

LETTER OF EXTENDED SCHOOL YEAR SERVICES (ESYS)

ELIGIBILITY DETERMINATION – Revised 2015

Date:

RE: Preliminary Determination of **ELIGIBILITY** for ESYS

Dear Parent(s):

As a student receiving special education services, your child \_\_\_\_\_ is considered for needing extended school year services (ESYS) to ensure the provision of a free appropriate public education. During the current school year, data and information have been collected on your child to examine the need for extended school year services. An initial review of the data indicates that your child **does meet the criteria for ESYS** and is eligible to receive extended school year services (ESYS) this year.

HOW WAS THIS DATA COLLECTION CONDUCTED?

To make this preliminary determination, your child's teacher and/or related service personnel (e.g. physical therapist, social worker, etc.) reviewed data from these sources:

- \_\_\_\_\_ your child's evaluation/re-evaluation
  - \_\_\_\_\_ your child's current IEP
  - \_\_\_\_\_ your child's current functional behavioral assessment
  - \_\_\_\_\_ your child's behavior support plan and related data
  - \_\_\_\_\_ your child's class work and test scores
  - \_\_\_\_\_ your child's progress reports
  - \_\_\_\_\_ your child's progress toward grade level expectations
  - \_\_\_\_\_ your child's action steps on the transition plan
  - \_\_\_\_\_ other (please describe)
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The data collected was then applied to the ESYS Services eligibility criteria listed below in accordance with previous discussions during your child's annual IEP meeting, and based upon your child's current educational needs.

- \_\_\_\_\_ Regression-Recoupment
- \_\_\_\_\_ Critical Point of Instruction – 1
- \_\_\_\_\_ Critical Point of Instruction – 2
- \_\_\_\_\_ Employment
- \_\_\_\_\_ Transition from Early Steps to Part B Preschool
- \_\_\_\_\_ Transition to Post School Outcomes
- \_\_\_\_\_ Excessive Absences
- \_\_\_\_\_ Extenuating Circumstances

Attached to this letter is a photocopy of the **ESYS Critical Point of Instruction Documentation Form** that was completed using the above collected data/information.

**Please return this form within three (3) days to your child's teacher.**

- \_\_\_\_\_ I accept the offer for Extended School Year Services for this coming summer.
- \_\_\_\_\_ I decline the offer for Extended School Year Services for this coming summer.

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Signature of Parent

Date

SEE ATTACHED FLYER FOR SERVICES INFORMATION

**ESYS Eligibility Monitoring Checklist**  
**St. Bernard Parish Schools – Revised 2015**

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Student: \_\_\_\_\_  
School/LEA: \_\_\_\_\_

Roster Teacher: \_\_\_\_\_  
Date: \_\_\_\_\_

**Instructions:** Check the box in front of each criterion considered for ESYS. For each of the considered criterion, check the corresponding box to indicate whether the screening resulted in the student being eligible or not eligible. Check the boxes to reflect evidence necessary for eligibility. **Circle** eligible, not eligible or insufficient data based on the evidence provided in the student file. To be eligible under a given criterion, all “yes” boxes under that criterion should be checked.

- Regression-Recoupment**                       **Eligible**                       **Not Eligible**                       **Insufficient Data**
- Yes     No    The student has a Significant Cognitive Disability of (underline): Moderate, Severe, Profound, Multi, or Preschool
- Yes     No    There are essential objectives targeted.

Break 1

- Yes     No    The first break is a minimum of 5 consecutive instructional days.
- Yes     No    There are 2 pre-break data scores for each objective.
- Yes     No    There are 2 post-break data scores for each objective.
- Yes     No    The last post-break score occurs within 2 weeks after the break (3 weeks for objectives with data collected twice a week).

Break 2

- Yes     No    The second break is a **minimum** of 5 consecutive instructional days.
- Yes     No    There are 2 pre-break scores for each objective.
- Yes     No    There are 2 post-break scores for each objective.
- Yes     No    The last post-break score occurs within 2 weeks after the break (3 weeks for objectives with data collected twice a week).
- Yes     No    There is a **pattern** of regression-recoupment problems for the targeted objectives such that the highest post-break score is lower than the highest pre-break score for both breaks for at least one targeted objective.

- Critical Point of Instruction – 1**                       **Eligible**                       **Not Eligible**                       **Insufficient Data**
- Yes     No    The student receives instruction in general education classes.
- Yes     No    Present conditions make it likely that the student will lose time in general education classes or that the student will need an increase in special education support/service time.
- Yes     No    ESY services are likely to prevent the student from losing the general education class(es) time or increasing special education service time.

- Critical Point of Instruction – 2**                       **Eligible**                       **Not Eligible**                       **Insufficient Data**
- Yes     No    There is a list of skill/objectives considered to be crucial or important for the student.
- Self-help                       Social-behavioral, or                       Community access
- Yes     No    There is documentation regarding the student’s current performance on these skills that indicate the student is *about at criterion, or almost has it* AND
- Yes     No    The data and information support the probability that the student could master/maintain the skill(s)/objective(s) if provided ESY instruction and would not master/maintain the skill if ESYS were withheld.

- Employment**                                       **Eligible**                                       **Not Eligible**                                       **Insufficient Data**
- Yes     No    The student's current IEP addresses vocation/employment goals and objectives.
- Yes     No    Student's paid employment began prior to ESYS screening date.
- Yes     No    Performance data indicate that the student will need support to maintain the paid employment throughout the summer.
- Yes     No    The employer provided a written statement indicating the intention to employ the student throughout the summer.

- Transition from Early Steps to Preschool**     **Eligible**                                       **Not Eligible**                                       **Insufficient Data**
- Yes     No    The student was in Early Steps
- Yes     No    The student has a spring or summer birthday.
- Yes     No    The student is on an IEP.
- Yes     No    There are performance data from the IFSP to support the need for ESYS.

- Transition to Post School Outcomes**     **Eligible**                                       **Not Eligible**                                       **Insufficient Data**
- Yes     No    The student is expected to exit the LEA at the end of the year.
- Yes     No    There is a list of incomplete action steps and corresponding goals objectives that are the responsibility of the LEA.
- Yes     No    The student needs transition services during the summer months for these action steps to be completed.

- Excessive Absences**                                       **Eligible**                                       **Not Eligible**                                       **Insufficient Data**
- Yes     No    There is verification of more than 2 health related absences (without hospital/homebound services).
- Yes     No    There are data of the student's lack of projected progress on IEP skills as a result of the health-related absences.
- Yes     No    ESYS could have a significant impact on the student's ability to make continued progress toward the acquisition established goals/objectives necessary for his or her continued progress.

- Extenuating Circumstances**                                       **Eligible**                                       **Not Eligible**                                       **Insufficient Data**
- Yes     No    The student does not qualify for any of the above criterion (not due to insufficient data)
- Yes     No    There is reason to believe that a break in instruction will have a negative impact on the student.

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Teacher of Record Signature

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Date

**REGRESSION-RECOUPMENT DOCUMENTATION FORM**

St. Bernard Parish Schools – Revised 2015

Student Name: \_\_\_\_\_

Teacher's Name: \_\_\_\_\_

TARGETED CRITICAL GOALS/BENCHMARKS/OBJECTIVES OR SKILLS FOR ESY MONITORING	BREAK 1		BREAK 2	
	DATES: ___/___/___ TO ___/___/___	REGRESSION-RECOUPMENT PROBLEM? Was the highest post-break score lower than the highest pre-break score?	DATES: ___/___/___ TO ___/___/___	REGRESSION-RECOUPMENT PROBLEM? Was the highest post-break score lower than the highest pre-break score?
1.	Highest Pre-break score _____ Highest Post-break score _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Highest Pre-break score _____ Highest Post-break score _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	Highest Pre-break score _____ Highest Post-break score _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Highest Pre-break score _____ Highest Post-break score _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	Highest Pre-break score _____ Highest Post-break score _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Highest Pre-break score _____ Highest Post-break score _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	Highest Pre-break score _____ Highest Post-break score _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Highest Pre-break score _____ Highest Post-break score _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

\_\_\_\_ YES \_\_\_\_ NO Did the student have a Regression-Recoupment problem across both breaks for any goal/benchmark/objective or skill?

\_\_\_\_ YES \_\_\_\_ NO Is the student eligible for the ESY services based on a pattern of Regression-Recoupment problems?



## ESYS Critical Point of Instruction Documentation Form

Revised 2015

Student Name: \_\_\_\_\_ Roster Teacher: \_\_\_\_\_

School: \_\_\_\_\_ Date: \_\_\_\_\_

**For Critical Point of Instruction 1:**

Yes  No The student receives some/any instruction in general education classes.

Yes  No Present conditions make it likely that the student will lose time in general education classes or that the student will need an increase in special education support/service time.

If yes, describe: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Yes  No ESY services are likely to prevent the student from losing the general education class(es) time or increasing special education service time. Describe why or why not: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**For Critical Point of Instruction 2:**

Yes  No There is a list of skills/objectives considered to be critical or important for the student.

Self-help  Social-behavioral  Community access

Yes  No There are data regarding the student's current performance on these skills that indicate the student is at a critical stage of making significant progress toward the acquisition, fluency, maintenance and/or generalization (A, F, M, G) of these skills AND

Yes  No The data and information support the probability that the student could master/maintain the skills(s)/objective(s) if provided ESY instruction and would not master/maintain the skill if ESY services were withheld.

CRITICAL SKILL(S) FROM CURRENT IEP	CURRENT PERFORMANCE	PROGRESS: INDICATE A F M G	IMPACT OF PROVIDING ESY SERVICES