



Indicator 12

EXCEPTIONS TO THE SPECIAL EDUCATION TIMELINE: Child No Longer in District Jurisdiction during Transition Process

District Name: _____ Student SASID: _____

Referral Date: _____ Parent Consent to Evaluate Date: _____

Disposition of Referral: _____ Date of Eligibility Determination: _____

IEP Signature Date: _____ Date of 3rd Birthday: _____

34 CFR 300.301(d)(2) A child enrolls in a school of another public agency after the relevant timeframe in paragraph (c)(1) (*Procedures for initial evaluation*) of this section has begun, and prior to a determination by the child's previous public agency as to whether the child is a child with a disability under § 300.8.

Did the child move out of the district after the referral, but before age 3?

Yes

→ Provide the date when the child moved out of or into the district: _____

The child transferred:

Select one:

To another district in NH → District name: _____

From another district in NH → District name: _____

To or from out of state

Unknown

Provide information below in additional comments

Any additional comments or information you would like the state to consider as part of the Desk Audit process?

Signature of Special Education Director or Designee

Date

Postal addressed to:

NH Dept. of Education, Bureau of Student Support
Attn: Brandy Quinn-Richards
25 Hall Street
Concord, NH 03301

Email: Brandy.A.Quinn-Richards@doe.nh.gov

All personally identifiable student information other than SASID, i.e., student name, address, disability, picture, grade, etc. must be REDACTED in order to accept submission by email.