**CADDO PARISH SCHOOL BOARD**

**DEPARTMENT OF EXCEPTIONAL CHILDREN**

**High School Graduation/Promotion Criteria for Students with Disabilities**

**Student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of IEP Team Meeting:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

This checklist is to be used within the first 30 days of entering the grade or course(s) to ensure and determine if the student should pursue an alternate pathway to a diploma.

**The IEP Team must consider and circle “Agree” or “Disagree” for each of the following statements:**

**Section I**

|  |
| --- |
| The IEP Team must consider and circle “Agree” or “Disagree” for each of the following statements. **The student:** |
| Agree | Disagree | has an exceptionality (does not apply to a student identified as Gifted and/or Talented with no other exceptionality). |
| Agree | Disagree | has for any two of the three most recent school years, or for a student in high school, the two most recent administrations of any state-established assessments required for graduation, **not** met state-established benchmarks on required state assessments.  |

*If ALL statements in Section I have been circled “Agree”, proceed to Section II. If any statements in Section I was circled “Disagree” proceed to Section V.*

**If the IEP team determined that the student will participate in an alternate pathway to a**

**diploma, the IEP team has:**

|  |  |
| --- | --- |
| The IEP Team must consider and circle “Agree” or “Disagree” that each of the following statements **has been** documented on the IEP**:** | **Documented in the section below** |
| Agree | Disagree | **Determined course of study (Individual Graduation Plan):**  | **Transition Plan****Instructional Plan****Placement Page** |
| Agree | Disagree | **Establish minimum requirements in the IEP relevant to promotion and graduation requirements including end-of-course assessments and for the awarding of credits.** | **GSI (Progress/Lack of)****Instructional Plan PLAFFP** |
| Agree | Disagree | **Establish minimum performance requirements for annual academic and functional goals designed to meet the student’s needs.** | **Instructional Plan PLAFFP and Goal** |
| Agree | Disagree | **Notified the student and parent or legal guardian that as a result of these requirements varying from the standard expectations, future educational and career options for the student may be impacted**. | **Programs Services/Comments** |
| Agree | Disagree | **Notified the student and parent or legal guardian that a student with a disability shall remain eligible for services until reaching age 22 unless the student has graduated from high school with a regular high school diploma.**  | **Programs Services/Comments** |

Section II

**Check ONE applicable statement below:**

**Section III**

|  |  |
| --- | --- |
| The IEP Team must consider and circle “Agree” or “Disagree” that each of the following statements **has been** documented on the IEP: | **Documented in the section below** |
| Agree | Disagree | **IEP team agrees with ALL of the statements listed above; student is eligible for alternate pathway to a diploma.**  | **GSI and Comments** |
| Agree | Disagree | **IEP team DID NOT agree with ALL of the statements listed above; student is NOT eligible for alternate pathway to a diploma.** | **GSI and Comments** |

**Career Major for High School Students**

**Section IV**

|  |  |  |
| --- | --- | --- |
| **Agree** | **Disagree** | **Does the student with disabilities want to pursue a career major curriculum?** |

**If the IEP team agrees that the student will pursue a career major curriculum, then the following conditions need to be followed:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Agree** | **Disagree** | **The student’s IEP team must agree to one if the student is required to meet state established performance standards on any assessments for purposes of graduation.** | **GSI and Comments** |
| **Agree**  | **Disagree** | **If the IEP team determines that the student is not required to meet state and local performance standards on any assessment for purpose of graduation , the student shall be required to successfully complete IEP goal and requirements and shall meet one of the following conditions consistent with the IEP:****(Check ONE related to specific student)**□Employment in integrated, inclusivework environments, based on the student’s abilities and local employment opportunities, in addition to sufficient self –help skills to enable the student to maintain employment without direct and continuous educational support from the school districtor□ Demonstrate mastery of specific employability skills and self-help skills that indicate that he/she does not require district and continuous educational support from the school districtor**□** Access to services that are not within the legal responsibility of public education or employment or education options for which the student has been prepared by the academic program. | **GSI and Comments** |

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| **SECTION V** |

**SIGNATURES OF IEP TEAM MEMBERS**

 NAME SIGNATURE DATE

\*Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Parent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Special Education Teacher \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Regular Education Teacher \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ODR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Counselor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal/Designee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date of Decision:**

*My signature indicated that I have verified all documentations to determine whether or not the student met the criteria for an alternate pathway to promotion. Also, the student and parent or legal guardian was provided information related to how requirements that vary from standard expectation may impact future educational and career options.*

 \**Student’s Individual Graduation Plan must be signed by the student, parent/legal custodian, and school counselor.*