

CASE STUDY COMMITTEE REFERRAL

Privacy Act Notice: Authority to Collect Information: 20 U.S.C. 927(c) and 10 U.S.C. 2164(f), as amended; E.O 9387; the Privacy Act of 1974, as amended, 5 U.S.C. 552a. **Principal Purpose:** The information will be used within the DoD to determine the services to be provided to a student to assist the child to receive a free appropriate public education. **Disclosure** to the Agency of the information requested on this form is voluntary; but failure to provide all requested information may result in the delay or denial of student services. DoDEA may disclose information requested in this form to other DoD activities and contracted service providers who require the information to deliver educational services to the child and for valid medical, law enforcement or security purposes, or for use in litigation concerning the delivery of student. **Routine Uses:** Disclosure of information contained in this form is authorized outside the DoD in accordance with the "Blanket Routine Uses" described at the beginning of the Office of the Secretary of Defense's compilation of systems of records notices, published at <http://www.defenselink.mil/privacy/notice/osd>.

Student _____ Grade _____ Previous Retention-Grade(s) _____

Date Prereferral Initiated _____ Referring Individual _____

The referring individual uses this form throughout the prereferral/referral process to summarize the student's area(s) of difficulty and the strategies attempted to resolve the problem(s). Attach any supporting documentation.

Vision Screening: Date _____ Passed Failed

Hearing Screening: Date _____ Passed Failed

Does the student have Limited English Proficiency? Yes No If yes, primary language is

Description of Problem(s)/Area(s) of Difficulty:

Data from Review of Records: Date _____

<u>Date</u>	<u>Classroom Modifications/Strategies Attempted</u>	<u>Results</u>
1.		
2.		
3.		
4.		
5.		

CASE STUDY COMMITTEE REFERRAL

Consultation with other educators including general and special educators/related service providers:

Parent Notification of Referral: (referring person must notify parent of pending referral before submitting referral to CSC)

Date of Contact: _____ Contacted by: Conference Phone Letter

Date of CSC Meeting: _____

Recommendations: Referral accepted More information needed
(comment)

General education alternative (comment) Other (comment)

Comments: _____

Case Manager: _____