SPE-21 R 08/10

SPARTANBURG COUNTY SCHOOL DISTRICT FIVE RECORD OF COMMITTEE MINUTES – PRIOR WRITTEN NOTICE

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Name of Student	 DOB	
School		
Begin Anecdotal Minutes:		
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SPARTANBURG COUNTY SCHOOL DISTRICT FIVE RECORD OF COMMITTEE MINUTES / PRIOR WRITTEN NOTICE

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ame of Student		DOB:
chool	Grade	Date of Meeting
Description of the action the school took at too to conduct the following: (Check all that apply Annual review meeting Initial Eligibility (including DNQ) / Staffing / IE Reevaluation review/plan	<i>(</i>)	□ we proposed to conduct or □ we refus □ we refus
Special review (specify reason):		
a. Explanation of WHY the school: proposed	or ☐ refused to t	take the above cited action:
Under IDEA 04, we are required to meet and of annually, if not sooner, based on the needs of		d's placement and services at least
The purpose of today's meeting was to condu	ict a	meeting for bility is and
(student's name) the special education Least Restrictive Envir	onment (LRE) pla	
b. Description of evaluation procedures, record ☐ propose or ☐ refuse the action:	s, assessments, o	or reports the school used in deciding to
The IEP Team reviewedbased upon recent data from: Psycho-educat	tional evaluations	dated: . Speech
Language evaluations dated:, curr	, Behavior Arent and past PAS	Assessments dated:, S, HSAP, MAP, ASSET, PLAN, Curriculum
Measures, Career Scope, SCOIS, classroom	performance, gra	des, other(underline all that apply)

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lame of Student		DOB:	
School	Grade	Date o	of Meeting
c. Description of <u>other choices</u> that the IEP Team cons <u>rejected</u> : (EX: More or Less Restrictive placement; • Change in LRE / Setting: YES NO Why: _ • Change in IEP Goals: YES NO Why: _	; discontinua	tion of servi	ces; reduction of services, etc)
 Change in Related Services: YES □ NO Why: _ 			
d. Description of other reasons why the school pother factors considered are's at and adults, attitude about school in general, and al (Ex: attention / focus in class; participation; readiness and preparation)	ttendance, di bility to acce	scipline rec	ord, relationships with peers
If the District refused to take an action requested by	y the parent,	provide an o	explanation of why below: (or N/A
Protection & Advocacy for People with Disabilities, Inc. Suite 208, 3710 Landmark Drive Columbia, SC 29204 (803) 782-0639, 1-866-275-7273 (voice) or 1-866-232-4525 (TT PRO-Parents 652 Bush River Road, Suite 218 Columbia, SC 29210 1-800-759-4766 or 1-803-772-5688	Family Co 2712 Mid	dleburg Drive, a, SC 29204	outh Carolina, Inc. Suite 103B
Print /Type Name / Title of all committee members:	: SIGN	ATURES:	(* Meeting Chairperson)
/Parent			_
/ Student			
/ LEA /* Special Ed Te	achor.		
/ Dog Ed Toook			
/Psycholog			· · · · · · · · · · · · · · · · · · ·
/ SLP	5		
/ Agency Rep	р		
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If this notice is not an initial referral for evaluation, the parent can obtain a copy of a
description of the procedural safeguards by requesting a copy from the child's Special
Education Case Manager or calling the District Special Services Office at: 949-2309.