



CONSIDERATIONS for the NEED for EXTENDED SCHOOL YEAR (ESY) SERVICES

Student Name:

IEP Date:

STANDARD for ESY	YES	NO	DATA/INFORMATION REVIEW (See #5 of ESY Directions)
<p>Regression/Recoupment: Substantial regression in critical skills is expected as a result of an interruption in instruction. The student will likely require significant time to recoup lost skills.</p> <p>1) Is the regression typical of the student's function throughout the year rather than due to a scheduled break in instruction?</p> <p>2) Has the student made progress toward IEP objectives up until this time, despite not having been provided with an extended school year?</p> <p>3) Can the regression be recouped within 45 school days after returning to school?</p> <p>If all YES, then the student is <u>not</u> eligible for ESY services.</p>	<p>1) <input type="checkbox"/></p> <p>2) <input type="checkbox"/></p> <p>3) <input type="checkbox"/></p>	<p>1) <input type="checkbox"/></p> <p>2) <input type="checkbox"/></p> <p>3) <input type="checkbox"/></p>	
<p>Nature and/or severity of Disability: The nature or severity of the student's disability is expected to require a longer school year for the student to prevent regression, recoup lost skills, and/or attain the goal of self-sufficiency and independence from caregivers.</p> <p>If NO, then the student is <u>not</u> eligible for ESY services.</p>	<p><input type="checkbox"/></p>	<p><input type="checkbox"/></p>	
<p>Critical Stages/Areas of Learning: An extended break in instruction at this stage will jeopardize this student's critical skill development. The student will suffer significant loss of skills, behavior, or opportunities in an area deemed to be crucial to reaching the ultimate goal of independence.</p> <p>If NO, then the student is <u>not</u> eligible for ESY services.</p>	<p><input type="checkbox"/></p>	<p><input type="checkbox"/></p>	

- Based on the evidence above, this student:
 - does not require consideration for an Extended School Year; —or—
 - requires consideration for an Extended School Year to address a specific goal or need.
- Record ESY service in the IEP.
- Attach this form to the IEP (if applicable).