



Exceptional Student Education
IEP/EP Data Entry Form

New: IEP EP

Amendment to: IEP EP Dated: _____ IEP Manager: _____

Student Name: _____ Other ID: _____ Date of Birth: _____

Education Plan:

EP/IEP Meeting Date *(date meeting was held)*: _____ End Date *(for EP/IEP)*: _____

Start/Initiation Date *(when services begin)*: _____ Current Evaluation Date: _____
(Most recently conducted evaluation/reevaluation)

IDEA Educational Environment *(check one box):*

- (A) Home (3-5)
- (B) Special Education Program in Residential Facility (3-5)
- (C) Correction Facility
- (D) Separate School
- (F) Residential Facility
- (H) Home/Hospital
- (J) Service Provider (3-5)
- (K) Early Childhood Program (3-5)
- (L) Special Education Program in School or Community (3-5)
- (M) Early Childhood Program Services Outside Classroom (3-5)
- (P) Private Schools (6-21)
- (S) Special Education in Separate School (3-5)
- (Z) None of the Above (all others 6-21)

Extended School Year *(check one box):*

- (Y) The student is eligible to receive extended school year services in accordance with an IEP team decision.
- (N) The IEP team determined that ESY services were not necessary or will be determined at a later date.
- (Z) The student is not identified as a student with a disability. (Gifted only)

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ESE Exceptionalities:

Primary Exceptionality: _____

Additional Exceptionalities: _____

If making a change to the student's program(s)/services (adding or discontinuing), please explain here:

ESE Cost Factor *(Matrix of Services):*

_____ Doman A _____ Domain B _____ Domain C _____ Domain D _____ Domain E

Special Considerations: None +13 +3 +1 Cost Factor: _____

ESE Minutes *(enter all zeros for gifted only students):*

Total School Minutes *(specify from bell to bell):* _____

ESE Minutes/Week: _____

Minutes/Week with Non-Disabled Peers *(subtract ESE minutes from total minutes):* _____

Alternative Assessments *(check one):*

- Alternate Assessment (FSAA) administered
 - (D) Student will be assessed using the FSAA Datafolio
 - (P) Student will be assessed using the FSAA Performance Task
- Student will take statewide FSA and other districtwide assessments or student is in a grade where FSA is not administered