

### ARD SUPPLEMENT: REVIEW OF EXISTING EVALUATION DATA

Review of existing evaluation data:

- Full and Individual Evaluation Date \_\_\_\_\_
- Evaluations and information provided by parents of student
- Current classroom-based assessments and observations
- Observations/Status Reports by teachers and related service providers

On the basis of the review, additional data are needed to determine:

- That the student has a category of disability
- That the student continues to have a disability (Reevaluation)
- The present levels of performance and educational needs of the student (Reevaluation)
- That the student needs special education and related services
- That the student continues to need special education and related services (Reevaluation)
- If any additions or modifications to the special education and related services are needed to enable the student to meet the measurable annual goals
- If any additions or modifications to the special education and related services are needed to enable the student to participate in the general curriculum

Additional evaluation(s) that are needed:

- Intelligence Evaluation
- Achievement Evaluation
- Speech Language Evaluation
- Psychological Evaluation
- Occupational Therapy Evaluation
- Physical Therapy Evaluation
- Assistive Technology Evaluation
- Medical Evaluation \_\_\_\_\_
- Other Evaluations \_\_\_\_\_
- On the basis of the review, no additional data are needed to determine whether the student continues to be a student with a disability. The ARD Committee has determined that the student meets the criteria for the following disability(ies): \_\_\_\_\_
- The district will not conduct an evaluation unless requested to do so by the student's parents or the adult student.

**PARENT NOTICE:** If the ARD committee determines that no additional data are needed to determine whether your student continues to be a student with a disability, the district must notify you of its determination and the reasons for it, and of your right to request an evaluation to determine whether your student continues to be a student with a disability.

- YES  NO I understand that the ARD committee has determined that additional data are not needed to determine whether the student continues to be a student with a disability.
- YES  NO I understand my right to request an evaluation to determine whether this student continues to be a student with a disability.

\_\_\_\_\_  
\*\*SIGNATURE OF PARENT, GUARDIAN, SURROGATE PARENT, OR ADULT STUDENT

\_\_\_\_\_  
DATE

**\*\*NOTE:** No signature indicates that parent/guardian, surrogate parent, or adult student did not attend the ARD meeting. Parent will be informed of the ARD committee's decision via copies of the ARD/IEP report and ARD supplements. Parent is hereby notified to call the following person should further evaluation be requested.

\_\_\_\_\_  
School Personnel

\_\_\_\_\_  
Position

\_\_\_\_\_  
Telephone