COMPLIANCE VERIFICATION FORM

Other Health Impairment

07-2 AAC Criteria

Student's Name R		Reviewer			Date					
Other Health Impairment – Medical		EV	EVAL ELIG RPT							
Evaluation Requirements		YES	NO	YES	NO	N/A	COMMENTS			
1. Vision Screening P F Follow	-up									
Hearing Screening P F Follow-	-up									
2. Documentation of the health impairment diagnosis/statement).	(medical									
3. Performance measures such as developmental sec and/or individual intelligence scores, individual are education achievement and/or diagnostic test classroom observation, motor assessments, referenced tests, curriculum-based assessments, child's existing records (i.e., attendance, health). 4. A statement of how the impairment adversely	nd/or group (s) scores, criterion- review of									
educational performance of the child.										
For Initial Evaluations Only: The docume interventions/accommodations must include, description of all interventions/accommodations been tried in the regular education classes or environment (for preschool children) but we unsuccessful. Interventions/accommodations documented through teacher interview(s) that are the child's disability, health records, anecdota therapy evaluations and intervention strategies.	a written that have the natural re deemed may be specific to									
Other Health Impairment – ADHD		EVAL		ELIG RPT						
Evaluation Requirements		YES	NO	YES	NO	N/A	COMMENTS			
1. Vision Screening P F Follow-u Hearing Screening P F Follow-u	p									
2. A statement of how the impairment adversely educational performance of the child and docum performance measures such as individual and intelligence scores, individual and/or group achievement and/or diagnostic test(s) scores, observations, criterion-referenced tests, curric assessments, review of child's existing records, (i.e., health, discipline).	entation of l/or group educational classroom ulum-based									
3. Administration of the same norm-referenced scale designed to determine the presence of ADD or three or more independent raters who have had kn the child for at least six weeks. One of the raters parent or the child. If a self-report is used, it must be of the same ADD or ADHD scale. Standard Score composite) on two out of three of the same area must two s.d. above or below the mean (depending instrument). Note: The independent raters must have knowled child and may be the parent or the child. If a sequence, it must be a version of the same scale, ADD scale.	ADHD by owledge of may be the se a version res (total or t be at leasting on the dge of the lf-report is									

	For Initial Evaluations Only: The documentation of			
	interventions/accommodations must include, a written description			
	of all interventions/accommodations that have been tried in the			
	regular education class(es)/natural environment (for preschool			
	children) but deemed unsuccessful. Interventions/accommodations			
	may be documented through teacher interview(s) that are specific to			
	the child's ability, classroom observations(s) that are specific to the			
	child's disability, health records, anecdotal records, therapy evaluations and intervention strategies			
	evaluations and intervention strategies			
7D1 6 11				
The follow	ing information must also be included on the eligibility report:			
For Initial	Evaluation			
Prong 1		Yes	No	
Documentation that the child was provided appropriate instruction in regular education settings				
Documentation that instruction was delivered by qualified personnel				
Prong 2				
Data-based documentation of repeated assessments of achievement at reasonable intervals reflecting				
formal assessment of student progress during instruction				
Documenta	tion above was provided to the parent	Ш		
At Every I	Reevaluation			
	NECYALUALIVII			

Documentation that instruction was delivered by qualified personnel