**INDIVIDUAL STUDENT GENERAL SUPERVISION FILE REVIEW CHECKLIST- ESY**

**Version 1 April 2021**

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| Name of Student (Last, First):  Region: | Reviewed by: |
| Date of Birth: | Age: |
| Category of Eligibility: | Initial IEP Date: |
| Current Eligibility Report Date: | Current Annual IEP Date: |
|  | Current Preschool Student Yes No |

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| --- | --- | --- | --- | --- |
| **Extended School Year** | | | | |
| **Item 1** | | **Yes** | **No** | **N/A** |
| The student is receiving ESY according to the current IEP. If no, continue below. | |  |  |  |

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| **Item 2** | | **Yes** | **No** | **N/A** |
| There is evidence that ESY was considered at the IEP meeting. (This includes extended hours and days within the regular school year.) | |  |  |  |

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| **Item 3** | | **Yes** | **No** | **N/A** |
| Are the goals and objectives adequate to meet the child’s needs? (Goals need to be written in order to help the child be successful. Goals that are not specific or not developmentally appropriate may cause the child to regress or fail to make adequate progress.) | |  |  |  |
| If the child has a documented lack of progress, what is the reason? | |  |  |  |

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| **Item 4** | | **Yes** | **No** | **N/A** |
| Prior IEPs: The IEP goals have changed meaningfully from year to year. | |  |  |  |

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| Compliant | Non-Compliant | | | |
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