

Program Exit Form

Student Name:		Birthday:	Date:
Parent(s) Name:			
Address:		Phone:	Date of Exit:

REASON FOR EXIT	
<input type="radio"/>	Parent (or student at age of majority) has withdrawn consent for special education and related services.
<input type="radio"/>	Student is no longer eligible for special education services based on a variety of assessments as documented in the Evaluation Summary and Eligibility Report (ESER).
<input type="radio"/>	Student graduated with a regular diploma (summary of performance required).
<input type="radio"/>	Student reached the end of the school year for the year they turned 22 years old (summary of performance required).
<input type="radio"/>	Student is deceased.
<input type="radio"/>	Student moved from the district.
<input type="radio"/>	

Summary of the Student's Academic Achievement and Functional Performance:

Recommendations to assist the student to meet post-secondary goals:

STUDENT CONTINUES TO BE ELIGIBLE FOR SPECIAL EDUCATION SERVICES IF:
<ul style="list-style-type: none">- Student received a certificate of attendance.- Student moved from the district (records forwarded to the receiving district) known to be continuing in an education program.- Student dropped out of school.- Parent and student have been informed in writing that the student may continue to receive special education services (if re-enrolling before age 22).