

# OSE Monitoring Data Collection Form

## How to Complete the DCF

1. Complete one entry for each OSE or LEA selected student record.
2. All sections of the DCF must be completed. Do not leave blank spaces on the DCF. Each indicator of the DCF must contain:
  - a. C if the indicator is compliant with that student record.
  - b. NC if the indicator is noncompliant for that student records.
  - c. NA if the indicator does not apply to that student record.
3. Compile the required documentation for each DCF Priority Area for submission to the OSE.

## How to Submit the Record to OSE

1. Each DCF Priority Area must include the provided cover sheet. The cover sheet is the first page of each DCF Priority Area.
  - a. Save your file for each **DCF Priority Area** as follows:
    - i. District Name\_DCF\_Monitoring Priority Area.pdf
      1. example: ABCDistrict\_DCF\_1.pdf
2. Each set of student-specific records must include the provided cover sheet.
  - a. Save your file for each **student-specific record** as follows:
    - i. District Name\_Student Intials\_Student SID\_Monitoring Priority Area.pdf
      1. example: ABCDistrict\_SI\_123456\_1.pdf
3. Upload all documents to NJ Homeroom using the following instructions:
  - a. Go to <http://homeroom.state.nj.us>
  - b. Click on "IDEA Monitoring" in the far-left column.
  - c. Log on by using your district code, user ID, and password. If you do not have a user ID and password, contact your district Homeroom Administrator.

# DCF Priority Area Cover Sheet

**Monitoring Priority Area 1:**  
**Placement in the Least Restrictive**  
**Environment, IEP Development, and IEP**  
**Implementation**

**LEA Name:**

[illegible]

# Student Cover Sheet

**NOTE:** LEAs must use this as the first page of each student record submitted as part of Tier One Desk Monitoring. Make copies as needed.

<b>LEA Name:</b>
<b>Student SID:</b>
<b>Student Initials:</b>
<b>Student DOB:</b>

## Monitoring Priority Area 1:

Placement in the Least Restrictive Environment, IEP Development, and IEP Implementation

### Documentation that must be provided in this section.

- ☐ Notices
- ☐ Complete IEP
- ☐ Cover page of Previous IEP
- ☐ IEP Meeting Participants
- ☐ Documentation of Reports of Progress
- ☐ Evidence of provision of related services, if applicable

**Note:** Please include in your upload any documentation, even if not specifically listed above, that was used to verify compliance.

**Priority Area 1: Provision of Special Education and Related Services in the Least Restrictive Environment, IEP Development, and IEP Implementation***Guiding Regulations*

- **Least Restrictive Environment** N.J.A.C. 6A:14-4.2(a); 20 USC 1412(a)(5); 34 CFR 300.116(d)
- **IEP Requirements** N.J.A.C. 6A:14-2.3(k)3-5; N.J.A.C. 6A:14-2.3(f) and 2.3(g)1-7; N.J.A.C. 6A:14-2.4(a)1; N.J.A.C. 6A:14- 3.7a(1); 20 U.S.C. §1414(b)(1)(c)(4)(A); 34 CFR §300.304(a)(4); and 34 CFR §300.305(a); 20 U.S.C. §1414(b)(1); and 34 CFR §300.304(a); and 34 CFR §300.321(a)34 CFR §300.503(c) and §300.504(d)
- **Meeting Participants** N.J.A.C. 6A:14-2.3(k)2(i-x)1; 20 U.S.C. §1414(d)(1)(B); and 34 CFR §300.321(a)
- **IEP Components** N.J.A.C. 6A:14-3.7(c)1-11, (e) 1-17, and (f); 20 U.S.C. §1414(d)(3)(A)(B); and 34 CFR §300.324(a)(1)(2)
- **LRE (IEP Requirements)** N.J.A.C. 6A:14-4.2(a)8(i); 20 USC 1412(a)(5); 34 CFR §300.116(d)
- **IEP Implementation** N.J.A.C. 6A:14-3.7 and 4.1

**Priority Area 1: Provision of Special Education and Related Services in the Least Restrictive Environment, IEP Development, and IEP Implementation**

	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID
<b>IEP Requirements</b>									
1. Notice of a meeting is provided early enough to ensure the parent, and where appropriate the student, has an opportunity to attend									
2. Written notice is provided within 15 days following the meeting.									
3. Annual reviews are conducted annually or more often if necessary.									
<b>Meeting Participants</b>									
4. Adult student or parent/guardian for students under 18									
5. General education teacher									
6. Special education teacher									
7. Case manager (may also function as district rep)									
8. Interpreters at meetings when required									
<b>IEP Components</b>									
9. The IEP contains a statement of how the student's disability affects his/her involvement and progress in the general education curriculum.									

## Priority Area 1: Provision of Special Education and Related Services in the Least Restrictive Environment, IEP Development, and IEP Implementation

IEP Requirements	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID
<b>IEP Components</b>									
10. For preschool students, the IEP contains a statement, as appropriate, of how the disability affects their participation in appropriate activities.									
11. The IEP contains a statement addressing the strengths of the student.									
12. The IEP contains documentation of the results of the initial or most recent evaluations.									
13. The IEP contains measurable annual goals and objectives.									
14. The IEP contains a statement of how progress towards annual goals will be measured.									
15. The IEP contains a statement of how parents will be informed of student progress towards annual goals.									
16. The IEP contains a statement of supports for school personnel.									
<b>Placement in the Least Restrictive Environment</b>									
17. The IEP shows that: a) consideration was given to whether the student can be educated satisfactorily in the general education classroom with supplementary aids and services, and b) an explanation of the rejection of any supplementary aids and services considered given.									
18. The IEP includes a comparison of the benefits provided in the general education class and the benefits provided in the special education class.									
19. The IEP includes potentially beneficial or harmful effects which a placement (general education) may have on the student with disabilities or the other students in the class.									

## Priority Area 1: Provision of Special Education and Related Services in the Least Restrictive Environment, IEP Development, and IEP Implementation

	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID
<b>Placement in the Least Restrictive Environment</b>									
20. For students in separate settings, the IEP sets forth activities to move the student to a less restrictive environment.									
21. The IEP documents the extent students with disabilities participate with non-disabled peers in nonacademic and extracurricular activities, to the maximum extent appropriate.									
<b>IEP Components Continued</b>									
22. The IEP contains documentation addressing statewide assessment participation.									
23. The IEP contains the approved accommodations and modifications to be provided for statewide and district-wide assessments.									
24. The IEP contains projected starting dates of related services, including frequency, location, and duration of services.									
25. The IEP contains the projected starting dates of the special education program.									
26. The IEP includes documentation demonstrating consideration of the Extended School Year (ESY).									
27. When ESY will be provided, the IEP includes a description of the program.									
<b>IEP Implementation</b>									
28. Progress reports have been provided in accordance with IEP									
29. Related services required by the IEP have been provided, if applicable									

# DCF Priority Area Cover Sheet

## Monitoring Priority Area 2: Initial Evaluation and Reevaluation

**LEA Name:**

[illegible]

# Student Cover Sheet

**NOTE:** LEAs must use this as the first page of each student record submitted as part of Tier One Desk Monitoring. Make copies as needed.

<b>LEA Name:</b>
<b>Student SID:</b>
<b>Student Initials:</b>
<b>Student DOB:</b>

## Monitoring Priority Area 2: Initial Evaluation and Reevaluation

Documentation that must be provided in this section.	
Initial Evaluation	Reevaluation
<input type="checkbox"/> Referral <input type="checkbox"/> Notice of Meeting <input type="checkbox"/> Identification meeting documentation <input type="checkbox"/> Parental consent to evaluate <input type="checkbox"/> Eligibility meeting documentation <input type="checkbox"/> All assessments conducted <input type="checkbox"/> IEP meeting documentation <input type="checkbox"/> Complete IEP <input type="checkbox"/> Written notice <input type="checkbox"/> Reports of Progress <input type="checkbox"/> Evidence of provision of related services, if applicable	<input type="checkbox"/> Previous determination of eligibility <input type="checkbox"/> Notice of Reevaluation Planning Meeting <input type="checkbox"/> Current reevaluation planning meeting documentation <input type="checkbox"/> Eligibility meeting documentation <input type="checkbox"/> Complete IEP <input type="checkbox"/> Written notice(s) <input type="checkbox"/> Reports of progress <input type="checkbox"/> Evidence of provision of related services, if applicable

**Note:** Please include in your upload any documentation, even if not specifically listed above, that was used to verify compliance.



**Priority Area 2: Initial Evaluation and Reevaluation***Guiding Regulations*

- **Initial Evaluations** N.J.A.C. 6A:14-2.3; N.J.A.C. 6A:14-3.3; 20 U.S.C. §1414(b)(1); and 34 CFR §300.304(a) 20 U.S.C. §1414(b)(1)(c)(4)(A); 34 CFR §300.304(a)(4); and 34 CFR §300.305(a)
- **IEP Implementation** N.J.A.C. 6A:14-3.7 and 4.1
- **Reevaluations** N.J.A.C. 6A:14-3.8(a) and 20 U.S.C. §1414(a)(2)(B)(ii) N.J.A.C. 6A:14-3.7(i); 20 U.S.C. §1414(d); and 34 CFR §300.324(b)(1) N.J.A.C. 6A:14-2.3; [20 U.S.C. §1414(c); 34 CFR §300.300(c)(1) and (2)]
- **IEP Implementation** N.J.A.C. 6A:14-3.7 and 4.1

<b>Evaluation Processes - Initial Evaluations</b>			
	Initials and Student ID	Initials and Student ID	Initials and Student ID
<b>Initial Evaluations</b>			
1. Notice of a meeting is provided early enough to ensure the parent, and where appropriate the student, has an opportunity to attend.			
2. The identification meeting is conducted within 20 days of receipt of referral.			
3. A vision and hearing screening is conducted.			
<b>Identification Meeting/Participants</b>			
4. Adult student or parent/guardian for students under 18			
5. General education teacher			
6. Full child study team			
7. Speech-language specialist (preschool or language concerns)			
8. Interpreters at meetings, when required			
9. Written notice following identification meeting provided within 15 days			
10. Parental consent to evaluate obtained			
11. Multidisciplinary evaluations consist of a minimum of two assessments			
<b>Functional Assessment Components</b>			
12. A minimum of one structured observation by one evaluator in other than a testing session; (1) In the case of a student who is suspected of having a specific learning disability, one evaluator shall observe the student's academic performance in the general education classroom; (2) In the case of a preschool-age student, a child study team member in an environment appropriate for a child of that age;			
13. An interview with the student's parent.			
14. An interview with the teacher(s) referring the potentially disabled student.			

<b>Evaluation Processes - Initial Evaluations</b>			
<b>Initial Evaluations</b>	<b>Initials and Student ID</b>	<b>Initials and Student ID</b>	<b>Initials and Student ID</b>
15. A review of the student's developmental/educational history, including records and interviews.			
16. A review of interventions documented by the classroom teacher(s) and others who work with the student.			
17. One or more informal measures, which may include, but not be limited to: surveys and inventories; analysis of work; trial teaching; self-report; criterion referenced tests; curriculum-based assessment; and informal rating scale.			
18. Written invitation to eligibility/IEP meeting			
<b>Eligibility/IEP meeting participants</b>			
19. Parent			
20. General education teacher			
21. Special education teacher (if combination eligibility/IEP meeting)			
22. Case manager			
23. Interpreter, if necessary			
24. Established criteria is applied in determining eligibility and documented in the IEP.			
25. Written notice following eligibility/IEP meeting is provided within 15 days following the meeting.			
26. Parental consent shall be obtained prior to the Implementation of the initial IEP.			
<b>IEP Implementation</b>			
27. The LEA maintains evidence demonstrating progress reports have been provided in accordance with IEP.			
28. The LEA maintains evidence demonstrating related services required by the IEP have been provided, if applicable.			

All sections of the DCF must be completed. Use of these three responses: C: Compliant, NC: Noncompliant; NA: Does not apply

**Evaluation Processes - Reevaluations**

	Initials and Student ID	Initials and Student ID	Initials and Student ID
<b>Reevaluations</b>			
28. School age students: Reevaluation is conducted within 3 years of previous date of eligibility.			
29. Preschool students: Reevaluation is conducted by June 30 of students' last year in preschool.			
30. Documentation of parental consent if reevaluation is waived is maintained in the student record.			
31. Notice of reevaluation planning meeting is provided early enough to ensure parent has the opportunity to attend.			
<b>Reevaluation/ Participants at Reevaluation Planning meeting</b>			
32. Case manager			
33. Parent			
34. General education teacher			
35. Special education teacher			
36. Interpreters at meeting, when required			
37. Written notice is provided following reevaluation planning meeting			
38. Parental consent obtained to conduct assessments			
39. Written invitation to eligibility/IEP meeting provided early enough to ensure parental participation			
<b>Eligibility/IEP meeting participants</b>			
40. Case manager			
41. Parent			
42. General education teacher			
43. Special education teacher (if combination eligibility/IEP meeting)			
44. Interpreters at meeting, when required			
45. Written notice of the eligibility/IEP meeting is provided within 15 days following the meeting.			
<b>IEP Implementation</b>			
46. The LEA maintains evidence demonstrating progress reports have been provided in accordance with IEP.			
47. The LEA maintains evidence demonstrating related services required by the IEP have been provided, if applicable.			

All sections of the DCF must be completed. Use of these three responses: C: Compliant, NC: Noncompliant; NA: Does not apply

# DCF Priority Area Cover Sheet

## Monitoring Priority Area 3: Age 16 Transition

LEA Name:

Student Initials and SIDS for Records Reviewed in this Section

# Student Cover Sheet

**NOTE:** LEAs must use this as the first page of each student record submitted as part of Tier One Desk Monitoring. Make copies as needed.

<b>LEA Name:</b>
<b>Student SID:</b>
<b>Student Initials:</b>
<b>Student DOB:</b>

## Monitoring Priority Area 3: Age 16 Transition

### Documentation that must be provided in this section.

- ☐ Student invitation to meeting.
- ☐ Transition assessments administered to student(s).
- ☐ Complete IEP.

**Priority Area 3: Age 16 Transition***Guiding Regulations*

- **Age 16 Transition Requirements** N.J.A.C. 6A:14-3.7; 20 U.S.C. §1414(b)(1)(c)(4)(A); 34 CFR §300.43; and 34 CFR §300.22; 20 U.S.C. §1414(b)(1); and 34 CFR §300.320(b)

<b>Age 16 Transition</b>				
<b>Age 16 Transition Requirements</b>	<b>Initials and Student ID</b>	<b>Initials and Student ID</b>	<b>Initials and Student ID</b>	<b>Initials and Student ID</b>
1. Does the IEP include a statement of the student's strengths, interests, and preferences?				
2. Are there at least two appropriate postsecondary measurable goals that cover education, training, employment, and, as needed, independent living?				
3. Are the postsecondary goals updated annually?				
4. Is there evidence that the measurable postsecondary goal(s) were based on age-appropriate transition assessments?				
5. Do the transition services include courses of study that will reasonably enable the student to meet their postsecondary goals?				
6. Does the IEP include the consideration of related strategies and/or activities that are consistent with the student's strengths, interests, and preferences and are intended to assist the student in developing or attaining post-secondary goals?				
7. Does the IEP include a description of the need for consultation with other agencies, if applicable?				
8. Does the IEP include the name or position of a staff person responsible for serving as liaison to post-secondary resources?				
9. Does the IEP include a statement of needed interagency linkages and responsibilities?				
10. Are there transition services in the IEP that will reasonably enable the student to meet his/her postsecondary goals?				
11. Are there annual IEP goals related to the student's transition service needs?				
12. Is there evidence that the student was invited to the IEP team meeting where transition services were discussed?				
13. If appropriate, is there evidence that a representative of any participating agency was invited to the IEP team meeting with the prior consent of the parent or student who has reached the age of majority?				

# DCF Priority Area Cover Sheet

## Monitoring Priority Area 4: Discipline

LEA Name:

Student Initials and SIDS for  
Records Reviewed in this  
Section


# Student Cover Sheet

**NOTE:** LEAs must use this as the first page of each student record submitted as part of Tier One Desk Monitoring. Make copies as needed.

**LEA Name:**

**Student SID:**

**Student Initials:**

**Student DOB:**

## Monitoring Priority Area 4: Discipline

### Documentation that must be provided in this section.

- ☐ Student attendance log for the previous 12 months
- ☐ Written notice for each incidence of suspension for parent and case manager
- ☐ Most recent evaluations
- ☐ Complete IEP and BIP, with signature page
- ☐ Change in Placement determination for removals of more than 10 cumulative or consecutive days and for each subsequent removal
- ☐ Manifestation Determination documents
- ☐ Updated FBA or BIP as applicable
- ☐ Home instruction logs
- ☐ Additional documentation, as requested by OSE

**Note:** Please include in your upload any documentation, even if not specifically listed above, that was used to verify compliance.



**Priority Area 4: Discipline***Guiding Regulations***Discipline** N.J.A.C. 6A:14-2.8; 34 C.F.R. §300.530; 34 C.F.R. §300.531; 34 C.F.R. §300.304(b)(1); 34 C.F.R. §300.324(a)(3)(i); 34 C.F.R. §300.501(c)(3)

<b>Discipline</b>			
<b>Discipline</b>	<b>Initials and Student ID</b>	<b>Initials and Student ID</b>	<b>Initials and Student ID</b>
1. The LEA uses a variety of assessment tools and strategies to gather relevant functional developmental and academic information about the child, including information provided by the parent.			
2. School personnel consider unique circumstances on a case-by-case basis when determining whether a change in placement is appropriate for a child with a disability who violates a code of student conduct.			
3. School personnel apply relevant disciplinary procedures to students with disabilities in the same manner and duration as would be applied to students without disabilities when the district changes a student's placement for disciplinary reasons exceeding 10 consecutive school days and determined that the violation was not a manifestation of the student's disability.			
4. Students with disabilities who are removed from their current placement are provided services in another setting in order to continue to participate in the general education curriculum and to progress toward meeting IEP goals.			
5. During suspensions of more than 10 school days in a school year, regardless of the manifestation determination, students with disabilities receive services to enable them to participate in the general curriculum and to progress toward IEP goals.			
6. Within 10 school days of any decision to change the placement of a student with a disability because of a violation of a code of student conduct, the LEA, the parent, and relevant members of the IEP team meet to review all relevant information in the student's file, including the student's IEP, any teacher observations, and any relevant information provided by the parents.			
7. In making the manifestation determination, the IEP team reviews all relevant information in the student's file to determine if the conduct in question was caused by or had a direct and substantial relationship to the child's disability.			

All sections of the DCF must be completed. Use of these three responses: C: Compliant, NC: Noncompliant; NA: Does not apply

Discipline	Initials and Student ID	Initials and Student ID	Initials and Student ID
8. In making the manifestation determination, the IEP team reviews all relevant information in the student's file to determine if the conduct in question was the direct result of the LEA's failure to implement the IEP.			
9. The district takes steps to remedy any deficiencies in the student's IEP or placement as identified by the manifestation team.			
10. The student is returned to the placement from which the student was removed if a determination is made that the conduct was a manifestation of the student's disability, unless the parent and the school district agree to a change of placement as part of the modification of the behavioral intervention plan.			
11. An interim alternative educational setting is determined by the IEP team when there is a change of placement			
12. In the case of a child whose behavior impedes the child's learning or that of others, the IEP Team considers the use of positive behavioral interventions and supports and other strategies to address that behavior.			
13. At least one general education teacher participates in the determination of appropriate positive behavioral interventions and supports and other strategies for the student.			
14. As appropriate, a functional behavioral assessment and behavioral intervention services and modifications are designed to address the behavior violation so that it does not recur for a child with a disability who is removed from the child's current placement.			
15. Functional behavioral assessments are based on multiple sources of data, including but not limited to, information obtained from direct observation of the student, information from the student, the student's teacher(s) and/or related service provider(s), a review of available data and information from the student's record and other sources including any relevant information provided by the student's parent.			
16. When a student has been removed for more than 10 days and the student's conduct is a manifestation of the student's disability, the IEP Team conducts a functional behavioral assessment and implements a behavioral intervention plan.			
17. If the student already has a behavioral intervention plan, the IEP Team meets to review the plan and its implementation and modifies the plan and its implementation, as necessary, to address the behavior that resulted in the disciplinary change of placement.			

Discipline	Initials and Student ID	Initials and Student ID	Initials and Student ID
18. If neither parent can participate in a meeting in which a decision is to be made regarding the educational placement of the child, the district uses other methods to ensure parent participation, including individual or conference calls or video conferencing.			
19. If a placement decision is made by a group without the involvement of a parent, the district maintains a record of the attempts to ensure their involvement.			
20. The district provides services during periods of removal to a student with a disability who has been removed from his or her current placement.			
21. The district notifies the parent on the date in which the decision is made to make a removal that constitutes a change of placement of a child with a disability because of a violation of a code of student conduct and provides the parents with the procedural safeguards notice.			
22. At the time of removal, written notification, including a description of the reasons for suspension, was sent to the case manager.			
23. At the time of removal, written notification, including a description of the reasons for suspension, was sent to the parent.			

# DCF Priority Area Cover Sheet

## Monitoring Priority Area 5: Restraint and Seclusion

LEA Name:

Student Initials and SIDS for  
Records Reviewed in this  
Section


# Student Cover Sheet

**NOTE:** LEAs must use this as the first page of each student record submitted as part of Tier One Desk Monitoring. Make copies as needed.

<b>LEA Name:</b>
<b>Student SID:</b>
<b>Student Initials:</b>
<b>Student DOB:</b>

## Monitoring Priority Area 5: Restraint and Seclusion

### Documentation that must be provided in this section.

- ☐ LEA policies and procedures for restraint and seclusion practices.
- ☐ Notification of Restraint and Seclusion
- ☐ Instances of Restraint and Seclusion Documentation
- ☐ Data Collected
- ☐ Staff Training

**Note:** Please include in your upload any documentation, even if not specifically listed above, that was used to verify compliance.

**Priority Area 5: Restraint and Seclusion***Guiding Regulations***Restraint and Seclusion** N.J.S.A. 18A:46-13.4 , N.J.S.A. 18A:46-13.5, N.J.S.A. 18A:46-13.6 , N.J.S.A. 18A:46-13.7**Restraint and Seclusion- Student Documentation**

Area of Focus	Required Documentation	Initials and Student ID	Initials and Student ID	Initials and Student ID
1. Parents were notified of any restraint of a student with a disability				
2. The student with a disability was continuously monitored when restrained and/or secluded	Provide documentation of continuous monitoring during restraint and/or seclusion			
3. Data collected for each incident of restraint	Provide a copy of data collected for the SIDs listed in the OSE letter with restraint and seclusion next to them			
4. Positive behavioral supports are utilized prior to the restraint and/or seclusion	Provide documentation of positive behavioral supports for SIDs listed in the letter with restraint and seclusion next to them			

**Restraint and Seclusion- District Documentation**

Area of Focus	Required Documentation	Submitted
5. Staff training has been conducted regarding restraint and seclusion	Provide evidence of training, including agenda and sign-in sheets, to NJDOE Homeroom	<input type="checkbox"/>
6. For prone restraint for any student with a disability, a medical note authorizing use is in the file	Provide copy of medical note for any student with a disability in the district allowing use of prone restraint, if applicable	<input type="checkbox"/>
7. Restraint Policy	Provide a copy of the Board approved policy for use of physical and/or mechanical restraint on students with disabilities	<input type="checkbox"/>
8. Seclusion Policy	Provide a copy of the Board approved policy for use of seclusion on students with disabilities	<input type="checkbox"/>

**Note: The required district documentation is to be uploaded with the DCF Priority Area Cover Sheet.**

# DCF Priority Area Cover Sheet

## Monitoring Priority Area 6: Dynamic Learning Maps (DLM)

LEA Name:
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Student Initials and SIDS for Records Reviewed in this Section

# Student Cover Sheet

**NOTE:** LEAs must use this as the first page of each student record submitted as part of Tier One Desk Monitoring. Make copies as needed.

<b>LEA Name:</b>
<b>Student SID:</b>
<b>Student Initials:</b>
<b>Student DOB:</b>

## Monitoring Priority Area 6: Dynamic Learning Maps (DLM)

<b>Documentation that must be provided in this section.</b>
<input type="checkbox"/> Student's IEP
<input type="checkbox"/> Most recent evaluations
<input type="checkbox"/> DLM participation criteria document

**Note:** Please include in your upload any documentation, even if not specifically listed above, that was used to verify compliance.



**Priority Area 6: Statewide Assessment***Guiding Regulations***Statewide Assessment** N.J.A.C. 6A:14-4.10

<b>Statewide Alternate Assessment</b>						
<b>DLM Participation</b>	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID	Initials and Student ID
1. All answers for participation criteria indicated a “yes” response.						
2. All required members of the IEP team indicated their agreement and signed the IEP Team Agreement Form.						
3. The IEP indicates the student’s participation in either the General Statewide Assessment or Dynamic Learning Maps in: Math, English Language Arts, and Science.						
4. The IEP indicates the student is primarily taught using the DLM Essential Elements.						
5. An administrator certified the IEP Team agreement.						