

Student Name: _____ Student ID Number: _____ LEA of Enrollment: _____

EXTENDED SCHOOL YEAR (ESY) SERVICES ELIGIBILITY WORKSHEET

CRITERION	DESCRIBE & ANALYZE STUDENT DATA	IEP TEAM CONSENSUS	
Criterion 1: Impact of Break in Service on Critical Skill(s)	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<p><i>Will one or more of the student's critical skills be jeopardized by the break in service?</i></p> <p>NO</p>  STOP <p>ESY services are not necessary for FAPE if the IEP Team does not have concerns about any of the student's critical skills.</p>	<p>YES</p> <p>CONTINUE TO CRITERION 2</p> 
Criterion 2: Degree of Regression of Critical Skill(s)	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<p><i>Is there a likelihood of significant regression of the identified critical skill(s)?</i></p> <p>NO</p>  STOP <p>ESY services are not necessary for FAPE if there is little or no risk of significant critical skill regression.</p>	<p>YES</p> <p>CONTINUE TO CRITERION 3</p> 
Criterion 3: Time Required for Recoupment of Critical Skill(s)	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<p><i>Can the student recoup the identified critical skill(s) with re-teaching in a reasonable amount of time?</i></p> <p>NO</p>  REVIEW OF CRITERIA COMPLETED. PLEASE INDICATE IEP TEAM DETERMINATION BELOW.	<p>YES</p>  STOP <p>ESY services are not appropriate for students who can recoup critical skills within a reasonable amount of time.</p>

IEP TEAM DETERMINATION: Is the student eligible for Extended School Year (ESY) Services? NO YES

DATE OF DETERMINATION: ____/____/20____

NEXT STEPS: Enter the IEP Team's decision on the ESY page of the student's IEP in SEDS. Print out the cover sheet located on Documents Tab in SEDS, and fax both documents into SEDS. Then complete the services and goal portion of the ESY section in the student's IEP in SEDS.