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| School Site: |       | Grade: |       |
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| **DIRECTIONS:** **The IEP team shall determine the following in order to designate a student as requiring ESY as part of a free appropriate public education (FAPE).** |
| 1. At the start of the school year, with a review period equal to that of general education students, was the student able to regain skills lost over the break that would otherwise be expected in view of the student’s disabling condition?

[ ]  Yes [ ]  No If *YES*, specify what area(s).       |
|  |
| 1. Dos the student display a loss of previously taught skills and an inability to regain those skills following interruptions in instruction during the regular school year, i.e., Thanksgiving break, Winter break, and Spring break? [ ]  Yes [ ]  No

If Y*ES*, specify what area(s).       |
|  |
| 1. Is the current student at a crucial stage in learning skill(s), such that an interruption in school program might cause loss of a skill(s) that the student would not be able to re-learn in a reasonable period of time in view of the student’s disabling condition? [ ]  Yes [ ]  No If *YES*, specify what area(s).
 |
|  |
| 1. Is the student able to maintain the skills identified without extended school year? [ ]  Yes [ ]  No If *NO*, specify what skill(s).
 |
|  |
| 1. Does the student demonstrate a pattern of past regression in skills as evidenced by breaks of more than four weeks? [ ]  Yes [ ]  No *(Describe the degree (minimal or serious) of actual or likely regression following a school break.)*
 |
|  |
| 1. What is the estimated amount of time it takes or it may take the student to regain the prior level of knowledge, skills, benefits or functioning following a school break? [ ]  One month or less [ ]  Up to three months [ ]  Four to six months

[ ]  Other:        |
|  |
| 1. Describe the student’s rate of learning *(as compared with the student’s ability to recoup after a break)*.
 |
|  |
| 1. Does the IEP team feel the student’s disability will continue indefinitely or for a prolonged period of time? [ ]  Yes [ ]  No *(Describe the degree (minimal or serious) of actual or likely regression following a school break.)*
 |
|  |
|  |
| 1. Does the IEP team feel it will be impossible or unlikely the student will attain self-sufficiency and independence expected in view of the student’s disability following a break? [ ]  Yes [ ]  No *(Describe the degree (minimal or serious) of actual or likely regression following a school break.)*
 |
|  |
| 1. Are there any other issues concerning the student’s physical, medical condition, emotional, social, behavioral, mental health, academic and/or vocational issues, and his/her ability to be with typically developing peers that may be adversely impacted if the student does not receive ESY services? [ ]  Yes [ ]  No If *YES*, describe.
 |
|  |
| 1. Does the student require ESY to continue to achieve at the level of independence that is expected in view of the student’s disabling condition? [ ]  Yes [ ]  No
 |
|  |
| **IEP TEAM DETERMINATION:** |
| **[ ]**  | **THE IEP TEAM HAS DETERMINED THAT ESY SERVICE(S) IS/ARE NOT REQUIRED IN ORDER FOR THE STUDENT TO RECEIVE FAPE.** |
| **[ ]**  | **BASED ON A REVIEW OF THE STUDENT’S UNIQUE NEEDS, THE IEP TEAM HAS DETERMINED THAT THE ESY SERVICE(S) IS/ARE REQUIRED TO PROVIDE THE STUDENT WITH FAPE. *(COMPLETE THE SERVICES SECTION BELOW)*** |
|  |
| **Special education and related services** |
| **Status** | **Service (Code No.)** | **Class No.** | **Provider** | **Location of Service****(code no.)** | **Projected Start Date** | **Projected End Date** | **Frequency (Code No.)** | **Duration** |
|       |       | [ ]  Indiv. [ ]  Group |       |       |       |       |       |       |       |
|       |       | [ ]  Indiv. [ ]  Group |       |       |       |       |       |       |       |
|       |       | [ ]  Indiv. [ ]  Group |       |       |       |       |       |       |       |
|       |       | [ ]  Indiv. [ ]  Group |       |       |       |       |       |       |       |
|       |       | [ ]  Indiv. [ ]  Group |       |       |       |       |       |       |       |
|       |       | [ ]  Indiv. [ ]  Group |       |       |       |       |       |       |       |
|       |       | [ ]  Indiv. [ ]  Group |       |       |       |       |       |       |       |
|       |       | [ ]  Indiv. [ ]  Group |       |       |       |       |       |       |       |
| **NOTE:** Programs and services will be provided according to where the student is in attendance and consistent with the district of service calendar and scheduled services, excluding holidays, vacations, and non-instructional days unless otherwise specified. |

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| **DEFINITIONS** |
| **Extended School Year (ESY):**  | Extended School Year services (ESY) are programs and services that assist the student in working toward the same goals and objectives that the student works on during the school year. ESY services are only provided for those areas on the current IEP where the student has demonstrated (a) regression of skills during an extended school break and (b) limited ability to benefit from re-teaching of skills after an extended school break. Regression loss of previously attained skills documented by a review of the IEP goals, due to an extended school break. |
| **Rate of Recoupment:** | Length of time required to re-learn skills following an extended school break. |
| **Regression and Recoupment:** | Some students have disabilities that are likely to continue indefinitely or for a prolonged period. In this situation, interruption of the student’s educational programming may cause regression, when coupled with limited recoupment capacity, rendering it impossible or unlikely that the student will attain the level of self-sufficiency and independence that would otherwise be expected in view of his or her disabling condition. |
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