



Dumas ISD

Questionnaire to Determine SPED Students

It is our goal of the Special Services Department of Dumas ISD to make the transition for all special education students enrolling in this district to be as smooth and efficient as possible. In order to fulfill this process, please answer the following question concerning your child(ren).

Child 1 Name:	Date of Birth	Grade
Has your child ever received special education classes?		Yes No
Has your child ever received speech therapy?		Yes No
Have you ever attended an ARD (Admission, Review and Dismissal) meeting?		Yes No

Child 2 Name:	Date of Birth	Grade
Has your child ever received special education classes?		Yes No
Has your child ever received speech therapy?		Yes No
Have you ever attended an ARD (Admission, Review and Dismissal) meeting?		Yes No

Child 3 Name:	Date of Birth	Grade
Has your child ever received special education classes?		Yes No
Has your child ever received speech therapy?		Yes No
Have you ever attended an ARD (Admission, Review and Dismissal) meeting?		Yes No

Child 4 Name:	Date of Birth	Grade
Has your child ever received special education classes?		Yes No
Has your child ever received speech therapy?		Yes No
Have you ever attended an ARD (Admission, Review and Dismissal) meeting?		Yes No

Parent Signature	Date
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If you have answered YES to any of the questions above, please ASK the personnel for a temporary placement form which allows us to serve your child(ren) in special education until the special education records can be received from your child's previous school.

The request for records form gives us permission to request your child's records from the previous school.

<i>For School use only:</i>	
<input type="checkbox"/> Notice of Procedural Safeguards	<input type="checkbox"/> Notice/Consent for Temporary Placement
<input type="checkbox"/> Consent for Disclosure of Confidential Info	<input type="checkbox"/> Receipt of Explanation of Pro/Safeguards