptive Behavior Scale 3.3  Battelle Developmental Profile: 3-6	4/7/10  4/8/10	Johnny tends to be a somewhat passive child who lets others act on him rather than interacting with them. However, often the interactions that do occur almost always have a communicative intent.	Johnny has had limited exposure to interactions with individuals outside of his immediate family. Most of his interactions have been with adults.
<b>Emotional/Behavioral:</b> (include information from behavioral rating scales and analysis of behavioral data documenting	Functional Behavior Assessment indicates that behaviors stem from sensory over stimulation	5-3-10	Uses behaviors with a communicative function but usually when acted upon..	Johnny is passive and has little interaction with others. He rarely initiates an interaction.



## Special Education Eligibility Report

**Student Name: Johnny Appleseed**

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**Date: May 19, 2010**

Domain	Report(s) / Assessment(s) & Scores	Date	Results Strengths	Results Weaknesses
frequency, intensity and duration)	combined with an inadequate communication system.			
<b>Adaptive Behavior Rating Scales:</b>	Vineland Adaptive Behavior Scale Informal Observation of Adaptive Behavior	4/7/10 4/5/10	Scores were decreased in all areas tested. A relative strength was exhibited in the area of feeding skills.	Scores were decreased in all areas tested. Relative weaknesses were exhibited in the areas of socialization, communication, and self-help skills.
<b>Psychological Processing:</b> (measured indicators of psychological processes that underlie academic functioning; may include perception, attention, short and long-term memory, reasoning, processing speed, organization, etc.)	Educational team determined not warranted at this time.			
<b>Intellectual Functioning:</b> (measured indicator(s) of a student's overall (more global) intellectual level)	Educational team determined not warranted at this time.			
<b>Academic Achievement:</b>	Educational team determined not warranted at this time.			
<b>Developmental History</b>	Battelle Developmental Inventory  Alperon-Boll Developmental Profile	4/15/10  4/12/10	Developmental delays were present in all areas assessed. A relative strength was noted in the areas of self care, behavior, and compensatory skills.	Communication-.6 months Social -3.6 Language Severe delays in both expressive and receptive language 6 months for both.
<b>Classroom/Structured Observation:</b>	Educational team determined no warranted at this time.			



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**Date: May 19, 2010**

Domain	Report(s) / Assessment(s) & Scores	Date	Results Strengths	Results Weaknesses
<b>Analyzed Classroom Work Samples:</b>	Educational team determined no warranted at this time.			
<b>Parent Information and Input:</b>	Parent's primary concern is for Johnny to learn to communicate using sign language and or some combination of objects boards, or voice output communication device.	4/12/10	Johnny loves to eat pudding and yogurt.	Currently Johnny is only able to communicate wants and needs by using behaviors.
<b>Other Information:</b>	Functional Vision Evaluation Orientation & Mobility Assessment Learning Media Assessment	5/10/10 4/25/10 4/20/10	Johnny has residual vision in both eyes. The right eye is stronger than the left eye. He does exhibit limitations in the field of vision due to the coloboma's in the lower quadrants in addition to decreased acuities. He does have object perception and is able to track objects at a distance of 8 inches. Learning Media results indicate lack of ability to obtain information auditorily. John is able to use his residual vision to access objects at this time. O&M assessment indicates readiness for pre-O&M training using a pre-cane device such as a toy shopping cart or toy push mower.	FVE results indicate decreased acuities which reduce Johnny's ability to see clearly. Tactile skills are decreased due to sensory defensiveness. O&M evaluation indicates that Johnny has difficulty avoiding objects in his path even in familiar environments. He has no concepts of safe travel.



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## 7. EXCLUSIONARY FACTORS

*A child must **not** be determined to be a child with a disability: if the determinant factor for that eligibility is lack of appropriate instruction in reading, including the essential components of reading instruction (as defined in section 1208(3) of ESEA); lack of appropriate instruction in math; or limited English proficiency; and if the child does not otherwise meet the program area eligibility criteria for a child with a disability.*

Factors to Consider	YES	NO	Explain
1. Lack of appropriate instruction in reading.		✓	
2. Lack of appropriate instruction in math.		✓	
3. Lack of appropriate instruction in writing.		✓	
4. Lack of English Proficiency		✓	
5. Cultural Factors		✓	
6. Environmental or economic disadvantage		✓	
7. Atypical educational history (multiple school attendance, lack of attendance, etc.)	✓		Due to multiple surgeries and health related issues, Johnny's school attendance has been sporadic.

For some students the following factors may be exclusionary. However, if the **primary area of concern for a student is one of the issues in the chart below**, proceed to the questions below the chart. For all others, please complete the chart and the questions below the chart.

Questions	YES	NO	Explain
1. Does the child have adequate visual capability?		✓	Johnny is legally blind with visual field deficits. Accommodations were made during testing.
2. Does the child have adequate hearing capability?		✓	Johnny is profoundly deaf in both ears. Accommodations were made during testing.
3. Does the child have a motor impairment that impacts results of assessments?		✓	Johnny has low muscle tone and needs mobility training but accommodations for this were made during the assessment process.
4. Does the child exhibit selective mutism, tongue thrust, or dialectic differences in language?		✓	Johnny is non-verbal secondary to profound hearing loss. Accommodations were made during testing.

**Are there exclusionary factors that should be resolved prior to determining eligibility?**

- YES** Discontinue eligibility decision-making. The student is not eligible for special education services at this time.
- NO** Continue to next section



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### 8. DECISION MAKING FOR ELIGIBILITY

**Have Interventions been implemented and monitored as designed for an appropriate time to show effect or lack of effect in the identified area(s) of concern?**

**YES** Continue with the eligibility determination. **(Proceed) See committee Rationale**

**NO** The student does not meet eligibility requirements under IDEA. **(Complete Committee Rationale)**

**Progress monitoring demonstrated the child is not making sufficient rate of progress to meet age or State-approved grade-level standards within a reasonable time frame when child's response to intervention is measured. Therefore, there is an adverse affect on educational (functional, developmental and/or academic) performance.**

**YES** Continue with the eligibility determination.

**The student needs special education and related services in which the content, methodology, or delivery of instruction is adapted to address the unique needs of the child that result from the child's disability.**

**NO** The student does not meet eligibility requirements under IDEA. **(Complete Committee Rationale)**

**Committee Rationale:** Please include any applicable comments.



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Due to dual sensory impairments in both hearing and vision along with significant developmental delays, the educational team concurred that Johnny's educational needs are so great as to warrant direct referral to special education without going through the RTI process in order to meet his immediate needs most effectively and efficiently.

## 9. SUMMARY OF CONSIDERATIONS

The committee has discussed and agreed that the results of the data indicate the student demonstrates an adverse educational performance with impact in specific area(s). The following characteristics shall be considered to determine the existence of a disability and the need for special education.

Indicate the areas where deficits adversely impact educational (functional, developmental and/or academic) performance. Then refer to the **Eligibility Quick Reference Guide** for disability guidance.

Sensory (Hearing, Vision)	Medical	Motor	Sensory Processing	Communication Language	Social/Emotional	Adaptive	Psychological Processing	Intellectual Functioning	Academics
✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

**Based on the above summary, eligibility is being considered in the following area(s):**

Deafblind  
 Significant Developmental Delays  
 Speech



## Special Education Eligibility Report

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### 10. ELIGIBILITY DETERMINATION

**YES** This student is eligible for special education and related services in the category(ies) of:

Deafblind  
 Significant Developmental Delay  
 Speech  
 Orientation and Mobility  
 Occupational Therapy  
 Physical Therapy

### Committee Rationale:

Due to dual sensory impairment which has a profound impact on all areas of learning, Johnny qualifies for special education and related services as outlined above. The building of a strong communication system for Johnny is necessary for his educational progress in all areas.

### 11. ELIGIBILITY TEAM INFORMATION

Title/ Position	Team Member Present *Team Member Signature	*Check Agree/ Disagree only for Specific Learning Disability eligibility report.	
		Agree	Disagree
Special Education Teacher		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No





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