

E-School Sponsor Certification Plan

Plan by computer-based schools for services to disabled students.

Form A

E-School Name: _____ IRN: _____

School Address: _____

School Phone Number: _____ School Fax: _____

School Administrator: _____ Title: _____

Administrator Email: _____ Phone: _____

Special Education Director: _____

Special Education Director's Email: _____ Phone: _____

Grade Levels Served: _____ Total Enrollment: _____

Number of Students with Disabilities Enrolled: _____

1. Describe the e-school's policies and procedures for Child Find.

2. Describe the continuum of services provided by the e-school.

3. How does the e-school ensure the student is taught by an appropriately licensed teacher?

4. How does the e-school ensure the specially designed instruction is individualized and being provided as stated in each individualized education program?

5. How does the e-school ensure a student is receiving the appropriate accommodations or modifications as required per the student's IEP?

6. How does the e-school ensure the child has an aid if required per the IEP?

7. How does the e-school ensure the child has access to assistive technology as required per the IEP?

8. How often are IEPs reviewed for and amended regarding progress or lack of progress?

9. How does the e-school provide medical supports as required per the IEP?

Sponsor Name: _____

Sponsor Representative: _____

Date Received: _____

Date Approved: _____

Plan Moved to T/A: _____

Plan Not Approved Due To:

Date of Sponsor Assistance:

Revised E-School Plan:

Dates of Sponsor Monitoring Data Supported Implementation checks:

Outcome Summary: