Your School/District
Your City

Team Evaluation Summary Report and Written Prior Notice of Eligibility Determination: Emotional Disturbance

SpEd 5e 04.08

Student _____ Date of meeting _____

School _____ Grade _____ DOB _____

Definition: A condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance: 1) an inability to learn that cannot be explained by intellectual, sensory, or health factors; 2) an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; 3) inappropriate types of behavior or feelings under normal circumstances; 4) a general pervasive mood of unhappiness or depression; 5) a tendency to develop physical symptoms or fears associated with personal or school problems. The term includes schizophrenia. "Emotional disturbance" is a term that covers two types of behavior difficulties which are not mutually exclusive but which adversely affect educational performance: 1) **Externalizing** refers to behavior problems that are directed outwardly by the student towards the social environment and usually involve behavioral excesses: 2) **Internalizing** refers to a class of behavior problems that are directed inwardly and often involve behavioral deficits.

☐ **All requirements of Rule II.J.4 must be documented below or attached.**

Disclaimers: (may include data in cumulative records, interviews, classroom observations and/or evaluations).
Is student behaving as a child with emotional disturbance because of: (attach documentation when necessary)

Intellectual disability? ☐ Yes ☐ No Basis for decision _____

Vision or hearing impairments? ☐ Yes ☐ No Date of last screening _____

Other medical condition? ☐ Yes ☐ No Basis for decision _____

Inappropriate classroom management? ☐ Yes ☐ No Basis for decision _____

□ **Documentation that the behavior has been exhibited over a long period of time and to a marked degree is attached.** (Could include anecdotal notes, observation, and/or parent input.)

Assessment Information for Classification: Indicate evaluation (formal and informal), date, and results for each area assessed.

1. Three 15-minute observations in classroom on behavior pinpoints attached (Required for initial evaluation only)
   (Attached observations are required for initial classification only. List observation dates)

   I. _____ II. _____ III. _____

2. Academic achievement

3. Social/behavioral/ adaptive assessment

4. Behaviors for which the student was referred _____

5. Information from parents _____

Relevant medical problems? ☐ Yes ☐ No If yes, specify: _____

- Is a lack of instruction in reading or math the primary factor in determining eligibility? ☐ Yes ☐ No
- Is limited English proficiency the primary factor in determining eligibility? ☐ Yes ☐ No

Written Prior Notice for Eligibility Determination

The Procedural Safeguards included with this notice afford you protection. If you have any questions regarding this notice or Procedural Safeguards, contact the principal or the special education teacher at the student's school.

Based on the evaluation data, the eligibility team proposes the following action:

☐ This student has an Emotional Disturbance, as defined in the Individuals with Disabilities Education Act (IDEA), that adversely affects educational performance and requires special education and related services.

☐ This student does **not** have an Emotional Disturbance, as defined in the Individuals with Disabilities Education Act (IDEA), that adversely affects educational performance and does not require special education and related services

_____
Special Education Teacher Signature Date

_____
Parent/Adult Student Signature Date
(signature acknowledges receipt of copy)

_____
Signature Date

_____
Signature Date

*Note: If parent/adult student signature is missing, then parent/adult student: ☐ Did not attend (document efforts to involve parent/adult student) **OR**
☐ Participated via telephone, video conference or other means **AND** ☐ Copy of this document was mailed to parent/adult student on (date)_____