

ILLINOIS STATE BOARD OF EDUCATION
Special Education & Support Services
100 North First Street, E-228
Springfield, Illinois 62777-0001

CHARTER SCHOOL RENEWAL APPLICATION FOR
SPECIAL EDUCATION SERVICES

ISBE 23 ILLINOIS ADMINISTRATIVE CODE 226.10 SUBTITLE A SUBCHAPTER f SUBPART A: GENERAL

Section 226.10 Purpose

This Part establishes the requirements for the treatment of children and the provision of special education and related services pursuant to the Individuals with Disabilities Education Improvement Act (also referred to as "IDEA") (20 USC 1400 et seq.), its implementing regulations (34 CFR 300, as amended by 71 Fed. Reg. 46540 (August 14, 2006, no later amendments or editions included)), and Article 14 of the School Code [105 ILCS 5/Art.14]. This Part also distinguishes between requirements derived from federal authority and those imposed additionally pursuant to Article 14 of the School Code or the authority of the State Board of Education. The requirements of IDEA, its implementing regulations, and this Part shall apply in every instance when a child is or may be eligible for special education and related services. (Source: Amended at 31 Ill. Reg. 9915, effective June 28, 2007).

Pursuant to the authority of the Illinois State Board of Education under 105 ILCS 5/27A-7(a)(15), the proposal must outline a plan for the provision of special education services.

CHARTER SCHOOL NAME	DISTRICT NAME AND NUMBER	
ADDRESS (Street, City, State, Zip Code)	TELEPHONE (Include Area Code)	FAX (Include Area Code)
	DATE OF APPLICATION SUBMISSION	
GRADES TO BE SERVED	TOTAL NUMBER OF STUDENTS TO BE SERVED	
CONTACT NAME	CONTACT TELEPHONE (Include Area Code)	CONTACT E-MAIL

Overall percent of Students with Disabilities: District Level: _____ Charter School: _____

ISBE USE ONLY:

Review # _____ Date _____

Instructions for required corrections AND clarification:

I. APPLICATION PROCESS

CHARTER SCHOOL NAME

ISBE REQUIREMENTS	CHARTER SCHOOL PROPOSED STEPS FOR IMPLEMENTATION OF SERVICES ACCORDING TO REQUIRED INFORMATION	NAME AND TITLE OF STAFF AT CHARTER SCHOOL AND DISTRICT WHO WILL WORK IN PARTNERSHIP TO ENSURE IMPLEMENTATION OF SERVICES	FOR ISBE USE ONLY
<p>Explain what activities are implemented to ensure that parents understand that all children, including children with disabilities, are eligible to participate in the lottery and that the school will provide a continuum of services to address the student's special education needs.</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

II. CHILD FIND

CHARTER SCHOOL NAME

ISBE REQUIREMENTS	CHARTER SCHOOL PROPOSED STEPS FOR IMPLEMENTATION OF SERVICES ACCORDING TO REQUIRED INFORMATION	NAME AND TITLE OF STAFF AT CHARTER SCHOOL AND DISTRICT WHO WILL WORK IN PARTNERSHIP TO ENSURE IMPLEMENTATION OF SERVICES	FOR ISBE USE ONLY
<p>Explain how Child Find activities are implemented to identify any students who may be eligible for special education services and how these activities are coordinated between the charter school and the district. Also, include a reference to ensuring timeliness of identification by the student's third birthday.</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

III. EVALUATION AND DETERMINATION OF ELIGIBILITY

CHARTER SCHOOL NAME _____

ISBE REQUIREMENTS	CHARTER SCHOOL PROPOSED STEPS FOR IMPLEMENTATION OF SERVICES ACCORDING TO REQUIRED INFORMATION	NAME AND TITLE OF STAFF AT CHARTER SCHOOL AND DISTRICT WHO WILL WORK IN PARTNERSHIP TO ENSURE IMPLEMENTATION OF SERVICES	FOR ISBE USE ONLY
<p>a) Referral system – describe steps for Initial evaluation and Reevaluation;</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

III. EVALUATION AND DETERMINATION OF ELIGIBILITY

CHARTER SCHOOL NAME _____

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<p>b) Evaluation – describe how the areas for evaluation are determined;</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

III. EVALUATION AND DETERMINATION OF ELIGIBILITY

CHARTER SCHOOL NAME _____

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<p>c) Timelines – describe how timelines are or will be met for: c.1 initial evaluation; c.2 yearly review or c.3 development of IEPs; c.4 tri-annual reevaluations; c.5 sending required Notice and Consent forms to parents; and c.6 progress reported on IEP annual goals.</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

IV. PARENTAL INVOLVEMENT

CHARTER SCHOOL NAME _____

ISBE REQUIREMENTS	CHARTER SCHOOL PROPOSED STEPS FOR IMPLEMENTATION OF SERVICES ACCORDING TO REQUIRED INFORMATION	NAME AND TITLE OF STAFF AT CHARTER SCHOOL AND DISTRICT WHO WILL WORK IN PARTNERSHIP TO ENSURE IMPLEMENTATION OF SERVICES	FOR ISBE USE ONLY
<p>Describe the provisions for parent involvement in the Special Education process, indicating what efforts are made for parental education, notification and participation.</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

V. LEAST RESTRICTIVE ENVIRONMENT

CHARTER SCHOOL NAME _____

ISBE REQUIREMENTS	CHARTER SCHOOL PROPOSED STEPS FOR IMPLEMENTATION OF SERVICES ACCORDING TO REQUIRED INFORMATION	NAME AND TITLE OF STAFF AT CHARTER SCHOOL AND DISTRICT WHO WILL WORK IN PARTNERSHIP TO ENSURE IMPLEMENTATION OF SERVICES	FOR ISBE USE ONLY
<p>Indicate how the full range of Special Education environment and related services in the Least Restrictive Environment will be determined.</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

VI. INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)

CHARTER SCHOOL NAME _____

ISBE REQUIREMENTS	CHARTER SCHOOL PROPOSED STEPS FOR IMPLEMENTATION OF SERVICES ACCORDING TO REQUIRED INFORMATION	NAME AND TITLE OF STAFF AT CHARTER SCHOOL AND DISTRICT WHO WILL WORK IN PARTNERSHIP TO ENSURE IMPLEMENTATION OF SERVICES	FOR ISBE USE ONLY
<p>a) Services - describe how all services and resources required by a student's IEP will be provided, including but not limited to accommodations, LRE setting, and related services;</p> <p>Provide assurance that in compliance with state and federal law, (i) the charter school will not discriminate based upon a child's need for special education services; and (ii) any decision made that a child will not be educated at the Charter School because of the need for special education and related services <u>will only be made after the IEP team's consideration of the educational environment options</u> (<i>taking into consideration all available educational resources such as accommodations AND related services</i>) and the IEP team's determination that the Charter School's educational program and services do not meet the child's individual needs.</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

VI. INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)

CHARTER SCHOOL NAME _____

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<p>b) Functional Assessments of Behavior – describe this provision;</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

VI. INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)

CHARTER SCHOOL NAME _____

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<p>c) Behavior Intervention Plans – describe how these will be implemented;</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

VI. INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)

CHARTER SCHOOL NAME _____

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<p>d) Discipline – describe what and how discipline will be managed with special education students;</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

VI. INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)

CHARTER SCHOOL NAME

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<p>e) Transition planning – describe the methods used for agencies' involvement, participation of agencies in IEPs, and tracking post-graduation implementation,</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

VI. INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)

CHARTER SCHOOL NAME

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<p>f) Transportation – describe provisions for this service;</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

VI. INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)

CHARTER SCHOOL NAME _____

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<p>g) Extended School Year – describe how extended school year services will be provided.</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

VII. PARTICIPATION IN ASSESSMENTS

CHARTER SCHOOL NAME _____

ISBE REQUIREMENTS	CHARTER SCHOOL PROPOSED STEPS FOR IMPLEMENTATION OF SERVICES ACCORDING TO REQUIRED INFORMATION	NAME AND TITLE OF STAFF AT CHARTER SCHOOL AND DISTRICT WHO WILL WORK IN PARTNERSHIP TO ENSURE IMPLEMENTATION OF SERVICES	FOR ISBE USE ONLY
<p>a) ISAT/PSAE/IAA Determination – indicate how ISAT/PSAE/IAA testing is determined by the IEP team;</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

VII. PARTICIPATION IN ASSESSMENTS

CHARTER SCHOOL NAME _____

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<p>b) ISAT/PSAE accommodations – indicate how ISAT/PSAE accommodations will be made for students with disabilities whose IEPs require accommodations;</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

VII. PARTICIPATION IN ASSESSMENTS

CHARTER SCHOOL NAME _____

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<p>c) Student Achievement – Cite data that demonstrates increased student academic achievement for students with disabilities. If the charter school cannot demonstrate increased student academic achievement for students with disabilities, the charter school should describe any specific strategies it will utilize to address low student achievement among this student population.</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

VIII. CONFIDENTIALITY OF RECORDS

CHARTER SCHOOL NAME _____

ISBE REQUIREMENTS	CHARTER SCHOOL PROPOSED STEPS FOR IMPLEMENTATION OF SERVICES ACCORDING TO REQUIRED INFORMATION	NAME AND TITLE OF STAFF AT CHARTER SCHOOL AND DISTRICT WHO WILL WORK IN PARTNERSHIP TO ENSURE IMPLEMENTATION OF SERVICES	FOR ISBE USE ONLY
<p>Provide method of access to records, access controls in place, and guidelines for appropriateness of special education documents in temporary files.</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

IX. SPECIAL EDUCATION PERSONNEL

CHARTER SCHOOL NAME

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<p>Describe how the charter school will perform background checks as well as credential verification of its prospective special education personnel.</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>

X. SPECIAL EDUCATION PERSONNEL

CHARTER SCHOOL NAME _____

<p align="center">ISBE REQUIREMENTS</p>	<p align="center">CHARTER SCHOOL PROPOSED STEPS FOR IMPLEMENTATION OF SERVICES ACCORDING TO REQUIRED INFORMATION</p>	<p align="center">NAME AND TITLE OF STAFF AT CHARTER SCHOOL AND DISTRICT WHO WILL WORK IN PARTNERSHIP TO ENSURE IMPLEMENTATION OF SERVICES</p>	<p align="center">FOR ISBE USE ONLY</p>
<p>Describe how the charter school will determine class size to remain in compliance with federal and state requirements.</p>			<p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Clarification needed</p>