Livingston County Academy & Crossroads

Therapeutic Day School

Referral Procedures

2011-2012

09/2011

LIVINGSTON COUNTY ACADEMY / CROSSROADS
STUDENT PLACEMENT RECOMMENDATION PROCEDURE

I. Ensure that all local school district resources have been exhausted.

II. Include Parents, LCSSU Social Worker, LCSSU Psychologist, and LCSSU Program Supervisor in problem-solving meetings to discuss ongoing behavioral issues.

III. Complete/develop FBA (Functional Behavior Analysis) and BIP (Behavior Intervention Plan).

IV. Provide evidence that the BIP has been implemented with integrity.

V. Provide evidence of the impact of the BIP on behavior.

VI. Include Academy/Crossroads Principal, as needed.

VII. Complete "Academy/Crossroads Student Referral Form"

VIII. Complete "Narrative of Reasons for Change of Placement Request"

IX. Contact assigned LCSSU Program Supervisor

X. LCSSU Program Supervisor will then contact Academy/Crossroads Principal

XI. Schedule IEP meeting with Parent, Home School Teacher, Home School Administrator, LCSSU Social Worker, LCSSU Psychologist, LCSSU Program Supervisor, and Academy/Crossroads Principal

<u>IMPORTANT NOTES:</u>

1. *A placement staffing for Academy/Crossroads cannot be held without representation from the Academy/Crossroads program.*
2. *An IEP meeting does not guarantee automatic placement in the Academy/Crossroads School Programs.*
3. *Every effort needs to be made to educate each student in the home school.*
4. *Placement at Academy/Crossroads should be a last resort.*

ACADEMY/CROSSROADS STUDENT REFERRAL FORM

Student Name: _____ D.O.B.: _____ Grade: _____

Referring School District: _____

Primary Disability: _____ Secondary Disability: _____

Current Educational Setting: _____

REQUIRED DOCUMENTS

√	DOCUMENT	DATE WRITTEN	DATE REVIEWED	OTHER COMMENTS
	Current IEP			
	Behavior Intervention Plan			
	Functional Behavioral Analysis			
	Social Developmental Study			
	Medical History			
	Educational / Placement History			
	Court Records (if applicable)			
	School Records: Grades Credits Attendance History			
	Other Information			

NARRATIVE of REASONS for CHANGE OF PLACEMENT REQUEST

(i.e. "What interventions have been tried to warrant a more restrictive environment?"; "If a student is coming from a more restrictive setting, what successes have been realized that warrant a less restrictive setting.")

Signature of Building Principal	Date
Signature of Case Manager	Date
Signature of LCSSU Program Supervisor	Date