



Special Education Program Approval for Regional Programs

Regional Program Name:			
Contact Person:		Date:	
Telephone:		Email:	

	Criteria	Reference	Evidence	Approval Status	Required Features
1	Two or more SAUs provide regional special education programs and support services	20-A MRSA § 7253 20-A MRSA § 7253(2)(A) 20-A MRSA § 7253 (3)(C) 20-A MRSA § 7253 (3)(A) 20-A MRSA § 7204 (4)(D)	Current, signed cooperative Agreement that identifies: <ul style="list-style-type: none"> • Participating SAUs • SAU operating as the fiscal agent • Terms of entering/withdrawal • Program objectives/functions • Location of program and <u>owner</u> of building(s) used by program 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	

1a	The <u>general</u> program approval criteria (listed under Evidence)	<p>20-A MRSA § 7253 (3)(D) 20-A MRSA § 7204(4)</p> <p>20-A MRSA § 7253 (3)(E)</p>	<ul style="list-style-type: none"> • Program administration including identification of <u>employer(s)</u> of all program staff <p>Agreement or Plan addresses:</p> <ul style="list-style-type: none"> • Admission requirements • Staff qualification/certification • Plan of instruction • Adequacy of facilities • Adequacy of support services • Professional supervision • Teacher-student ratio • Parent/community participation 	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
2	Fiscal requirements	<p>20-A MRSA § 7253(3)(F) 20-A MRSA § 7204(4)(D)</p> <p>20-A MRSA § 7253 (3)(B)</p>	<p>Agreement or Plan identifies the fiscal agent's specific roles, which include responsibility for adequacy of facilities and complying with all components of the basic public school approval process, unless the agreement designates another SAU in the agreement as responsible for school approval, and informs Maine DOE of that different designation.</p> <p>Agreement or Plan identifies method of fiscal operation and cost sharing</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	

		20-A MRSA § 7253(2)(C)	No school construction is permitted for the regional special education program purposes.		
3	Admission requirements	20-A MRSA § 7204(4)(A)	Plan describes protocol for admitting students into program through a determination of student needs for specialized instruction/supportive services	<input type="checkbox"/> Yes <input type="checkbox"/> No	Procedure manual that outlines admissions protocol and process for determining individualized student needs for programming
4	Staff qualification or certification; teacher- student ratio	20-A MRSA § 7204(4)(B) 20-A MRSA § 7204(4)(G) MUSER X,XI, and XVIII	Plan lists all special education staff with last 4 digits of social security numbers, position held, applicable certification/licensure held, and number of students served at one time	<input type="checkbox"/> Yes <input type="checkbox"/> No	Certification of School Personnel form [form provided]
5	Plan of instruction	20-A MRSA § 7204(4)(C) 20-A MRSA § 7253 (3)(A) 20-A MRSA § 6209 20-A MRSA § 5021-A (2) (A-E) MU SER IX.3.A.(1)(b)(i)	Plan includes: <ul style="list-style-type: none"> • Copy of the written curriculum aligned with the revised <i>Maine Learning Results</i> • Description of assessment • Description of access to extracurricular activities 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	Plan is consistent with objectives and functions of the program outlined in the Agreement Plan identifies the member SAU's curriculum and assessment practices that are used Plan describes how students will have access to extracurricular activities
6	Adequacy of supportive services	20-A MRSA § 7204(4)(E) MUSER IX.3.A.1(d)	Plan includes an account of related service (<u>including transportation</u>) hours determined by student needs	<input type="checkbox"/> Yes <input type="checkbox"/> No	Completed related services grid [form provided]
7	Professional supervision	20-A MRSA § 7204(4)(F)	Plan includes a statement of assurance that program administrators are on site	<input type="checkbox"/> Yes <input type="checkbox"/> No	Plan describes how staff supervision is provided throughout the defined school

					day and during extracurricular activities
8	Funding (including tuition rates, if tuition is used)	20-A MRSA § 7302 MUSER XVIII(2) 20-A MRSA § 7253(4)	Plan includes : <ul style="list-style-type: none"> • Statement of assurance that, If tuition is used, the tuition rate shall not exceed the actual per student cost incurred in operation of the special education program • Statement of assurance that the regional program is supported by funds included in the special education appropriations of each of the member SAUs 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	