



This training is being recorded.

Please feel free to ask questions as they come up, but we will have several chat box check-ins throughout the training.

A dark blue silhouette of a person sitting and reading a book, positioned on the left side of the slide. The background is a solid dark blue.

MAINE DEPARTMENT
OF EDUCATION

Office Hours: Eligibility Forms 5/14/2025



Presented by: The OSSIE Supervision, Monitoring and Support Team



Our Agenda

- 1. Team Introductions**
- 2. Eligibility requirements**
- 3. Eligibility forms**
 - a. Adverse Effect
 - b. Specific Learning Disability
 - c. Speech/Language
- 4. Questions**
- 5. Resources**

Meet the Supervision, Monitoring and Support Team



Colette Sullivan
Federal Programs Coordinator
colette.sullivan@maine.gov



Jennifer Gleason
Educational Specialist
jennifer.gleason@maine.gov



Karlie Thibodeau
Educational Specialist
karlie.l.thibodeau@maine.gov



Ashley Satre
Educational Specialist
ashley.satre@maine.gov



Julie Pelletier
Secretary Associate
julie.pelletier@maine.gov

Section 2: Disability

2. DISABILITY

<input type="checkbox"/> Autism	<input type="checkbox"/> Deaf-Blindness	<input type="checkbox"/> Deafness
<input type="checkbox"/> Developmental Delay (3-5)	<input type="checkbox"/> Developmental Delay (Kindergarten)	<input type="checkbox"/> Emotional Disability
<input type="checkbox"/> Hard of Hearing	<input type="checkbox"/> Intellectual Disability	<input type="checkbox"/> Visual Impairment (including Blindness)
<input type="checkbox"/> Other Health Impairment	<input type="checkbox"/> Orthopedic Impairment	<input type="checkbox"/> Speech/Language Impairment
<input type="checkbox"/> Specific Learning Disability	<input type="checkbox"/> Traumatic Brain Injury	<input type="checkbox"/> Multiple Disability
<i>(check all applicable concomitant disabilities)</i>		

MUSER – Maine Unified Special Education Regulations

MUSER VII.2.A-M outlines all
Disability Categories, including the
Definition and the Procedure for Determination.

Section 2: Disability

1. Document the disability based on the initial or reevaluation eligibility decision (identifies areas of need)
2. Eligibility requires the use of at least one of these forms:
 - a. Form for Determination of Adverse Effect on Educational Performance
 - b. Specific Learning Disability Eligibility Form
 - c. Speech or Language Impairment Eligibility Form
3. Change in Eligibility
 - a. Complete eligibility form(s) documenting previous disability category e.g., Speech/Language Form **AND**
 - b. Complete eligibility form(s) documenting current disability category e.g., Adverse Effect Form-for change to Autism
4. Dismissal from special education services
 - a. Complete eligibility form(s) documenting student does not qualify as a child with a disability

Section 2: Disability

Procedure for Determination of Adverse Effect on Educational Performance –

This procedure applies only to the following disability eligibility categories:

Autism, Deafness, Developmental Delay, Emotional Disturbance, Hearing Impairment, Intellectual Disability, Orthopedic Impairment, Other Health Impairment, Speech or Language Impairment, Traumatic Brain Injury and Visual Impairment including Blindness.

This section does not apply to the following disabilities where the demonstration of adverse effect is not required as a condition for special education eligibility:

Deaf-Blindness, Multiple Disabilities and Specific Learning Disability.

MUSER – Maine Unified Special Education Regulations

MUSER II.3

Adverse effect/Adversely affects. *The word “adverse” commonly means “harmful, impeding, obstructing, or detrimental.” To “adversely affect” means to have a negative impact that is more than a minor or transient hindrance, evidenced by findings and observations based on data sources and objective assessments with replicable results.*

Quick Reference Checklists



Quick Reference Checklists

- [IEP Quick Reference Checklist](#)
- [Adverse Effect Form](#)
- [Speech Language Eligibility Form](#)
- [Specific Learning Disability Eligibility Form](#)
- [Summary of Performance](#)
- [Written Notice Quick Reference Checklist](#)

Procedural Manual – Eligibility Forms

Table of Contents

	Page
Advance Written Notice	3
Determination of Adverse Effect	6
Documentation of Agreement of Non-Attendance for IEP/IFSP Team member whose Curriculum Area IS NOT being Discussed	12
Documentation of Agreement of Non-Attendance for IEP/IFSP Team member whose Curriculum Area IS being Discussed	13
Individualized Education Program	14
Parental Consent for Evaluation	43
Parental Consent to Invite Other Agencies to IEP Meetings – Postsecondary Goals & Transition Services	47
Referral for Special Education Services	49
Revocation of Special Education Services	60
Seven Day Waiver	61
Specific Learning Disability Eligibility Form	62
Speech or Language Impairment Eligibility Form	74
Summary of Performance	82
Written Notice	87

Adverse Effect on Educational Performance

Compliance
Best Practice



Form for the Determination of Adverse Effect on Educational Performance

Maine Unified Special Education Regulations (MUSER VII.3)

Date of Meeting:			SAU:	
Child's Name:			School:	
Date of Birth:		Grade:		
Parent/Guardian Name:				
Parent/Guardian Address:				
Parent/Guardian City, State Zip:				

One of these should be checked

School Contact:

--

Reason for use of form: ☐ Initial Eligibility ☐ Continuing Eligibility/Dismissal

☐ **Best Practice: Document reason for use of form**

This form is to be used to consider eligibility for all disability categories except Specific Learning Disability, Speech or Language Impairment, and Deaf-Blindness.

Adverse Effect on Educational Performance

Directions:

- The use of the form is limited to:
 - Determination of eligibility for special education services.
 - Consideration of a change in eligibility for special education services.
 - Dismissal from special education services.
- **The procedure for determination of adverse effect applies only to the following eligibility categories:** Autism, Deafness, Developmental Delay, Emotional Disturbance, Hearing Impairment, Intellectual Disability, Orthopedic Impairment, Other Health Impairment, Traumatic Brain Injury, and Visual Impairment including Blindness.

• Pg. 6 Procedural Manual

Adverse Effect on Educational Performance

Adverse effect/Adversely affects definition (MUSER II.3)

The word “adverse” commonly means “harmful, impeding, obstructing, or detrimental.” To “adversely affect” means to have a negative impact that is more than a minor or transient hindrance, evidenced by findings and observations based on data sources and objective assessments with replicable results. An adverse effect on educational performance does not include a developmentally appropriate characteristic of age/grade peers in the general population.

☐ **Best Practice: Document conversation/completion of the form in Written Notice**



Written Notice

5. Describe any other factors that are relevant to the SAU's proposed or refused action(s) described above:

The IEP Team completed the Adverse Effect Form and determined that Page Turner qualifies for special education services.

Adverse Effect on Educational Performance

I.A. The IEP Team has reviewed the following assessment(s) or data source(s) to determine adverse effect resulting from the child's disability [check one of the boxes in each category and provide verification by describing the data that supports the determination as to whether or not adverse effect is demonstrated]:

* N/A=not available

Compliance: Entire Form

- ☐ **Decision is based on a variety of sources**
- ☐ **Information from sources is documented for Yes or No**

Best Practice: Entire Form

- ☐ **Check the correct box for each question**
- ☐ **Include summaries and explanations according to form directions**

The IEP Team's determination of adverse effect is based upon the results of assessments and/or data sources determined by the Team to be necessary to verify the effect of the disability on educational performance. In most situations, the Team will consider multiple assessments and/or data sources for determination of adverse effect.

Adverse Effect on Educational Performance

<p>1. Do standard or percentile scores on <u>nationally-normed</u>, individually- administered achievement test(s), or for children ages 3 to 5, appropriate multi-domain <u>nationally-normed</u> test(s) or rating scale(s), demonstrate adverse effect?</p> <p>Verification:</p> <p><input type="checkbox"/> Compliance: Information from sources is documented</p> <p><input type="checkbox"/> Best Practice: include data source (evaluation/assessment) and data (scores)</p> <p><u>Examples of data sources:</u></p> <p><u>3-5 yo:</u> WPPSI, ADOS</p> <p><u>K-12:</u> WJ, WIAT, OWLS, GORT, Test of Word Reading Efficiency</p>	<p>Yes</p> <p><input type="checkbox"/></p>	<p>No</p> <p><input type="checkbox"/></p>	<p>N/A*</p> <p><input type="checkbox"/></p>
---	---	--	--

Adverse Effect on Educational Performance

2. Do standard or percentile scores on nationally-normed, group-administered achievement test(s), including nationally-normed, curriculum-based measures, demonstrate adverse effect?

Yes

No

N/A*

☐☐☐

Verification:

☐ **Compliance: Information from sources is documented**

☐ **Best Practice: include data source (evaluation/assessment) and data (scores)**

Examples of data sources: NWEA, PSAT, SAT

Adverse Effect on Educational Performance

<p>3. Do any reports prepared by the SAU or presented by the parent/guardian that reflect academic or functional performance <u>document</u> adverse effect?</p> <p>Verification:</p> <p><input type="checkbox"/> Compliance: Information from sources is documented</p> <p><input type="checkbox"/> Best Practice: include data source (evaluation/assessment) and data (scores)</p> <p><u>Examples of data sources:</u></p> <p><u>3-5 yo:</u> ABAS, CDS Eligibility Observation Summary</p> <p><u>K-12:</u> Vinland scores, ABAS scores, academic grades, reports by parents or outside providers, reports of whether the child meets standards in standards-based system</p>	<p>Yes</p> <p><input type="checkbox"/></p>	<p>No</p> <p><input type="checkbox"/></p>	<p>N/A*</p> <p><input type="checkbox"/></p>
---	---	--	--

Adverse Effect on Educational Performance

<p>4. Does the child's performance on comprehensive assessments based on a system of learning results, or the Common Core as of 2014, or measurements of indicators within the Early Childhood Learning Guidelines, demonstrate adverse effect?</p> <p>Verification:</p> <p><input type="checkbox"/> Compliance: Information from sources is documented</p> <p><input type="checkbox"/> Best Practice: include data source (evaluation/assessment) and data (scores)</p> <p><u>Examples of data sources:</u></p> <p><u>3-5 yo:</u> AEPS, <u>HighScope</u> Child Observation Record</p> <p><u>K-12:</u> Maine Through Year Assessment, NWEAs, writing prompts, curriculum-based measures (DRA, DIBELS, Everyday Math, <u>AIMSweb</u>, curriculum unit tests)</p>	<p>Yes</p> <p><input type="checkbox"/></p>	<p>No</p> <p><input type="checkbox"/></p>	<p>N/A*</p> <p><input type="checkbox"/></p>
---	---	--	--

Adverse Effect on Educational Performance

<p>5. Do criterion-referenced assessments of academic or functional performance demonstrate adverse effect?</p> <p>Verification:</p> <p><input type="checkbox"/> Compliance: Information from sources is documented</p> <p><input type="checkbox"/> Best Practice: include data source (evaluation/assessment) and data (scores)</p> <p><u>Examples of data sources:</u> VB-MAPP, ABLLS, Brigance Inventory of Early Development, School Function Assessment, NWEAs, Maine Through Year Assessment, classroom test scores</p>	<p>Yes</p> <p><input type="checkbox"/></p>	<p>No</p> <p><input type="checkbox"/></p>	<p>N/A*</p> <p><input type="checkbox"/></p>
---	---	--	--

Adverse Effect on Educational Performance

	Yes	No	N/A*
6. Do child work products, language samples, or portfolios demonstrate adverse <u>effect</u> ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Verification:			
<input type="checkbox"/> Compliance: Information from sources is documented			
<input type="checkbox"/> Best Practice: include data source (evaluation/assessment) and data (scores)			
<u>Examples of data sources:</u> Writing prompts, handwriting samples, portfolios of work, classroom work samples			

Adverse Effect on Educational Performance

<p>7. Does disciplinary evidence, or rating scales based on systemic observations in more than one setting (whenever possible) by professionals or parents/guardians, demonstrate adverse effect?</p> <p>Verification:</p> <p><input type="checkbox"/> Compliance: Information from sources is documented</p> <p><input type="checkbox"/> Best Practice: include data source (evaluation/assessment) and data (scores)</p> <p><u>Examples of data sources:</u> Disciplinary reports/office referrals, FBA, BASC Rating Scales, BRIEF, behavior data sheets/logs, classroom observation(s)</p>	<p>Yes</p> <p><input type="checkbox"/></p>	<p>No</p> <p><input type="checkbox"/></p>	<p>N/A*</p> <p><input type="checkbox"/></p>
---	---	--	--

Adverse Effect on Educational Performance

8. Do the child's attendance patterns demonstrate adverse effect?	Yes	No	N/A*
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Verification:			
<input type="checkbox"/> Compliance: Information from sources is documented			
<input type="checkbox"/> Best Practice: include data source (evaluation/assessment) and data (scores)			
<u>Examples of data sources:</u> Attendance records (school, program and/or class)			

Adverse Effect on Educational Performance

	Yes	No	N/A*
<p>9. Do the child's social or emotional deficits (if any), as observed by professionals or parents/guardians in multiple settings (whenever possible), on clinical rating scales or in clinical interviews, demonstrate adverse effect?</p> <p>Verification:</p> <p><input type="checkbox"/> Compliance: Information from sources is documented</p> <p><input type="checkbox"/> Best Practice: include data source (evaluation/assessment) and data (scores)</p> <p><u>Examples of data sources:</u> BASC, BRIEF, Achenbach, Connors Rating Scales, Multidimensional Anxiety Scale for Children, Piers-Harris Self-Concept Scale, Autism Rating Scales, observation</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Adverse Effect on Educational Performance

10. Other (add any other data sources)	Yes	No	N/A*
Verification:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Adverse Effect on Educational Performance

1.B. Was only one assessment/data source considered?

Yes

☐

No

☐

☐ **Best Practice: Check the correct box (Yes, No)**

If the answer to the question is "Yes", state the IEP Team's rationale for the determination that the single assessment/data source is adequate for the determination of adverse effect on educational performance:

☐ **Best Practice: If "Yes", explain why that was adequate**

Adverse Effect on Educational Performance

II. Has the IEP Team determined that there is an adverse effect on educational performance resulting from the child's disability?

Yes

☐

No

☐

☐ **Best Practice: Check the correct box (Yes, No)**

If the answer to this question is “Yes”, proceed to section III

If the answer to this question is “No”, the child does not qualify as a child with a disability under Maine Unified Special Education Regulations (MUSER) and is not entitled to an Individualized Education Program

Adverse Effect on Educational Performance

- Only complete Section 3 if the answer to Section 2 is “yes”.



[This Photo](#) by Unknown Author is licensed under [CC BY](#)

Adverse Effect on Educational Performance

III. The adverse effect that results from the child's disability is, (check one)

- ☐ of such a degree or kind that the child requires special education in order to benefit from his/her education program.
- ☐ correctible through accommodations in the child's regular education program.
- ☐ **Best Practice: Check the correct box**

Summarize the basis for the determination as to whether the child requires special education in order to benefit from his/her education program **OR** the adverse effect is correctible through accommodations in the child's regular education program.

☐ **Best Practice: Must include a summary**

If the first box was checked, the child qualifies as a child with a disability under the Maine Unified Special Education Regulations and is entitled to an Individualized Education Program. If the second box was checked, the child does not qualify as a child with a disability under Maine Unified Special Education Regulations and is not entitled to an Individualized Education Program.





What's wrong?



Form for the Determination of Adverse Effect on Educational Performance

Maine Unified Special Education Regulations (MUSER VII.3)

Date of Meeting:	12/15/2023		SAU:	RSU 900
Child's Name:	Page Turner		School:	Public School
Date of Birth:	4/30/2008	Grade: 10	School Phone:	207-555-5555
Parent/Guardian Name:	Rita Book		School Address:	1 Mathematics Dr.
Parent/Guardian Address:	1 Library Ln		City, State Zip:	Nowhere, ME 44444
Parent/Guardian City, State Zip:	Nowhere, ME 44444		School Contact:	Jane Doe

Reason for use of form: ☐ Initial Eligibility ☐ Continuing Eligibility/Dismissal

This form is to be used to consider eligibility for all disability categories except Specific Learning Disability, Speech or Language Impairment, and Deaf-Blindness.

Adverse effect/Adversely affects definition (MUSER II.3)

The word "adverse" commonly means "harmful, impeding, obstructing, or detrimental." To "adversely affect" means to have a negative impact that is more than a minor or transient hindrance, evidenced by findings and observations based on data sources and objective assessments with replicable results. An adverse effect on educational performance does not include a developmentally appropriate characteristic of age/grade peers in the general population.

I.A. The IEP Team has reviewed the following assessment(s) or data source(s) to determine adverse effect resulting from the child's disability [check one of the boxes in each category and provide verification by describing the data that supports the determination as to whether or not adverse effect is demonstrated]:

* N/A=not available

	Yes	No	N/A*
1. Do standard or percentile scores on nationally-normed, individually- administered achievement test(s), or for children ages 3 to 5, appropriate multi-domain nationally-normed test(s) or rating scale(s), demonstrate adverse effect?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Verification:			



[This Photo](#) by Unknown Author is licensed under [CC BY-NC-ND](#)



Tell us in the Chat Box why this is not compliant.

What's wrong?



Form for the Determination of Adverse Effect on Educational Performance

Maine Unified Special Education Regulations (MUSER VII.3)

Date of Meeting:	12/15/2023		SAU:	RSU 900	
Child's Name:	Page Turner		School:	Public School	
Date of Birth:	6/30/2008	Grade:	10	School Phone:	207-555-5555
Parent/Guardian Name:	Rita Book		School Address:	1 Mathematics Dr.	
Parent/Guardian Address:	1 Library Ln		City, State Zip:	Nowhere, ME 44444	
Parent/Guardian City, State Zip:	Nowhere, ME 44444		School Contact:	Jane Doe	

Reason for use of form: ☐ Initial Eligibility ☐ Continuing Eligibility/Dismissal

This form is to be used to consider eligibility for all disability categories except Specific Learning Disability, Speech or Language Impairment, and Deaf-Blindness.

Adverse effect/Adversely affects definition (MUSER II.3)

The word "adverse" commonly means "harmful, impeding, obstructing, or detrimental." To "adversely affect" means to have a negative impact that is more than a minor or transient hindrance, evidenced by findings and observations based on data sources and objective assessments with replicable results. An adverse effect on educational performance does not include a developmentally appropriate characteristic of age/grade peers in the general population.

I.A. The IEP Team has reviewed the following assessment(s) or data source(s) to determine adverse effect resulting from the child's disability [check one of the boxes in each category and provide verification by describing the data that supports the determination as to whether or not adverse effect is demonstrated]:

* N/A=not available

	Yes	No	N/A*
1. Do standard or percentile scores on nationally-normed, individually- administered achievement test(s), or for children ages 3 to 5, appropriate multi-domain nationally-normed test(s) or rating scale(s), demonstrate adverse effect?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Verification:			



This Photo by Unknown Author is licensed under [CC BY-SA-NC](#)

- No verification for #1

Instead...



Form for the Determination of Adverse Effect on Educational Performance

Maine Unified Special Education Regulations (MUSER VII.3)

Date of Meeting:	12/15/2023		SAU:	RSU 900
Child's Name:	Page Turner		School:	Public School
Date of Birth:	6/30/2008	Grade: 10	School Phone:	207-555-5555
Parent/Guardian Name:	Rita Book		School Address:	1 Mathematics Dr.
Parent/Guardian Address:	1 Library Ln		City, State Zip:	Nowhere, ME 44444
Parent/Guardian City, State Zip:	Nowhere, ME 44444		School Contact:	Jane Doe

Reason for use of form: ☐ Initial Eligibility ☒ Continuing Eligibility/Dismissal

This form is to be used to consider eligibility for all disability categories except Specific Learning Disability, Speech or Language Impairment, and Deaf-Blindness.

Adverse effect/Adversely affects definition (MUSER II.3)

The word "adverse" commonly means "harmful, impeding, obstructing, or detrimental." To "adversely affect" means to have a negative impact that is more than a minor or transient hindrance, evidenced by findings and observations based on data sources and objective assessments with replicable results. An adverse effect on educational performance does not include a developmentally appropriate characteristic of age/grade peers in the general population.

I.A. The IEP Team has reviewed the following assessment(s) or data source(s) to determine adverse effect resulting from the child's disability [check one of the boxes in each category and provide verification by describing the data that supports the determination as to whether or not adverse effect is demonstrated]:

* N/A=not available

	Yes	No	N/A*
1. Do standard or percentile scores on nationally-normed, individually-administered achievement test(s), or for children ages 3 to 5, appropriate multi-domain nationally-normed test(s) or rating scale(s), demonstrate adverse effect?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Verification: WJ-IV Test of Achievement: Broad Reading 97, Broad Math 103, Broad Written Language 88			



Procedural Manual – Eligibility Forms

Table of Contents

	Page
Advance Written Notice	3
Determination of Adverse Effect	6
Documentation of Agreement of Non-Attendance for IEP/IFSP Team member whose Curriculum Area IS NOT being Discussed	12
Documentation of Agreement of Non-Attendance for IEP/IFSP Team member whose Curriculum Area IS being Discussed	13
Individualized Education Program	14
Parental Consent for Evaluation	43
Parental Consent to Invite Other Agencies to IEP Meetings – Postsecondary Goals & Transition Services	47
Referral for Special Education Services.	49
Revocation of Special Education Services.	60
Seven Day Waiver.	61
Specific Learning Disability Eligibility Form	62
Speech or Language Impairment Eligibility Form	74
Summary of Performance	82
Written Notice	87

Specific Learning Disability Form



Compliance
Best Practice



Specific Learning Disability Eligibility Form

Maine Unified Special Education Regulations (MUSER VII.2.L)

Date of Meeting:			SAU:	
Child's Name:			School:	
Date of Birth:		Grade:	School Phone:	
Parent/Guardian Name:			School Address:	
Parent/Guardian Address:			City, State Zip:	
Parent/Guardian City, State Zip:			School Contact:	

Specific Learning Disability definition (MUSER VII.2.L):

The term means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. Specific learning disability does not include learning problems that are primarily the result of visual, hearing or motor disabilities, or intellectual disability, or emotional disability or environmental, cultural or economic disadvantage.

Compliance: Entire Form

- ☐ Decision is based on a variety of sources
- ☐ Information from sources is documented for Yes or No

Best Practice: Entire Form

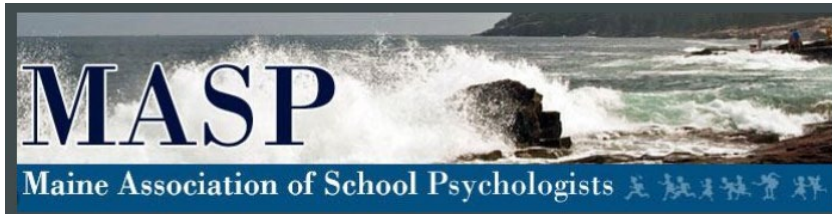
- ☐ Check the correct box for each question
- ☐ Include summaries and explanations according to form directions
- ☐ Best Practice: Document conversation/completion of the form in Written Notice
- ☐ Best Practice: Utilize the [Clinical Guidance on Implementation- For the Identification of Students Suspected of Having a Specific Learning Disability-2017 \(masponline.net\)](#)

Written Notice

5. Describe any other factors that are relevant to the SAU's proposed or refused action(s) described above:

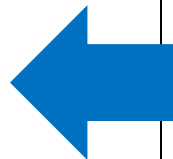
The IEP Team completed the Specific Learning Disability Form and determined that Page Turner qualifies for special education services.

Specific Learning Disability Form



[Home](#)
[Resources](#)

[Clinical Guidance on](#)
[Implementation- For the](#)
[Identification of Students](#)
[Suspected of Having a](#)
[Specific Learning Disability-](#)
[2017 \(masonline.net\)](#)



Clinical Guidance on Implementation

For the Identification of Students
Suspected of Having a

Specific Learning Disability



Developed by the
Maine Association of School Psychologist

September 2008
Revised March 2015, November 2015,
and September 2017

Specific Learning Disability Form

Part A: Qualifying Considerations

1. Does evidence from multiple valid and reliable sources demonstrate that the child is achieving adequately for the child's age and is meeting State-approved grade level standards in all of the areas below? (MUSER VII.2.L(2)(a)(i))

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

☐ **Best Practice: Check the correct box (Y/N)**

For children from diverse cultural and/or linguistic backgrounds that place them outside the group on which standardized achievement tests were normed, consider only age or grade equivalent scores, not standardized scores. For such children, determinations in this section should be made using a multi-tiered problem-solving approach such as analysis of work samples and other performance data. (MUSER VII.2.L(2)(a)(c)).

If the answer to Question 1 is **YES**, the child does not qualify as a child with a specific learning disability under MUSER. Provide data supporting that determination in the area below marked "Verification" and proceed to Question 8.

If the answer to Question 1 is **NO**, indicate below the areas in which the child is not achieving adequately. Provide data supporting that determination in the area marked "Verification" and proceed to Question 2.

Oral expression <input type="checkbox"/>	Reading fluency skills <input type="checkbox"/>
Listening comprehension <input type="checkbox"/>	Reading comprehension <input type="checkbox"/>
Written expression <input type="checkbox"/>	Mathematic calculation <input type="checkbox"/>
Basic reading skill <input type="checkbox"/>	Mathematics problem-solving <input type="checkbox"/>

Verification:

☐ **Compliance: Information from sources is documented**

☐ **Best Practice: include data source (evaluation/assessment) and data (scores)**

Examples of data sources: age normed, standardized assessments of academic achievement, state-wide or district-wide assessments, curriculum-based assessments, and classroom assessments based on state standards.

Specific Learning Disability Form

2. If the child is not achieving adequately in all areas, is the underachievement due to the lack of learning experiences and instruction appropriate for the child's age or state approved grade level standards? (MUSER VII.2.L(2)(a)(1))

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

☐ **Best Practice: Check the correct box (Y/N)**

Verification:

- ☐ **Compliance: Information from sources is documented**
- ☐ **Best Practice: Can include but not limited to:**
- **Identify the methodologies, not the results of general education interventions**
 - **Consider attendance**
 - **Consider teacher appropriate certification**
 - **Culturally and linguistically, include instruction consistent with assessments used to measure academic achievement**

In making this determination, the Team must:

- Consider whether the child, prior to or as a part of the referral process, was provided appropriate instruction in regular education settings, delivered by qualified personnel (MUSER VII.2.L(2)(b)(i) (1); and
- For culturally and linguistically diverse children and children from diverse educational backgrounds, consider the extent to which the child has been exposed to culturally and linguistically appropriate instruction.

If the answer to Question 2 is **YES**, the child does not qualify as a child with a specific learning disability under MUSER. Provide information supporting that determination in the area below marked "Verification" and proceed to Question 8.

If the answer to Question 2 is **NO**, provide information supporting that determination in the area marked "Verification" and proceed to Question 3.

Specific Learning Disability Form

This asks not whether the child has an intellectual disability, emotional disturbance, hearing disability, etc., but whether any such disability is a primary cause of the child's failure to achieve adequately.

3. If the child is not achieving adequately in all areas, is the child's lack of achievement primarily the result of any of the following factors? Provide evidence supporting each determination in the areas below marked "Verification."

☐ **Best Practice: Check the correct box (Y/N)**

a. Visual, hearing or motor disability (MUSER VII.2.L(2)(a)(iii)(aa))

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

Verification:

☐ **Compliance: Information from sources is documented**

Best Practice: include data source(s)

Examples of data sources: screening, medical records, observation

b. Intellectual disability (MUSER VII.2.L(2)(a)(iii)(bb))

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

Verification:

☐ **Compliance: Information from sources is documented**

Best Practice: include data source (evaluation/assessment) and data (scores)

Examples of data sources: cognitive scores and/or adaptive behavior scales

c. Emotional disability (MUSER VII.2.L(2)(a)(iii)(cc))

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

Verification:

☐ **Compliance: Information from sources is documented**

Best Practice: include data source(s)

Examples of data sources: rating scales, disciplinary records, teacher/parent reports, medical records, observations

d. Environmental, cultural or economic disadvantage and/or limited English proficiency (MUSER VII.2.L(2)(a)(iii)(dd-ff))

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

Verification:

☐ **Compliance: Information from sources is documented**

☐ **Compliance: Lack of instruction or limited English proficiency is prohibitive**

☐ **Best Practice: include data source (evaluation/assessment) and data (scores)**

Examples of data sources: WIDA scores, ACCESS scores, parent/guardian report; documentation of chronic life disruptions

If the answer to any sub-part of Question 3 is **YES**, the child does not qualify as a child with a specific learning disability under MUSER. Proceed to Question 8.

If the answer to all sub-parts of Question 3 is **NO**, proceed to question 4.

Specific Learning Disability Form

4. Does the child exhibit a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, state-approved grade level standards or intellectual development that is determined by the IEP Team to be relevant to the identification of a specific learning disability, using appropriate assessments? (MUSER VII.2.L(2)(a)(ii))

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

☐ **Best Practice: Check the correct box (Y/N)**

		Verification of Strengths	Verification of Weaknesses
a.	Data collected when using a process that is based on the child's response to scientific research-based intervention, including general education interventions under MUSER Section III. (MUSER VII.2.L(2)(a)(ii)(aa))		
b.	Classroom performance data. (MUSER VII.2.L(2)(a)(ii)(bb))		
c.	<u>Achievement</u> data based on summative assessments in the district's core curricula, State assessments and/or published nationally norm-referenced assessments. (MUSER VII.2.L(2)(a)(ii)(cc))		
d.	Psychological processing data from standardized measures to identify contributing factors, including standardized composite scores from nationally norm-referenced measures of skills such as, but not limited to, phonological processing, information retrieval and processing speed, language, working memory, long-term memory, short-term memory, auditory processing, visual spatial reasoning. (MUSER VII.2.L(2)(a)(ii)(dd))		

- ☐ **Compliance: Information from multiple sources is documented**
- ☐ **Best Practice: include data source (evaluation/assessment) and data (scores)**
- Examples of data sources:** RTI information; CBA; progress monitoring; formative assessment; observation; work samples; grades; CBA-PBE performance indicators; evaluations

For culturally and/or linguistically diverse children, consider the patterns of strengths and weaknesses that are consistent with that population, e.g., many English learners struggle with literacy skills but perform better in less language-based skills such as math calculation.

If the answer to Question 4 is **NO**, the child does not qualify as a child with a specific learning disability under MUSER. Proceed to Question 8.

If the answer to Question 4 is **YES**, proceed to question 5.

Specific Learning Disability Form

5. Relevant behavior noted during the observation(s) and its relationship to academic functioning (MUSER VII.2.L.(2)(f)). The child must be observed in the learning environment (including the regular classroom setting) to document the child's academic performance and behavior in the areas of difficulty. (MUSER VII.2.L.(2)(f)(i))

NOTES:

☐ **Best Practice:** Summarize relevant findings from the classroom observation; withdrawal, inattention, disengagement, lack of productivity.

Specific Learning Disability Form

6. Educationally relevant medical findings (MUSER VII.2.L(2)(g)(i)(IV))

NOTES:

☐ **Best Practice: Summarize relevant medical findings; ADHD, seizure disorder, tic disorder, mental health diagnoses (depression, anxiety, etc.), diabetes, or traumatic brain disorder**

Specific Learning Disability Form

7. Are the evaluations utilized valid and reliable assessments and performed by qualified individuals? (MUSER V.2.C(1)(c)&(d))

☐ **Best Practice: Check the correct box (Y/N)**

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

If NO, provide verification:

☐ **Compliance: Information from sources is documented**

- **If "NO" for any assessment, provide information about that assessment and why it is not considered valid and/or reliable or was not performed by a qualified person.**

Specific Learning Disability Form

PART B: Conclusions

8. Does a specific learning disability exist? (MUSER VII.2.L(2)(g)(i)(I))

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

☐ **Best Practice: Check the correct box (Y/N)**

If the answer to Question 8 is **NO**, the child does not qualify as a child with a specific learning disability under MUSER. If the answer is **YES**, proceed to question 9.

Directions:

- If “YES”, the following must be true
 - Question 1 must be NO, and verification must be provided.
 - Question 2 must be NO, and verification must be provided.
 - All parts of Question 3 must be NO, and verification must be provided.
 - Question 4 must be YES, and verification must be provided.
 - Question 7 must be YES.
 - Go on to Question 9.
- If “NO”, the following must be true
 - Either Question 1, 2, or any part of 3, must be YES or Question 4 must be NO.

Specific Learning Disability Form

9. If there is a learning disability, the disability is of such nature and degree that [check one and summarize the basis for that selection in the area marked "Summary"]:

- | | |
|--------------------------|---|
| <input type="checkbox"/> | a. <u>the</u> child requires special education and related services. (MUSER V.2.F(2)) |
| <input type="checkbox"/> | b. <u>it</u> can be adequately addressed through general education interventions and/or accommodations. |

Summary:

- ☐ **Best Practice: Check a box (a/b)**
- ☐ **Best Practice: Include a summary**

If the box in question 9(a) is checked, the child qualifies as a child with a specific learning disability under MUSER. If the box in question 9(b) is checked, the child does not qualify as a child with a specific learning disability under MUSER.

Directions:

- If "a", the following must be true:
 - Question 8 must be "YES" AND
 - The disability is of such nature AND degree that it cannot be adequately addressed through general education interventions and/or accommodations and only special education and related services will address it.
- If "b", the following must be true:
 - Question 8 must be "YES" AND
 - The disability is of such a nature AND degree that it can be adequately addressed through general education interventions and/or accommodations; therefore, special education and related services are not needed to address it.
 - If a child has been receiving RTI and/or other general education interventions which have enabled the child to make adequate academic progress, check 9b; if a child has failed to make adequate academic progress despite having received such interventions, check 9a. If the child has not received RTI and/or other general education interventions, the Team must determine whether, in view of the nature and degree of the disability, such interventions would likely enable the child to make adequate academic progress

Specific Learning Disability Form

Team members must certify their agreement or disagreement with this result by signing below:

I certify my agreement with the result of this report (MUSER VII.2.L(2)(g)(ii))

Signature	Printed Name	Title
<input type="checkbox"/> Compliance: All team members <u>MUST</u> sign		

(b) Each group member must certify in writing whether the report reflects the member's conclusion. If it does not reflect the member's conclusion, the group member must submit a separate statement presenting the member's conclusions.

[71 FR 46753, Aug. 14, 2006, as amended at 82 FR 31913, July 11, 2017]
[34 CFR 300.311\(b\)](#)

I **do not** agree with the result of this report

Signature	Printed Name	Title

Dissenting team members shall submit a separate statement (MUSER VII.2.L(2)(g)(ii)).

Questions?





What's wrong?

Specific Learning Disability Eligibility Form

Team members must certify their agreement or disagreement with this result by signing below:

I certify my agreement with the result of this report (MUSER VII.2.L(2)(g)(ii))

Signature	Printed Name	Title
Meeting was virtual; verbal consent was given		

I do not agree with the result of this report

Signature	Printed Name	Title



[This Photo](#) by Unknown Author is licensed under [CC BY-NC-ND](#)

Tell us in the Chat Box why this is not compliant.

What's wrong?

Specific Learning Disability Eligibility Form

Team members must certify their agreement or disagreement with this result by signing below:

I certify my agreement with the result of this report (MUSER VII.2.L(2)(g)(ii))

Signature	Printed Name	Title
Meeting was virtual; verbal consent was given		

I **do not** agree with the result of this report

Signature	Printed Name	Title



[This Photo](#) by Unknown Author is licensed under [CC BY-SA-NC](#)



- No signatures

Instead...

Specific Learning Disability Eligibility Form

Team members must certify their agreement or disagreement with this result by signing below:

I certify my agreement with the result of this report (MUSER VII.2.L(2)(g)(ii))

Signature	Printed Name	Title
All Team members signed either electronically or handwritten		

I **do not** agree with the result of this report

Signature	Printed Name	Title



Procedural Manual – Eligibility Forms

Table of Contents

	Page
Advance Written Notice	3
Determination of Adverse Effect	6
Documentation of Agreement of Non-Attendance for IEP/IFSP Team member whose Curriculum Area IS NOT being Discussed	12
Documentation of Agreement of Non-Attendance for IEP/IFSP Team member whose Curriculum Area IS being Discussed	13
Individualized Education Program	14
Parental Consent for Evaluation	43
Parental Consent to Invite Other Agencies to IEP Meetings – Postsecondary Goals & Transition Services	47
Referral for Special Education Services.	49
Revocation of Special Education Services.	60
Seven Day Waiver.	61
Specific Learning Disability Eligibility Form	62
Speech or Language Impairment Eligibility Form	74
Summary of Performance	82
Written Notice	87

Speech or Language Impairment Form

Compliance
Best Practice



Speech or Language Impairment Eligibility Form

Maine Unified Special Education Regulations (MUSER VII.2.K)

Date of Meeting:			SAU:	
Child's Name:			School:	
Date of Birth:		Grade:	School Phone:	
Parent/Guardian Name:			School Address:	
Parent/Guardian Address:			City, State Zip:	
Parent/Guardian City, State Zip:			School Contact:	

A child must meet **at least one of the four** criteria listed and to such a degree that it **adversely affects** educational performance and requires special education for the child to benefit from his/her education program. **This form is to be completed by the IEP Team whenever there is a meeting to determine eligibility or consider a change in eligibility (including dismissal from special education).**

☐ **Best Practice:** Document conversation/completion of the form in Written Notice

Written Notice

- Describe any other factors that are relevant to the SAU's proposed or refused action(s) described above:

The IEP Team completed the Speech/Language Eligibility Form and determined that Page Turner qualifies for special education services.

Speech or Language Impairment Form

Compliance: Entire Form

- ☐ Decision is based on a variety of sources
- ☐ Information from sources is documented for Yes or No
 - IEP Team must first complete the four severity rating scales that follow
 - If No due to checking "No Assessment Needed" on Severity Rating Scale, verification should indicate: "Not an area of suspected disability"

Best Practice: Entire Form

- ☐ Check the correct box for each question
- ☐ Include summaries and explanations according to form directions
- ☐ Sources of verification could include: standardized assessments, language samples, checklists, criterion-referenced assessments, rating scales

1. Does the child exhibit an articulation impairment based on the articulation severity rating scale?	YES	NO
	<input type="checkbox"/>	<input type="checkbox"/>

Verification:

- ☐ **Compliance: Information from sources is documented OR "Not an area of suspected disability"**

2. Does the child exhibit a language impairment based on the language severity rating scale?	YES	NO
	<input type="checkbox"/>	<input type="checkbox"/>

Verification:

- ☐ **Compliance: Information from sources is documented OR "Not an area of suspected disability"**

3. Does the child exhibit a fluency impairment based on the fluency severity rating scale?	YES	NO
	<input type="checkbox"/>	<input type="checkbox"/>

Verification:

- ☐ **Compliance: Information from sources is documented OR "Not an area of suspected disability"**

4. Does the child exhibit a voice impairment based on the voice severity rating scale?	YES	NO
	<input type="checkbox"/>	<input type="checkbox"/>

Verification:

- ☐ **Compliance: Information from sources is documented OR "Not an area of suspected disability"**

If the team has checked YES to any of Questions 1-4, check YES on Question 5, then go to question 6. If not, check NO on Question 5; the child does not qualify as a child with a speech or language impairment.

Speech or Language Impairment Form

5. Does a speech or language impairment exist?

☐ **Best Practice: Check the correct box (Yes, No)**

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

Speech or Language Impairment Form

6. Does the child's **speech or language impairment** adversely affect his/her educational performance?

☐ **Best Practice: Check the correct box (Yes, No)**

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

Verification:

☐ **Best Practice: Sources of data may include:** classroom grades, child work products, measures of attainment of literacy standards, scores on standardized tests of academic achievement (including reading comprehension scores), teacher and parent reports, evidence of functional communication skills, evidence of social cognitive strengths and social pragmatics, records of attendance, disciplinary evidence or behavior rating scales, and observations or ratings of social/emotional functioning

If the answer to Question 6 is YES, go to Question 7. If NO, the child does not qualify as a child with a speech or language impairment.

Speech or Language Impairment Form

7. If there is **a speech or language impairment**, the impairment is of such nature and degree that [check one and summarize the basis for that selection in the area marked "Verification"]:

<input type="checkbox"/>	a. <u>the</u> child requires special education.
<input type="checkbox"/>	b. <u>it</u> can be adequately addressed through general education interventions and/or accommodations.

Verification:

☐ **Best Practice: Check a box (a/b)**

☐ **Best Practice: Include a summary**

If the box in question 7(a) is checked, the child qualifies as a child with a speech or language impairment. If the box in question 7(b) is checked, the child does not qualify as a child with a speech or language impairment.

☐ **Compliance: IEP Team must complete and include the four severity rating scales that follow**

Speech or Language Impairment Form



Speech or Language Impairment Eligibility Form/Severity Rating Scales

Articulation Severity Rating Scale

Articulation impairment: The abnormal production of speech sounds including: substitutions, omissions, distortions or additions of speech sounds not commensurate with child's chronological age or cultural linguistic background and not related to dialect.

☐ **Compliance:** Check when not raised as an area of suspected disability

☐ No articulation assessment needed.

To find the presence of an impairment, ratings in **Description of Articulation, Standardized Assessments** and **Informal Assessments** **MUST** fall within the moderate or severe category.

☐ **Compliance:** Must fill, if "no assessment needed" is not checked

Description of Articulation	<input type="checkbox"/> No apparent problem	<input type="checkbox"/> Mild	<input type="checkbox"/> Moderate	<input type="checkbox"/> Severe
	No sound errors <u>present</u> or production is developmentally appropriate.	<ul style="list-style-type: none"> Sound errors are intelligible but noticeable. Errors consist of common types of substitutions and/or distortions. 	<ul style="list-style-type: none"> More numerous articulation errors are present. Intelligibility is difficult for an unfamiliar listener. Excessive use (40% or more) of substitution or omission processes which are inappropriate for age. 	<ul style="list-style-type: none"> Many articulation errors are present. Speech is frequently unintelligible to most listeners. Excessive use (40% or more) of omission processes or unique processes which are inappropriate for age.
Standardized Assessments	<input type="checkbox"/> No apparent problem	<input type="checkbox"/> Mild	<input type="checkbox"/> Moderate	<input type="checkbox"/> Severe
	<ul style="list-style-type: none"> A standard score <1.0 standard deviation below the mean. A standard score of ≥86. 16th percentile or above. 	<ul style="list-style-type: none"> 1 to 1.4 standard deviations below the mean. 7-15th percentile. A standard score of 78-85. ≤2 speech sound errors outside developmental guidelines. Children may be stimutable for error sounds. 	<ul style="list-style-type: none"> 1.5 to 1.9 standard deviations below the mean. 2-6th percentile. A standard score of 70-77. Substitutions, distortions and some omissions may be present. There is limited stimulability for the error phonemes. 	<ul style="list-style-type: none"> ≥2 standard deviations below the <u>mean</u>. <2nd percentile. A standard score <70. Deviations may range from extensive substitutions and many omissions to extensive omissions.
Informal Assessments	<input type="checkbox"/> No apparent problem	<input type="checkbox"/> Mild	<input type="checkbox"/> Moderate	<input type="checkbox"/> Severe
	Intelligible >80% of the time in connected speech.	Intelligible 61-80% of the time in connected speech.	Intelligible 40-60% of the time in connected speech.	Intelligible <40% of the time in connected speech.
	Intelligible >80% of the time in connected speech.	Intelligible >80% of the time in connected speech.	Intelligible 60-80% of the time in connected speech.	Intelligible <60% of the time in connected speech.
	Intelligible >80% of the time in connected speech.	Intelligible >80% of the time in connected speech.	Intelligible 60-80% of the time in connected speech.	Intelligible <60% of the time in connected speech.

Informal Assessment for a 5 year old:

- use "Ages 3-5" for CDS
- use "Ages 5-20" for SAU

Speech or Language Impairment Form



Speech or Language Impairment Eligibility Form/Severity Rating Scales

Language Severity Rating Scale

Language impairment: Any deviation in form of language (phonology, morphology and syntax), the content of language (vocabulary, semantics), and/or the functional use of language (pragmatics) perceived to be outside the allowable range for an individual's communication competence and not related to dialect or linguistic/cultural background. A language impairment adversely affects the child's educational performance as reflected by his/her social interaction, behavior, emotional development, vocational performance, communication, and/or participation in classroom activities as well as academic achievement.

☐ **Compliance: Check when not raised as an area of suspected disability**

☐ No language assessment needed.

To find the presence of an impairment, ratings in **Standardized Assessments** and **Informal Assessments** MUST fall within the moderate or severe category.

☐ **Compliance: Must fill, if "no assessment needed" is not checked**

	<input type="checkbox"/> No apparent problem	<input type="checkbox"/> Mild	<input type="checkbox"/> Moderate	<input type="checkbox"/> Severe
Standardized Assessments	<ul style="list-style-type: none"> A composite standard score <1.0 standard deviation below the mean. Language quotient or standard score of ≥ 86. $\geq 17^{\text{th}}$ percentile. 	<ul style="list-style-type: none"> A composite standard score of 1.0 to 1.4 standard deviations below the mean. Language quotient or standard score of 78-85. 8-16th percentile. 	<ul style="list-style-type: none"> A composite standard score of 1.5 to 2 standard deviations below the mean. Language quotient or standard score of 71-77. 3-7th percentile. 	<ul style="list-style-type: none"> A composite standard score of >2 standard deviations below the <u>mean</u>. Language quotient or standard score at or <70. $\leq 2^{\text{nd}}$ percentile.
Informal Assessments <ul style="list-style-type: none"> Criterion referenced Language or speech samples Structured observation 	<input type="checkbox"/> No apparent problem The child's language skills are within his/her expected language performance range on an informal assessment instrument.	<input type="checkbox"/> Mild Informal assessment indicates a language deficit.	<input type="checkbox"/> Moderate Informal assessment indicates a language deficit that usually interferes with communication.	<input type="checkbox"/> Severe Informal assessment indicates the pupil has <i>limited</i> functional language skills. Communication is an effort. Child is nonverbal and cognitive ability has not been ascertained.

Speech or Language Impairment Form



Speech or Language Impairment Eligibility Form/Severity Rating Scales

Fluency Severity Rating Scale

Fluency impairment: Abnormal speech production with reference to continuity, smoothness, rate and effort.

☐ **Compliance:** Check when not raised as an area of suspected disability

☐ No fluency assessment needed.

To find the presence of an impairment, ratings in **Description of Fluency** and **Informal Assessments** MUST fall within the moderate or severe category.

☐ **Compliance:** Must fill, if "no assessment needed" is not checked



	<input type="checkbox"/> No apparent problem	<input type="checkbox"/> Mild	<input type="checkbox"/> Moderate	<input type="checkbox"/> Severe
Standardized Assessments/Description of Fluency	Fluency of speech does not draw attention to the child and is developmentally appropriate.	<ul style="list-style-type: none"> • 3-5% dysfluent syllables of total syllables spoken with two or more speech samples of at least 100 syllables. • No secondary characteristics, frustration and avoidance behaviors <u>present</u>. • Fluent speech predominates. 	<ul style="list-style-type: none"> • 6-10% dysfluent syllables of total syllables spoken with two or more speech samples of at least 100 syllables. • Secondary characteristics, frustration and avoidance behaviors may be present. 	<ul style="list-style-type: none"> • ≥11% dysfluent syllables of total syllables spoken with two or more speech samples of at least 100 syllables. • Secondary characteristics, frustration and avoidance behaviors are present, typically noticeable and distracting.
Informal Assessments	<input type="checkbox"/> No apparent problem	<input type="checkbox"/> Mild	<input type="checkbox"/> Moderate	<input type="checkbox"/> Severe
		Transitory dysfluencies are observed in specific situations.	Frequent <u>dysfluencies</u> are observed in many situations.	Habitual dysfluent behaviors are observed in <u>a majority of</u> situations.

Children in CDS, a standardized assessment is not required; alternative assessment procedures such as clinical observations can be utilized to score the description of fluency

Speech or Language Impairment Form



Speech or Language Impairment Eligibility Form/Severity Rating Scales

Voice Severity Rating Scale


When a child is referred for a voice impairment, a medical referral is indicated.

Voice impairment: The absence or abnormal production of voice characterized by: deviant initiation/duration, tonal quality, pitch, loudness and/or resonance for age or speaking situation.

☐ **Compliance: Check when not raised as an area of suspected disability**

<input type="checkbox"/> No voice assessment needed.	To find the presence of <u>an impairment</u> , ratings in Description of Voice and Informal Assessments <u>MUST</u> fall within the moderate or severe category.
--	--

☐ **Compliance: Must fill, if "no assessment needed" is not checked**

 Description of Voice	<input type="checkbox"/> No apparent problem Voice production quality (tension, resonance), pitch and intensity are not unusual.	<input type="checkbox"/> Mild Inconsistent noticeable differences in voice production quality (tension, resonance), pitch or intensity.	<input type="checkbox"/> Moderate Persistent noticeable differences in voice production quality (tension, resonance), pitch or intensity.	<input type="checkbox"/> Severe Persistent noticeable extreme differences in voice production quality (tension, resonance), pitch or intensity.
	<input type="checkbox"/> No apparent problem	<input type="checkbox"/> Mild Voice <u>difference</u> including hoarseness, hypernasality, hyponasality, pitch or intensity is somewhat inappropriate for the child's age. Voice difference is of little or no concern to a physician.	<input type="checkbox"/> Moderate Voice <u>difference</u> including hoarseness, hypernasality, hyponasality, pitch or intensity is significantly inappropriate for the child's age. Voice difference is of concern to a physician.	<input type="checkbox"/> Severe Voice <u>difference</u> including hoarseness, hypernasality, hyponasality, pitch or intensity is distinctly abnormal for the child's age. Voice difference is of concern to a physician.

Voice impairment is a medical condition, and the diagnosis from a physician is required.

Questions?





What's wrong?



This Photo by Unknown Author is licensed under [CC BY-NC-ND](#)

Speech or Language Eligibility Form

1. Does the child exhibit an articulation impairment based on the articulation severity rating scale?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Verification: Goldman Fristoe scores		
2. Does the child exhibit a language impairment based on the language severity rating scale?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Verification: CELF scores		
3. Does the child exhibit a fluency impairment based on the fluency severity rating scale?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
Verification:		
4. Does the child exhibit a voice impairment based on the voice severity rating scale?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
Verification:		

Tell us in the Chat Box why this is not compliant.


What's wrong?



This Photo by Unknown Author is licensed under [CC BY-SA-NC](#)

Speech or Language Eligibility Form

1. Does the child exhibit an articulation impairment based on the articulation severity rating scale?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Verification: Goldman Fristoe scores		
2. Does the child exhibit a language impairment based on the language severity rating scale?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Verification: CELF scores		
3. Does the child exhibit a fluency impairment based on the fluency severity rating scale?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
Verification:		
4. Does the child exhibit a voice impairment based on the voice severity rating scale?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
Verification:		

- 
- Verification does not include data (scores)
 - No verification listed for #3 or #4

Instead...



Speech or Language Eligibility Form

1. Does the child exhibit an **articulation impairment** based on the articulation severity rating scale?

YES



NO



Verification: **GFTA-3: Standard score 53**

2. Does the child exhibit a **language impairment** based on the language severity rating scale?

YES



NO



Verification: **CELF-5: Core Language 63, Expressive Language 62, Receptive Language 65**

3. Does the child exhibit a **fluency impairment** based on the fluency severity rating scale?

YES



NO



Verification: **Not an area of suspected disability**

4. Does the child exhibit a **voice impairment** based on the voice severity rating scale?

YES



NO



Verification: **Not an area of suspected disability**

Commonly Asked Questions: Specific to Eligibility Forms



[This Photo](#) by Unknown Author is licensed under [CC BY-NC](#)

Do all the questions on the Adverse Effect form have to be answered?

Yes, all the questions need to be answered by the IEP Team.

Please note: NA means Not Available. Therefore, if there is no data to support a “yes” or “no” then “NA” should be checked.

Do the eligibility forms need to be completed during the IEP Team Meeting?

Yes, any appropriate eligibility forms must be completed during the meeting and a statement about this should be included in the Written Notice.

The Specific Learning Disability Form must be signed by all Team members.

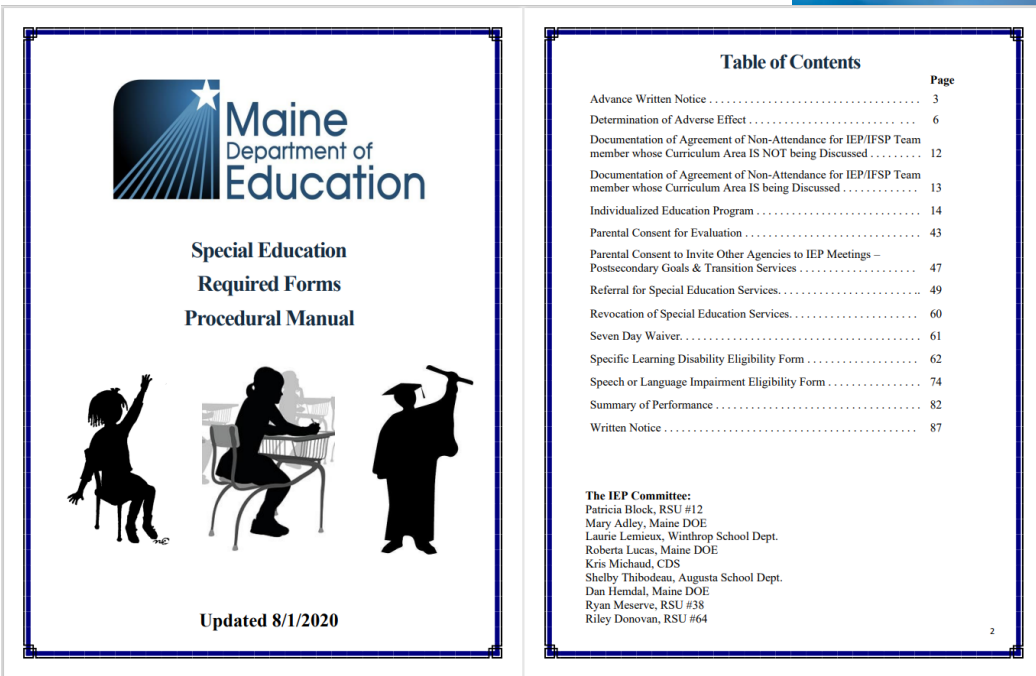
Also, if there is a change in eligibility, it might be necessary to complete multiple eligibility forms.

Resources



Resources

Procedural Manual



Resources

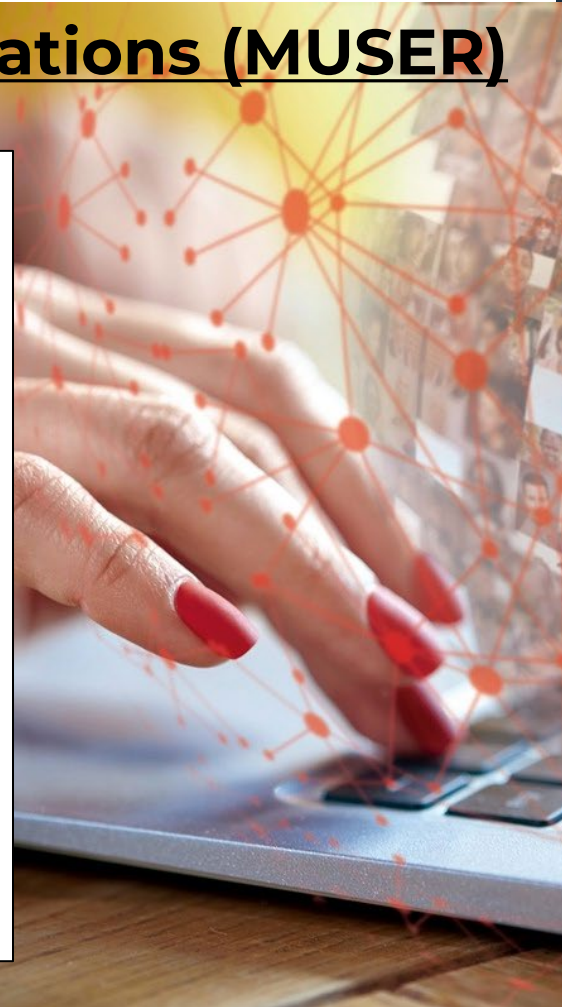
Maine Unified Special Education Regulations (MUSER)



05-071 Chapter 101

Maine Unified Special Education Regulation Birth to Age Twenty-Two

Effective Date: July 26, 2024



Resources

2024-25 Cohort IEP Quick Reference Document

*Compliance
*Best Practice



Maine Unified Special Education Regulations (MUSER IX.3.G.)

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

SAU or CDS Site:

Date IEP Sent to Parent:

FOT7- Compliance:

☐ Date sent to parent is \leq 21 school days from Annual Date of IEP Meeting

1. CHILD INFORMATION

Child's Name:	Annual Date of IEP Meeting:
Date of Birth:	Duration of the IEP:
Age:	Grade:
	Date of Next Annual IEP Meeting:
	FOT8- Compliance:
	<input type="checkbox"/> Date of next annual is within 364 days of annual meeting date
School/Program:	Date of Re-Evaluation:
Parent/Guardian Name:	Date(s) of Amended IEP:
Child's Address:	Case Manager:
City, State, ZIP:	
State Agency Client? <input type="checkbox"/> YES <input type="checkbox"/> NO	

2. DISABILITY

<input type="checkbox"/> Autism	<input type="checkbox"/> Deaf-Blindness	<input type="checkbox"/> Deafness
<input type="checkbox"/> Developmental Delay (3-5)	<input type="checkbox"/> Developmental Delay (Kindergarten)	<input type="checkbox"/> Emotional Disturbance
<input type="checkbox"/> Hearing Impairment	<input type="checkbox"/> Intellectual Disability	<input type="checkbox"/> Visual Impairment (including Blindness)
<input type="checkbox"/> Other Health Impairment	<input type="checkbox"/> Orthopedic Impairment	<input type="checkbox"/> Speech/Language Impairment
<input type="checkbox"/> Specific Learning Disability	<input type="checkbox"/> Traumatic Brain Injury	<input type="checkbox"/> Multiple Disability
(check all applicable concomitant disabilities)		

Compliance:

☐ Only one disability checked, unless Multiple Disability is checked

☐ If Multiple Disability is checked, all disabilities making up the multiple are checked

Resources



[Professional Development Calendar](#)

[Link for Recordings and Power Points](#)



[Special Education Resources](#)

[Special Education Laws and Regulations](#)



[Resources for Families & Schools-Forms](#)

2024-25 Professional Development Schedule

<u>DATE</u>	<u>TOPIC/DESCRIPTION</u>	<u>REGISTRATION LINK</u>	
Wednesday 9/11/24	Resources	YouTube	Slides
Wednesday 9/25/24	IEP Essentials for New Teachers	YouTube	Slides
Wednesday 10/9/24	Alignment	YouTube	Slides
Tuesday 10/15/24	All District IEP Training	YouTube	Slides
Wednesday 10/23/24	Advanced Written Notice and Written Notice	YouTube	Slides
Thursday 10/31/24	All District B13 Training	YouTube	Slides
Wednesday 11/13/24	Inclusion Presented by: Tracy Whitlock	Recording coming soon	
Wednesday 12/11/24	How Community Case Managers Can Help IEP Teams Presented by: KVBH	YouTube	Slides

2024-25 Professional Development Schedule (cont.)

<u>DATE</u>	<u>TOPIC/DESCRIPTION</u>	<u>REGISTRATION LINK</u>
Wednesday 1/8/25	Alternate Assessments Guest Speaker: Jodi Bossio-Smith	Recording coming soon
Wednesday 1/22/25	Compliant versus Good IEPs Developing a Strong IEP Part 1	YouTube Slides
Wednesday 2/12/25	Compliant versus Good IEPs Developing a Strong IEP Part 2	YouTube Slides
Wednesday 2/26/25	Accommodations and Services	YouTube Slides
Wednesday 3/12/25	Transition from CDS to Public School Guest Speaker: Lori Whittemore	Recording coming soon
Wednesday 3/26/25	Abbreviated Day	Recording coming soon
Wednesday 4/9/25	Special Education Law for General Education Teachers Guest Speaker: Leigh Lardieri	Recording coming soon
Monday 5/12/25	All District B13 Transition Training	Recording coming soon
Wednesday 5/14/25	Forms	Recording coming soon
Friday 5/28/25	Discipline & Manifestation Determination	Discipline & Manifestation Determination

Professional Learning Feedback and Contact Hour Form.



Feedback and Contact Hours

Complete this form to provide us with feedback and receive your contact hour certificate. Your feedback matters to us!

* Required

1

Did the training content meet your expectations? *

☐ Yes

☐ No

Next

<https://forms.office.com/g/by472QQLDJ>



This Photo by Unknown Author is licensed under CC BY-SA-NC



Use the link to complete the form
on your computer

OR

Use the QR code to complete the
form on your mobile device

The image shows a mobile device screen displaying the same feedback form as the desktop version. The form is titled 'Feedback and Contact Hours' and includes the Maine Department of Education logo. It asks the user to complete the form to receive a contact hour certificate. The first question is 'Did the training content meet your expectations?' with radio buttons for 'Yes' and 'No'. A 'Next' button is visible at the bottom of the form.



Stay Connected!

Find Us Online!



www.maine.gov/doe



[@MaineDOEComm](https://www.youtube.com/@MaineDOEComm)



[@mainedepted](https://www.instagram.com/mainedepted)



[@mdoenews](https://twitter.com/mdoenews)



[@MaineDepartmentofEducation1](https://www.facebook.com/MaineDepartmentofEducation1)



Colette Sullivan – Federal Programs Coordinator
colette.sullivan@maine.gov

Jennifer Gleason – Special Education Consultant
jennifer.gleason@maine.gov

Karlie Thibodeau – Special Education Consultant
karlie.l.thibodeau@maine.gov

Ashley Satre – Special Education Consultant
ashley.satre@maine.gov

Julie Pelletier – Secretary Associate
julie.pelletier@maine.gov



This Photo by Unknown Author is licensed under [CC BY-NC](https://creativecommons.org/licenses/by-nc/4.0/)

