

COMPLIANCE VERIFICATION FORM

Orthopedic Impairment

07-2 AAC Criteria

Student's Name _____ Reviewer _____ Date _____

	Orthopedic Impairment Evaluation Requirements	EVAL		ELIG RPT		N/A	COMMENTS
		YES	NO	YES	NO		
	1. Vision Screening P_____ F_____ Follow up_____						
	Hearing Screening P_____ F_____ Follow-up_____						
	2. Documentation of the orthopedic impairment (medical diagnosis/physician's statement).						
	3. Performance measures such as developmental scores, individual and/or group intelligence scores, individual and/or group educational achievement and/or diagnostic test(s) scores, classroom observations, motor assessments, criterion-referenced tests, curriculum-based assessments, review of child's existing records (i.e., attendance, health).						
	4. A statement of how the impairment adversely affects the educational performance of the child.						
	<p>For Initial Evaluations Only:</p> <p>The documentation of interventions/accommodations must include, a written description of all interventions/accommodations that have been tried in the regular education class(es) or the natural environment (for preschool children) but were deemed unsuccessful. Interventions/accommodations may be documented through teacher interview(s) that are specific to the child's disability, health records, anecdotal records, therapy evaluations, and intervention strategies.</p>						

The following information must also be included on the eligibility report:

For Initial Evaluation

Prong 1

- | | | |
|---|--------------------------|--------------------------|
| Documentation that the child was provided appropriate instruction in regular education settings | Yes | No |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| Documentation that instruction was delivered by qualified personnel | <input type="checkbox"/> | <input type="checkbox"/> |

Prong 2

- | | | |
|---|--------------------------|--------------------------|
| Data-based documentation of repeated assessments of achievement at reasonable intervals reflecting formal assessment of student progress during instruction | Yes | No |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| Documentation above was provided to the parent | <input type="checkbox"/> | <input type="checkbox"/> |

At Every Reevaluation

- | | | |
|---|--------------------------|--------------------------|
| Documentation that instruction was delivered by qualified personnel | Yes | No |
| | <input type="checkbox"/> | <input type="checkbox"/> |