



Oregon School Activities Association  
25200 SW Parkway Avenue, Suite 1, Wilsonville, OR 97070

503.682.6722

FAX 503.682.0960

http://www.osaa.org

Scan to: [eligibility@osaa.org](mailto:eligibility@osaa.org)

Page 1 of 2

## Eligibility Request Form

1. Complete all steps on front and back of this form.
2. Attach copy of student's official transcripts with this form.
3. Requests with incomplete enrollment records will not be considered.
4. Allow five working days to process.

OSAA Eligibility ID #

### STEP 1

#### Student Information

School: SEASIDE HIGH SCHOOL School Phone: 503-738-5586

Student: (Last) STARK (First) JAKOTA (Middle) JAMES

Date of Birth: 2/14/00 Age: 15

Parent: ALESIA STARK

Address: 39 MCCORMICK GARDENS RD. GERTHART, OR 97138

Person with whom student lives: Currently: ALESIA STARK Last Year: FATHER IN IDAHO

Relationship to student: MOTHER

Address where student lives: 39 MCCORMICK GARDENS RD. GERTHART, OR 97138

### STEP 2

#### Type of Waiver

#### A. SEND DIRECTLY TO OSAA (see checklist in Step 4)

- ☐ Age Rule 8.3
- ☐ Fifth Year Rule 8.2
- ☐ Grade Deficiency Rule 8.1.1
- ☐ Satisfactory Progress Toward Graduation Rule 8.1.2
- ☐ All Non-CSIET Foreign Students – Must also meet CSIET criteria in Rule 8.6.3(c)
- ☐ All CSIET Foreign Students not meeting criteria in Rule 8.6.3(c)

#### B. SEND DIRECTLY TO DISTRICT COMMITTEE

- ☐ Transfers without change of Joint Residence Rule 8.6 (including transfers where the student also has a Grade Deficiency and / or is not making Satisfactory Progress Toward Graduation).
- ☒ Transfers to a school with affiliation Rule 8.6.5.

### STEP 3

#### Enrollment Record

#### Fill In All Sections

Has an Individualized Educational Program (IEP) been created for this student? ☒ Yes ☐ No

If yes, is the student meeting the requirements of the Individualized Educational Program (IEP)? ☒ Yes ☐ No

Grading Period	Date Attended	School Attended	# Credits Earned	# Classes Passed
Example →→→→→→→→→→	9/5/99 to 1/12/00	Oregon High School	3.0	6
9 <sup>th</sup> – 1 <sup>st</sup> semester/trimester	8/20/14 to 4/8/15	SEASIDE HS / CENTENNIAL HS (MERIDIAN, ID)	8.5	7.5
9 <sup>th</sup> – 2 <sup>nd</sup> semester/trimester	___/___/___ to ___/___/___			
9 <sup>th</sup> – 3 <sup>rd</sup> trimester	4/8/15 to 6/11/15	SEASIDE HS	1.5	3
10 <sup>th</sup> – 1 <sup>st</sup> semester/trimester	___/___/___ to ___/___/___			
10 <sup>th</sup> – 2 <sup>nd</sup> semester/trimester	___/___/___ to ___/___/___			
10 <sup>th</sup> – 3 <sup>rd</sup> trimester	___/___/___ to ___/___/___			
11 <sup>th</sup> – 1 <sup>st</sup> semester/trimester	___/___/___ to ___/___/___			
11 <sup>th</sup> – 2 <sup>nd</sup> semester/trimester	___/___/___ to ___/___/___			
11 <sup>th</sup> – 3 <sup>rd</sup> trimester	___/___/___ to ___/___/___			
12 <sup>th</sup> – 1 <sup>st</sup> semester/trimester	___/___/___ to ___/___/___			
12 <sup>th</sup> – 2 <sup>nd</sup> semester/trimester	___/___/___ to ___/___/___			
12 <sup>th</sup> – 3 <sup>rd</sup> trimester	___/___/___ to ___/___/___			

**STEP 4 Letter From Previous School Principal (Transfers only)**

A letter from the principal of the school previously attended is required. Letter may refer to high school activities previously participated in, whether student was in good standing at the time of transfer, any outstanding fees / lost materials, etc.

**STEP 5 Eligibility Hardship Checklist**

Prior to OSAA consideration of eligibility, this Eligibility Request Form and the following information must be received by the OSAA Executive Director.

Transcripts

Current high school  
Previous high schools

School Records

Attendance records  
Letter authorizing release of school records to OSAA

Letters of Explanation

Student  
Parents or Legal Guardian  
School Representative  
*Optional* – Other letters as relevant


Age & Fifth Year Additional Documentation

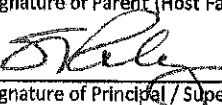
Gap in student's academic process  
Credit deficiency  
Classes needed to graduate  
Individualized Educational Program (IEP)  
Student's disability as defined by ADA

**STEP 6 Affirmation Statement**

Under penalty of perjury, I do affirm that no coach, parent, administrator, teacher, or other representative of the current school initiated contact or offered any inducements for the purpose of having the student attend the current school for athletic participation. Further, I authorize release of permanent school records to the OSAA.

**Both signatures required for all Eligibility Requests.**

  
\_\_\_\_\_  
Signature of Parent (Host Family If Non-CSIET student)

  
\_\_\_\_\_  
Signature of Principal / Superintendent

(Principal/Superintendent is encouraged to attach any specific comments regarding this student's eligibility request.)

**STEP 7 OSAA / District Committee Authorization Decision**

The District Committee should forward copies of all District Committee decisions and rationale for that decision to the OSAA.

Director's / Chairperson's Signature: 

Date 8/28/15

Chairperson's School: Tillamook High School

Comments

unanimously approved.  
Good luck, Dakota

☒ Approved  
☐ Denied

**STEP 8 Appeals Process**

**DISTRICT COMMITTEE DECISIONS:** Appeals of District Committee decisions will be heard by the OSAA Eligibility Appeals Board.

- "Any party filing an appeal of a decision by the District Athletic Committee to the Eligibility Appeals Board...shall be assessed a filing fee of \$100 to defray the costs to the Association of assembling the respective appeals bodies to hear the appeal." (*Excerpt OSAA Handbook, Executive Board Policies, "Eligibility Appeal Filing Fee"*)
- If denied by the OSAA Eligibility Appeals Board, an appeal may be made to a Hearings Officer under **Rule 9, "Hearings Officer."** Appeals to the Hearings Officer shall include an appeal fee of \$200.

**OSAA EXECUTIVE DIRECTOR DECISIONS:** Appeals of OSAA Executive Director decisions, regarding age, fifth year, grade deficiency, and non-CSIET foreign students are heard by the OSAA Executive Board.

- "Any party filing an appeal of a decision by...the Executive Director to the Executive Board shall be assessed a filing fee of \$100 to defray the costs to the Association of assembling the respective appeals bodies to hear the appeal." (*Excerpt OSAA Handbook, Executive Board Policies, "Eligibility Appeal Filing Fee"*)
- If denied by the OSAA Executive Board, an appeal may be made to a Hearings Officer under **Rule 9, "Hearings Officer."** Appeals to the Hearings Officer shall include an appeal fee of \$200.



## Seaside High School

*Preparing All Students for a  
Productive Future*

Sheila Roley, Ed.D., Principal  
Jeff Roberts, Assistant Principal  
Jason Boyd, CAA, Athletic Director  
Carolyn Ramey, Counselor  
Travis Cave, Counselor

June 16, 2015

Tom Welter, Executive Director  
Oregon School Activities Association  
25200 SW Parkway Ave., Suite 1  
Wilsonville, OR 97070

RE: Dakota Stark Eligibility Request

Dear Mr. Welter:

The purpose of this letter is to advocate for an eligibility hardship for Dakota Stark for the Fall 2015 season. Dakota is currently on an IEP and is expected to make satisfactory progress towards his goals and graduation.

After spending a number of years living with his father, Dakota moved to live with his mother in Seaside in the summer of 2014. Dakota enrolled at Seaside High School as a freshman in the fall of 2014. Dakota participated in football during his freshman season, however, was dismissed from the team for a violation of team guidelines (he had some unexcused absences from practice). Additionally, there was turmoil in the home with his move to Seaside and Dakota was sent back to Idaho to live with his father in the middle of the fall term. Dakota was not awarded any credit at Seaside High School in the fall because he left well before the end of the trimester.

Dakota then returned to Seaside in the Spring and enrolled during April. At that time, Dakota's IEP team determined it would be best to reduce his schedule and enroll him in three classes to finish the school year. Dakota completed and passed all three classes. Despite numerous requests, Centennial High School in Meridian, Idaho has failed to send his cumulative folder with his academic records. I did call to request them myself after Kodie told me they would not give him his grades until he served his detentions for being tardy. I was skeptical when Kodie shared this with me, however, upon speaking with an administrator myself from the Idaho school, he confirmed that they would not send grades until Kodie served his detentions. The administrator gave Kodie the option of returning to Idaho to serve the detentions or allow us to administer the detention. Kodie served those detentions at Seaside High School and we are now awaiting his updated transcript from Idaho.

I have noticed a significant change in Kodie since the beginning of his freshman year. With continued guidance from his coaches and teachers I believe Kodie will be successful and be the first person in his immediate family to earn a high school diploma.

Please also allow this letter to serve as a release of any school records that the OSAA may need to rule on eligibility.

Regards,

Jeff Roberts, Assistant Principal

**Seaside High School**  
 Year: 2014-2015  
 User: Jeff Roberts  
 Show active and inactive



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## Student

Student Name: **Stark, Dakota J.** School: **Seaside High School** Homeroom: Teacher: **Roberts, J.** Enrollment

Demographics Parent/Guardian Other Info Emergency Enrollment Enrollment History Class

Last Name (Legal) **Stark** First Name (Legal) **Dakota** Middle Name **James** Suffix  Student ID **270783** Grade **0**

### Enrollment History

Line	School Year	Enter Date	Enter Code	Leave Date	Leave Code	Grade	School	ADA/ADM	Summer Withdrawal Code
1	2009-2010	09/08/2009	1			04	Gearhart Elementary School		
2	2010-2011	01/10/2011	6	03/07/2011	21	05	Gearhart Elementary School		
3	2014-2015	04/08/2015	A			09	Seaside High School		
4	2015-2016	09/08/2015	A			10	Seaside High School		

Default



Student



Student Transcript



Period Attendance



Student Grade



StudentVue



Student Classes



Attendance

Student Name <b>Stark, Dakota James</b>				Seaside School District Seaside High School		SHS Official Transcript Seaside High School August 10, 2015 <a href="http://www.seaside.k12.or.us/shs">http://www.seaside.k12.or.us/shs</a>	
Perm ID <b>270783</b>	State ID <b>9633626</b>	Grd <b>10</b>	Gen <b>M</b>			Phone <b>503-738-5586</b>	Fax <b>503-738-5589</b>
Birth Country <b>United States of America</b>		Date Of Birth <b>02/14/2000</b>				School Address <b>1901 N Holladay Dr Seaside, OR 97138</b>	
Mailing Address Phone <b>503-738-4237</b> <b>39 McCormick Gardens Rd Gearhart, OR 97138</b>							

Subject	Course Title	Mark	Cred	Cmp	Graduation Requirements		Credit Summary	
Centennial High School					Subject Area	Req'd	Comp	Needed
Yr: 2014	Term: S1	Grade: 09			Arts/FLang/CTE	3.00	0.50	2.50
LA	English 9A	F	0.00		Elective	7.00	7.50	
AR	Acting A	B	0.50		Health	1.00	0.50	0.50
EL	Study Skls A	C	0.50		Language Arts	4.00	0.00	4.00
EL	Common Core HS Math I A C		0.50		Mathematics	3.00	0.00	3.00
EL	Common Core HS Math I A C		0.50		Physical Education	1.00	0.50	0.50
EL	Interperson I A	B	5.00		Science	3.00	0.00	3.00
PE	Intro to Fit	C	0.50		Social Sciences	3.00	0.00	3.00
PE	Intro to Fit	F	0.00		TOTALS	25.00	9.00	16.50
Cred Cmp: 7.50 GPA: 5.125					Graduation Requirements - Test History			
Seaside High School					Test Name	Result		
Yr: 2014	Term: T3	Grade: 09			Essential Skills Reading	Not Taken		
EL	The Segregation of Americ	C	0.50		Essential Skills Writing	Not Taken		
HE	CR - Health Frosh	P	0.50		Essential Skills Math	Not Taken		
EL	RC Support C	A	0.50					
Cred Cmp: 1.50 GPA: 3.000								
Attendance								
School Year	Days Membership	Days Absences						
2009-2010	174	24						
2010-2011	103	15						

<b>GPA SUMMARY</b> <u>Unweighted GPA</u> Unweighted CH <b>4.700</b>		<b>NOTES</b>
Enter Date <b>04/08/2015</b>	Ranked By <b>Unweighted GPA</b>	
Class Rank	Graduation Date	
Class of 2018		

# Seaside High School

1901 N. Holladay  
Seaside, OR 97138  
Phone: 503.738.5586  
Web: <http://shs.seaside.k12.or.us/>

June 19, 2015

To Whom It May Concern:

I respectfully request that you find James Dakota Stark eligible to play football at Seaside High School. I have known Dakota Stark since the fall of 2014. He was in my math class and this spring I was also assigned as his case manager. Due to many factors beyond Dakota's control, he changed schools twice during his freshman year and was not provided the stability at home required to earn enough credits to be eligible to play high school sports in the fall of 2015. However, it is important to know that when he did return to Seaside High School this spring, he completed and passed all three classes in which he was enrolled.

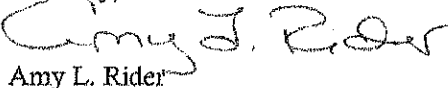
Dakota (Kodie) was initially found eligible for special education services on June 7, 2007 due to a documented emotional disturbance (ED). This finding was supported by a medical statement by his family doctor, educational testing, and the Behavior Assessment System for Children, as well as input from his parents and classroom teachers. Additionally, he has Attention Deficit Hyperactivity Disorder, Anxiety Disorder and Post Traumatic Stress Disorder, for which he does not receive medication or outside therapy (although the family is pursuing options for these treatments).

When he returned to SHS after having been sent to Idaho to live with his father earlier in the school year, the IEP team, which includes teachers, the school psychologist, an administrator, a guidance counselor and Kodie's parents, set up a very specific behavior plan to help Kodie adjust to returning to a more integrated setting. Along with this behavior plan, he was placed on a partial day schedule so that he would have time to adapt to the recent changes in his life. He complied with the behavior plan and completed his three courses successfully.

Because his Individualized Education Program (IEP) team mandated his partial day schedule, he was not allowed to complete the four passing marks during spring term. However, as stated previously, he did successfully complete three courses, fulfilling the requirements outlined in his behavior plan. Having known Kodie before he was moved to Idaho, I feel that I can objectively and accurately assess the positive changes in Kodie's behavior. Previously, Kodie had very little impulse control, which was naturally disruptive in his academic classes. He also had difficulty accepting constructive criticism and lost his temper quite easily. Upon his return to Seaside, I saw a very different young man than the one I had taught the previous fall. It was clear that he was actively working on conversational turn taking and accepted help much more readily than he had in the past. I also had many conversations with Kodie regarding his past behavior. As the spring term progressed, I could see him internalizing some of the skills he had been taught in his resource class. In one particularly revealing conversation, he asked me if it was okay that he "thought of [the assistant principal] as a kind of father figure." I assured him that it was absolutely okay to do that, and as I saw this shift from seeing authority figures as "the enemy" to viewing them as a parent figure, I knew that I was speaking to a much more evolved young man.

Kodie is a very intelligent, active and creative young man. I believe that participation in the football program will be an important factor in keeping him engaged in his education as well as help him channel his excessive energy into something positive for him. This young man is at a turning point in his life and we, as his educators, coaches, and administrators, have the power to continue to steer him in the right direction. I believe that if he were not allowed to participate in sports this year, he would be extremely at-risk for falling in with the wrong group and eventually dropping out of school. As one of his teachers, I would be remiss in my duty to help students succeed if I did not help create the best scenario for my students to achieve success. To this end, I strongly urge you to seriously consider allowing this young man to continue on a positive pathway toward his future by allowing him to participate in sports this fall.

Sincerely,



Amy L. Rider  
Math/Special Education Teacher  
Cheer Coach  
Seaside High School  
[arider@seaside.k12.or.us](mailto:arider@seaside.k12.or.us)

# Oregon Standard INDIVIDUALIZED EDUCATION PROGRAM

## For students age 15 and younger when IEP is in effect

To be used in conjunction with Individualized Education Program, Part A: IEP Guidelines for Completion

Student's Name: Stark, Dakota	District: Seaside SD 10	Annual IEP Meeting Date: 09/30/14
<input checked="" type="checkbox"/> M <input type="checkbox"/> F	Home School: Seaside High School	Revision date(s) to annual IEP (if needed):
Date of Birth (mm/dd/yy): 02/14/2000	Attending School/District: Seaside High School	Reevaluation Due: 09/29/17
Grade: 09	Case Manager: Amy Rider	
Secure Student Identifier (SSID): 9633626	Disability Code: 60(p)	

* IEP Meeting Participants:			
Alesha Stark & Rob Camberg	Kodie Stark	Travis Cave	
Parent(s):	Student:	Other:	
Julie Greene/SpEd teacher	Mr. Mizell/English teacher-in writing	Other:	
Special Education Teacher / Provider:	Regular Education Teacher:	Other:	
Elizabeth Friedman/Director of Special Services	Joyce Balint/School Psychologist	Other:	
District Representative	Individual Interpreting Evaluations:	Other:	
<i>* If a required participant participates through written input or is excused from all or part of the IEP meeting, attach documentation of parents' and district agreement to participation by written input or excuse.</i>			

☒ The parent has received a copy of the Notice of Procedural Safeguards.

**The IEP team must consider these factors as part of IEP development:**

A. Does the student need assistive technology devices or services?

Yes, services/devices addressed in IEP ☒ No ☐

B. Does the student have communication needs?

Yes, addressed in IEP ☒ No ☐

C. Does the student exhibit behavior that impedes his/her learning or the learning of others?

☒ Yes ☐ No

(if yes, the IEP Team must consider the use of strategies, positive behavioral interventions, and supports to address the behavior(s))

D. Does the student have limited English proficiency?

Yes ☒ No ☐

(If yes, the IEP Team must consider the language needs of the student as those needs relate to the IEP)

E. Is the student blind or visually impaired?

Yes ☒ No ☐

(if yes, Braille needs are addressed in the IEP, or evaluation of reading/writing needs is completed and a determination is made that Braille is not appropriate)

F. Is the student deaf or hard of hearing?

Yes ☒ No ☐

(if yes, the IEP addresses the student's language and communication needs, opportunities for direct communication with peers and professional personnel in the child's language and communication mode, academic level, and full range of needs, including opportunities for direct instruction in the student's language and communication mode).

**Present Levels of Academic Achievement and Functional Performance**

The Present Levels of Academic Achievement and Functional Performance must include specific information addressing:

- The strengths of the student;
- The concerns of the parents for enhancing the education of their child;
- The present level of academic performance, including the student's most recent performance on State or district-wide assessments;
- The present level of developmental and functional performance (including the results of the initial or most recent evaluation); and,
- How the student's disability affects involvement and progress in the general education curriculum.

**STUDENT STRENGTHS:** Kodie is very friendly and will ask for help. He enjoys playing on the High School football team. Kodie has strong academic skills. Kodie enjoys paintball, camping and BMX.

## PRESENT LEVEL OF ACADEMICS:

9th grade- Term 1  
Woods- D (61.7%)  
Algebra 1A- F (43.3%)  
English 9A- F (1.8%)  
Theatre/Drama- (95%)  
Art Exploration- A (100%)

## Teacher Input:

Mr. Mizell/English 9A: Kodie is a likeable student but needed to be moved to the front of the class because he was distracting others. He hasn't handed much in. He has not handed in any of his first person narrative drafts. Kodie is a good writer when he is focused.

## PRESENT LEVEL OF DEVELOPMENTAL AND FUNCTIONAL PERFORMANCE:

9/25/15 Kristen French by phone from Lewis and Clark Middle School. Ms. French taught Kodie from 6th to 8th grade. She saw a lot of growth. He learned to walk away from situations that frustrated him. She said he literally has a hard time staying in his seat. He would come to one on one study lab unprepared so that was discontinued. Aids would pull him out if he was disruptive in class. He could be impulsive and do something before thinking. By November of last year he did not want to be in Special Ed.

## Woodcock-Johnson: Third Edition: Tests of Achievement-12/11/2012

Test	standard score-100 is average	percentile
Broad Reading	104	60
Broad Math	100	50
Written Language	127	97

## HOW THE STUDENT'S DISABILITY AFFECTS INVOLVEMENT AND PROGRESS IN THE GENERAL EDUCATION CURRICULUM

Kodie was eligible for services under ED based on a medical diagnosis (4/2007) of Anxiety disorder, post traumatic stress disorder and attention deficit hyperactivity disorder. If Kodie's behaviors cause him to be removed from the classroom he misses instruction and would benefit from small group instruction in the learning center. Given accommodations to access the content (see accommodations page), Kodie should be able to be involved and progress within all core subject classes.

PARENT CONCERNS: Mom is making an appointment to get Kodie assessed for ADHD.

**Statewide Assessment**

Will the student participate in any Statewide Assessment during this IEP period?

☒

No, Statewide Assessment not conducted at student's grade level (at time of testing)

☐

Yes (student's grade level at time of testing \_\_\_\_\_). If yes, describe participation decisions below:

Regular Assessment	Alternate Assessment	* Explanation State why student cannot participate in regular assessment and why particular alternate assessment selected is appropriate for student.	Accommodations
<b>Reading/Literature:</b> 3, 4, 5, 6, 7, 8, and HS/11 <input type="checkbox"/> Standard (may include accommodations)	* Extended Assessment <input type="checkbox"/> * Standard Administration <input type="checkbox"/> * Scaffold Administration		
<b>Mathematics:</b> 3, 4, 5, 6, 7, 8, and HS/11 <input type="checkbox"/> Standard (may include accommodations)	* Extended Assessment <input type="checkbox"/> * Standard Administration <input type="checkbox"/> * Scaffold Administration		
<b>Writing:</b> 4,7 and HS/11 <input type="checkbox"/> Standard (may include accommodations)	* Extended Assessment <input type="checkbox"/> * Standard Administration <input type="checkbox"/> * Scaffold Administration		
<b>Science:</b> 5, 8 and HS/11 <input type="checkbox"/> Standard (may include accommodations)	* Extended Assessment <input type="checkbox"/> * Standard Administration <input type="checkbox"/> * Scaffold Administration		

**Districtwide Assessment**

Will the student participate in any Districtwide assessment during this IEP period?

☒ No, Districtwide Assessment not conducted at student's grade level (at time of testing)

☐ Yes (student's grade level at time of testing \_\_\_\_\_). If yes, describe participation decisions below: \_\_\_\_\_

Regular Assessment	Alternate Assessment	* Explanation State why student cannot participate in regular assessment and why particular alternate assessment selected is appropriate for student.	Accommodations
<b>Assessment:</b> <input checked="" type="checkbox"/> No, Districtwide Assessment not conducted at student's grade level (at time of testing)	<input type="checkbox"/> * District Alternate Assessment <input type="checkbox"/> * Other		
Grades administered: <input type="checkbox"/> Standard administration			
<b>Assessment:</b> <input type="checkbox"/> No, Districtwide Assessment not conducted at student's grade level (at time of testing)	<input type="checkbox"/> * District Alternate Assessment <input type="checkbox"/> * Other		
Grades administered: <input type="checkbox"/> Standard administration			
<b>Assessment:</b> <input type="checkbox"/> No, Districtwide Assessment not conducted at student's grade level (at time of testing)	<input type="checkbox"/> * District Alternate Assessment <input type="checkbox"/> * Other		
Grades administered: <input type="checkbox"/> Standard administration			
<b>Assessment:</b> <input type="checkbox"/> No, Districtwide Assessment not conducted at student's grade level (at time of testing)	<input type="checkbox"/> * District Alternate Assessment <input type="checkbox"/> * Other		
Grades administered: <input type="checkbox"/> Standard administration			

**Measurable annual goals page:**

Measurable Annual Goals:	How progress will be measured:		How progress will be reported to parents: written progress notes	When progress will be reported to parents: With each trimester report card
	Criteria	Evaluation Procedures		
Self Direction: Kodie will learn and apply skills to self-redirect in classroom settings to demonstrate: CS.PM.01 identify tasks that need to be done and initiate action to complete the tasks.	Work samples and staff monitoring.	C's or better in classes.	6/11/2015 (AR): Kodie is making good progress toward this goal.	
Study Skills: Kodie will learn/apply skills of monitoring and adjusting his time committed to school work to demonstrate: CS.PM.02 Plan, organize, and complete projects and assigned tasks on time, meeting agreed upon standards of quality.	Work samples and staff monitoring.	C's or better in classes	6/11/2015 (AR): Kodie is making good progress toward this goal.	

Student: Stark, Dakota (9633626)

Date: 09/30/14

Rev Date:

District: Seaside SD 10

**Measurable annual goals page:** (Objectives required for students taking alternate assessments aligned to alternate achievement standards).

Measurable Annual Goal:	Progress will be measured as indicated below:		How progress will be reported to parents:	When progress will be reported to parents:
	Criteria	Evaluation Procedures		
Measurable Short-Term Objectives			Student's Progress Toward Goal	

**Service Summary** (this section may be continued on additional page(s), if necessary)

<b>Specially Designed Instruction</b>	<b>Anticipated Amount/Frequency</b>	<b>Anticipated Location</b>	<b>Starting Date</b>	<b>Ending Date</b>	<b>Provider e.g. LEA, ESD, Regional</b>
Study Skills/Organization	300 minutes/week	Learning Center	09/30/14	09/29/15	LEA
<b>Related Services</b>	<b>Anticipated Amount/Frequency</b>	<b>Anticipated Location</b>	<b>Starting Date</b>	<b>Ending Date</b>	<b>Provider e.g. LEA, ESD, Regional</b>
None Needed					
<b>Supplementary Aids/Services; Modifications; Accommodations</b>	<b>Anticipated Amount/Frequency</b>	<b>Anticipated Location</b>	<b>Starting Date</b>	<b>Ending Date</b>	<b>Provider e.g. LEA, ESD, Regional</b>
preferential seating to avoid distraction	every day	for academic classes	09/30/14	09/29/15	LEA
<b>Supports for School Personnel</b>	<b>Anticipated Amount/Frequency</b>	<b>Anticipated Location</b>	<b>Starting Date</b>	<b>Ending Date</b>	<b>Provider e.g. LEA, ESD, Regional</b>
None Needed					

**Nonparticipation Justification**

Does the student need to be removed from participating with nondisabled students in the regular classroom, extracurricular, or nonacademic activities for the provision of special education services, related services, or supplementary aids and services?

If yes, document the amount/ extent of the removal: 1/5 periods (20%)

If yes, provide explanation justifying the removal:

To provide Kodie with small group instruction to meet his goal.

Yes ☒ No ☐

**Extended School Year (ESY) Services**

ESY services will be provided for this student:

☐ Yes ESY services to be provided are described on Services Summary Page ☒ No ☐ To be considered: Will meet to consider ESY by \_\_\_\_\_ (date)

Seaside SD 10

**CONFIDENTIAL STATEMENT OF ELIGIBILITY FOR SPECIAL EDUCATION**  
**(EMOTIONAL DISTURBANCE 60)**

Student's Name	<u>Stark, Dakota</u>	Birthdate	<u>2/14/2000</u>	Date	<u>9/30/2014</u>
School	<u>Seaside High School</u>	District	<u>Seaside SD 10</u>	SSID	<u>9633626</u>
Date of Initial Eligibility	<u>6/7/2007</u>				

The team has obtained the following assessments. (Attach evaluation report that describes and explains the results of the evaluation conducted):

1. The team has reviewed existing information, including information from the parent(s), the student's cumulative records, and previous individualized education programs or individualized family service plans. Evaluation documentation includes relevant information from these sources used in the eligibility determination.

9/30/2014  
Team Review Date

2. An evaluation of the child's emotional and behavioral status, including (when appropriate) a developmental or social history:

Boise, ID MDT	Eligibility Report	1/28/2013	9/30/2014
Examiner's Name/Position	Evaluation		Date Reviewed

Examiner's Name/Position	Evaluation	Date Conducted	Date Reviewed
--------------------------	------------	----------------	---------------

3. A medical statement, completed by a physician, or a health assessment statement, issued by a nurse practitioner licensed by a State Board of Nursing specially certified as a nurse practitioner or by a physician assistant licensed by a State Board of Medical Examiners. Both a nurse practitioner and a physician assistant must be practicing within his or her area of specialty. (Specify)

Lynn Hoth, FNP	Medical Statement	6/14/2010	9/30/2014
Examiner Name/Title	Evaluation	Date Conducted	Date Reviewed

Health Assessment Statement			
Examiner Name/Title	Evaluation	Date Conducted	Date Reviewed

4. Two behavior rating scales, at least one of which is a standardized behavior measurement instrument;

T. Fritsch	BASC-2 Teacher (x6)	11/8/2012	9/30/2014
<u>Examiner Name/Title</u>	<u>Evaluation</u>	<u>Date Conducted</u>	<u>Date Reviewed</u>

T. Fritsch	BASC-2 Self Report	1/3/2013	9/30/2014
Examiner Name/Title	Evaluation	Date Conducted	Date Reviewed

Seaside SD 10

5. Two observations by someone other than the student's regular teacher, one in the classroom and one in another setting:

**Classroom Setting**

T. Fritsch	Math Class	12/20/2012	9/30/2014
Examiner's Name/Position	Evaluation	Date Conducted	Date Reviewed

**Other Setting (Specify)**

T. Fritsch	Social Skills Class	12/20/2012	9/30/2014
Examiner's Name/Position	Evaluation	Date Conducted	Date Reviewed

6. Other assessment(s) to determine the impact of the disability:

K. French	W-J III Tests of Achievement	12/11/2012	9/30/2014
Examiner(s)/Position(s)	Assessment(s)	Date Conducted	Date Reviewed
Examiner(s)/Position(s)	Assessment(s)	Date Conducted	Date Reviewed

7. Additional evaluations or assessments that are necessary to identify the student's educational needs:

Examiner(s)	Assessment(s)	Date Conducted	Date Reviewed
Examiner(s)	Assessment(s)	Date Conducted	Date Reviewed

The student exhibits one or more of the following over a long period of time and to a marked degree:

- ☐ ☐ An inability to learn that cannot be explained by intellectual, sensory, or health factors.  
yes no
- ☐ ☐ An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.  
yes no
- ☐ ☐ Inappropriate types of behavior or feelings under normal circumstances.  
yes no
- ☐ ☐ A general pervasive mood of unhappiness or depression.  
yes no
- ☐ ☐ A tendency to develop physical symptoms, or fears associated with personal, or school problems.  
yes no

The term emotional disturbance includes schizophrenia, but does not apply to a child who is socially maladjusted, unless the child also meets **one or more** of the criteria listed above.

Seaside SD 10

The team has determined that:

☐ ☐ 1. The student meets the eligibility criteria of OAR 581-015-2145 as a child with an emotional disturbance.  
yes no

☐ ☐ For children ages 5 and eligible for kindergarten through age 21:

yes no 2. As a result of the disability the student needs special education services because the disability has an adverse impact on the student's educational performance.

3. The team has considered the student's special education eligibility, and determined that the eligibility:

☐ is ☐ is not due to a lack of appropriate instruction in reading, including the essential components of reading instruction (phonemic awareness, phonics, vocabulary development; reading fluency/oral reading skills; and reading comprehension strategies);

☐ is ☐ is not due to a lack of appropriate instruction in math; and

☐ is ☐ is not due to limited English proficiency.

The student ☒ does ☐ does not qualify for special education in the area of Emotional Disturbance.

Signatures of Team Members	Title	Agree	Disagree
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

☐ A copy of the evaluation report and the eligibility statement have been provided to the parent(s).

**PRIOR NOTICE OF SPECIAL EDUCATION ACTION**

Dear: Ms. Alesha Stark,

Date: 09/30/14  
MM/DD/YY

This notice informs you of the following action:

To accept Kodie Stark's IEP from Lewis and Clark Middle School, Boise Idaho.

which is a ☒ **proposal** ☐ **refusal** to ☐ **initiate** ☐ **change**

the following aspect of Stark, Dakota (9633626) 's special education:

- ☐ Identification  
☒ Placement (other than initial placement)  
☐ Provision of a free, appropriate public education (includes IEP)

**This action is proposed because:**

Kodie meets Oregon eligibility requirements.

**This action is based on the following evaluation procedures, tests, records or reports:**

Doctor's medical statement, review of past IEP's, teacher input and current grades.

**Other options we considered were:**

Not implementing the IEP from Idaho.

**We rejected these options because:**

Kodie and Ms. Stark have asked for special education services to be continued.

**Any other factors considered by the team:**

Further input from the IEP meeting today.

Sincerely,

Name/Title Julie Greene/SpEd teacher

Phone 503-738-5586

Parents of a child with a disability have protection under procedural safeguards. For a copy of the Procedural Safeguards or for assistance in understanding this information you may contact:

Elizabeth Friedman

Director of Special Services

503-738-5591

Name

Title

Phone

# Oregon Standard INDIVIDUALIZED EDUCATION PROGRAM

## For students age 15 and younger when IEP is in effect

To be used in conjunction with Individualized Education Program, Part A: IEP Guidelines for Completion

Student's Name: Stark, Dakota      District: Seaside SD 10      Annual IEP Meeting Date: 09/30/14

☒ M      ☐ F      Home School: Seaside High School      Revision date(s) to annual IEP (if needed):

Date of Birth (mm/dd/yy): 02/14/2000      Attending School/District: Seaside High School      Reevaluation Due: 09/29/17

Grade: 09      Case Manager: Julie Greene

Secure Student Identifier (SSID): 9683626      Disability Code:

<b>* IEP Meeting Participants:</b>			
Alesha Stark & Rob Camberg		Kodie Stark	
Parent(s):		Student:	
Julie Greene/SpEd teacher		Mr. Mizell/English teacher-in writing	
Special Education Teacher / Provider:		Regular Education Teacher:	
Elizabeth Friedman/Director of Special Services		Joyce Ballint/School Psychologist	
District Representative		Individual Interpreting Evaluations:	
		Other:	

*\* If a required participant participates through written input or is excused from all or part of the IEP meeting, attach documentation of parents' and district agreement to participation by written input or excuse.*

☒ The parent has received a copy of the Notice of Procedural Safeguards.

Student: Stark, Dakota (9633626)

Date: 09/30/14

Rev Date:

District: Seaside SD 10

**The IEP team must consider these factors as part of IEP development:**

A. Does the student need assistive technology devices or services?

Yes, services/devices addressed in IEP ☒ No

B. Does the student have communication needs?

Yes, addressed in IEP ☒ No

C. Does the student exhibit behavior that impedes his/her learning or the learning of others?

☒ Yes ☐ No

(If yes, the IEP Team must consider the use of strategies, positive behavioral interventions, and supports to address the behavior(s))

D. Does the student have limited English proficiency?

Yes ☒ No

(If yes, the IEP Team must consider the language needs of the student as those needs relate to the IEP)

E. Is the student blind or visually impaired?

Yes ☒ No

(If yes, Braille needs are addressed in the IEP, or evaluation of reading/writing needs is completed and a determination is made that Braille is not appropriate)

F. Is the student deaf or hard of hearing?

Yes ☒ No

(If yes, the IEP addresses the student's language and communication needs, opportunities for direct communication with peers and professional personnel in the child's language and communication mode, academic level, and full range of needs, including opportunities for direct instruction in the student's language and communication mode).

**Present Levels of Academic Achievement and Functional Performance**

The Present Levels of Academic Achievement and Functional Performance must include specific information addressing:

- The strengths of the student;
- The concerns of the parents for enhancing the education of their child;
- The present level of academic performance, including the student's most recent performance on State or district-wide assessments;
- The present level of developmental and functional performance (including the results of the initial or most recent evaluation); and,
- How the student's disability affects involvement and progress in the general education curriculum.

**STUDENT STRENGTHS:** Kodie is very friendly and will ask for help. He enjoys playing on the High School football team. Kodie has strong academic skills. Kodie enjoys paintball, camping and BMX.

Student: Stark, Dakota (9633626)

Date: 09/30/14

Rev Date:

District: Seaside SD 10

**PRESENT LEVEL OF ACADEMICS:**

9th grade- Term 1  
Woods- D (61.7%)  
Algebra 1A- F (43.3%)  
English 9A- F (1.8%)  
Theatre/Drama- (95%)  
Art Exploration- A (100%)

**Teacher Input:**

Mr. Mizell/English 9A: Kodie is a likeable student but needed to be moved to the front of the class because he was distracting others. He hasn't handed much in. He has not handed in any of his first person narrative drafts. Kodie is a good writer when he is focused.

**PRESENT LEVEL OF DEVELOPMENTAL AND FUNCTIONAL PERFORMANCE:**

9/25/15 Kristen French by phone from Lewis and Clark Middle School, Ms. French taught Kodie from 6th to 8th grade. She saw a lot of growth. He learned to walk away from situations that frustrated him. She said he literally has a hard time staying in his seat. He would come to one on one study lab unprepared so that was discontinued. Aids would pull him out if he was disruptive in class. He could be impulsive and do something before thinking. By November of last year he did not want to be in Special Ed.

Woodcock-Johnson: Third Edition: Tests of Achievement-12/11/2012

Test	standard score-100 is average	percentile
Broad Reading	104	60
Broad Math	100	50
Written Language	127	97

**HOW THE STUDENTS DISABILITY AFFECTS INVOLVEMENT AND PROGRESS IN THE GENERAL EDUCATION CURRICULUM**

Kodie was eligible for services under ED based on a medical diagnosis (4/2007) of Anxiety disorder, post traumatic stress disorder and attention deficit hyperactivity disorder. If Kodie's behaviors cause him to be removed from the classroom he misses instruction and would benefit from small group instruction in the learning center. Given accommodations to access the content (see accommodations page), Kodie should be able to be involved and progress within all core subject classes.

**PARENT CONCERNS:** Mom is making an appointment to get Kodie assessed for ADHD.

Student: Stark Dakota (9633626)

Date: 09/30/14

Rev Date:

District: Seaside SD 10

# **Statewide Assessment**

Will the student participate in any Statewide Assessment during this IEP period?

☒ No, Statewide Assessment not conducted at student's grade level (at time of testing)  
☐ Yes (student's grade level at time of testing \_\_\_\_\_). If yes, describe participation decisions below:

Regular Assessment	Alternate Assessment	* Explanation <i>State why student cannot participate in regular assessment and why particular alternate assessment selected is appropriate for student.</i>	Accommodations
<b>Reading/Literature:</b> 3, 4, 5, 6, 7, 8, and HS/11 <input type="checkbox"/> Standard (may include accommodations)	* Extended Assessment <input type="checkbox"/> Standard Administration <input type="checkbox"/> Scaffold Administration		
<b>Mathematics:</b> 3, 4, 5, 6, 7, 8, and HS/11 <input type="checkbox"/> Standard (may include accommodations)	* Extended Assessment <input type="checkbox"/> Standard Administration <input type="checkbox"/> Scaffold Administration		
<b>Writing:</b> 4, 7 and HS/11 <input type="checkbox"/> Standard (may include accommodations)	* Extended Assessment <input type="checkbox"/> Standard Administration <input type="checkbox"/> Scaffold Administration		
<b>Science:</b> 5, 8 and HS/11 <input type="checkbox"/> Standard (may include accommodations)	* Extended Assessment <input type="checkbox"/> Standard Administration <input type="checkbox"/> Scaffold Administration		

Student: Stark, Dakota (9633626)

Date: 09/30/14

Rev Date:

District: Seaside SD 10

### Districtwide Assessment

Will the student participate in any Districtwide assessment during this IEP period?

☒ No, Districtwide Assessment not conducted at student's grade level (at time of testing)  
☐ Yes (student's grade level at time of testing \_\_\_\_\_). If yes, describe participation decisions below:

Regular Assessment	Alternate Assessment	* Explanation State why student cannot participate in regular assessment and why particular alternate assessment selected is appropriate for student.	Accommodations
<b>Assessment:</b> Grades administered: _____ <input type="checkbox"/> Standard administration	<input type="checkbox"/> District Alternate Assessment <input type="checkbox"/> Other		
<b>Assessment:</b> Grades administered: _____ <input type="checkbox"/> Standard administration	<input type="checkbox"/> District Alternate Assessment <input type="checkbox"/> Other		
<b>Assessment:</b> Grades administered: _____ <input type="checkbox"/> Standard administration	<input type="checkbox"/> District Alternate Assessment <input type="checkbox"/> Other		
<b>Assessment:</b> Grades administered: _____ <input type="checkbox"/> Standard administration	<input type="checkbox"/> District Alternate Assessment <input type="checkbox"/> Other		

Student: Stark, Dakota (9633626)

Date: 09/30/14

Rev Date:

District: Seaside SD 10

**Measurable annual goals page:**

Measurable Annual Goals:	How progress will be measured:		How progress will be reported to parents:	
	Criteria	Evaluation Procedures	written progress notes	When progress will be reported to parents: With each trimester report card
Self Direction: Kodie will learn and apply skills to self-direct in classroom settings to demonstrate: CS.PM.01 Identify tasks that need to be done and initiate action to complete the tasks.	Work samples and staff monitoring.	C's or better in classes.		
Study Skills: Kodie will learn/apply skills of monitoring and adjusting his time committed to school work to demonstrate: CS.PM.02 Plan, organize, and complete projects and assigned tasks on time, meeting agreed upon standards of quality.	Work samples and staff monitoring.	C's or better in classes		

Student: Stark, Dakota (9633628)

Date: 9/30/2014

Rev Date:

District: Seaside SD 10

Service Summary (this section may be continued on additional page(s), if necessary)

Specialty Designed Instruction	Anticipated Amount/Frequency	Anticipated Location	Starting Date	Ending Date	Provider e.g. LEA, ESD, Regional
Study Skills/Organization	300 minutes/week	Learning Center	09/30/14	09/29/15	LEA
Related Services	Anticipated Amount/Frequency	Anticipated Location	Starting Date	Ending Date	Provider e.g. LEA, ESD, Regional
None Needed					
Supplementary Aids/Services; Modifications; Accommodations	Anticipated Amount/Frequency	Anticipated Location	Starting Date	Ending Date	Provider e.g. LEA, ESD, Regional
preferential seating to avoid distraction	every day	for academic classes	09/30/14	09/29/15	LEA
Supports for School Personnel	Anticipated Amount/Frequency	Anticipated Location	Starting Date	Ending Date	Provider e.g. LEA, ESD, Regional
None Needed					

**Nonparticipation Justification**

Does the student need to be removed from participating with nondisabled students in the regular classroom, extracurricular, or nonacademic activities for the provision of special education services, related services, or supplementary aids and services?

Yes ☒No ☐

If yes, document the amount/ extent of the removal:

1/5 periods (20%)

If yes, provide explanation justifying the removal:

To provide Kodie with small group instruction to meet his goal.

**Extended School Year (ESY) Services**

ESY services will be provided for this student:

☐ Yes ESY services to be provided are described on Services Summary Page ☒ No ☐ To be considered: Will meet to consider ESY by \_\_\_\_\_ (date)

# Special Education Placement Determination

Student's Name: Stark, Dakota

ID# 9633626

Date: 09/30/14

Placement Team (name and title)	Person Knowledgeable About the Child	Person Knowledgeable About Evaluation Data	Person Knowledgeable About Placement Options
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>
Parent	Other <i>X</i>	Other <i>X</i>	Other <i>X</i>

This placement is based on:

- ☒ the attached IEP, dated 09/30/14  
☐ attached evaluation information  
☐ other:

Below, document discussions regarding placement option(s), and indicate selected placement

Placement Option(s) Considered	Benefits	Possible Harmful Effects on the Child and/or the Services to be Provided	Modifications/Supplementary Aids & Services Considered	Indicate Whether Option is Selected and Reason(s) Rejected or Selected
5/5 general education classes plus two 40 minute study labs per week.	100% of time with peers	frustration with work load.	see accommodations.	<input type="checkbox"/> Selected <input checked="" type="checkbox"/> Rejected <i>does not provide sufficient support</i>
4/5 general education classes, 1/5 learning center class, plus two 40 minute study labs per week.	Time to provide Kodie with small group instruction to complete assignments.	less time with peers.	see accommodations.	<input checked="" type="checkbox"/> Selected <input type="checkbox"/> Rejected <i>best with Kodie's needs at this time</i>
<i>PE went caught up with all assignments.</i>				<input type="checkbox"/> Selected <input type="checkbox"/> Rejected
				<input type="checkbox"/> Selected <input type="checkbox"/> Rejected

Federal Placement Code (SECC)

☒ Parent provided with copy of placement determination.

SEASIDE SD 10

PRIOR NOTICE OF SPECIAL EDUCATION ACTION

Dear: Ms. Alesha Stark

Date: 09/30/14  
MM/DD/YY

This notice informs you of the following action: *we re-established Kodie's eligibility in Oregon & to accept Kodie Stark's IEP from Lewis and Clark Middle School, Boise Idaho, to Oregon GMS, making minor revisions.*  
*transferred us*  
which is a ☒ proposal ☐ refusal to ☐ initiate ☐ change

the following aspect of Stark, Dakota (9633626) 's special education:

- ☒ Identification  
☒ Placement (other than initial placement)  
☒ Provision of a free, appropriate public education (includes IEP)

This action is proposed because:

Kodie meets Oregon eligibility requirements.

This action is based on the following evaluation procedures, tests, records or reports:

Doctor's medical statement, review of past IEP's, teacher input and current grades.

Other options we considered were:

*Not implementing the IEP from Idaho doing new assessments before establishing Oregon eligibility*

We rejected these options because:

*Kodie and Ms. Stark have asked for special education services to be continued.*

*we have sufficient info to establish his eligibility; develop an IEP. Kodie & Ms Stark have asked for special education services to be continued.*

Any other factors considered by the team:

Further input from the IEP meeting today.

*Records indicate Kodie may have ADHD. we requested permission to get updated checklists.*

Sincerely,

Name/Title Julie Greene/SpEd teacher

Phone 503-738-5586

Parents of a child with a disability have protection under procedural safeguards. For a copy of the Procedural Safeguards

or for assistance in understanding this information you may contact:

Elizabeth Friedman

Director of Special Services

503-738-5591

Name

Title

Phone

## Special Education Meeting Notes

Student: <sup>(Kodie)</sup> Dakota Stark

Date: 9/30/14

Attendees: (Name and Title) (\*indicates note taker)

Alesha Stark's Rod Camberg, <sup>parents</sup> Kodie Stark, student  
Joyce Brault, School Psychologist  
Jill Greene, Special Ed Teacher  
Treviis Cove, Counselor  
Elizabeth Friedman, Director

### Type of Meeting:

- ☐ Evaluation/Planning  
☐ Staffing

☒ Initial Eligibility to IEP  
Oregon

- ☐ IEP/Placement  
☐ Re-evaluation/IEP/Placement  
☐ FBA and/or BIP  
☐ Other: \_\_\_\_\_

### Agenda:

- ☒ Introductions  
☒ Parent Rights offered - taken or refused  
☒ Present levels/teacher input/testing results  
☒ Eligibility signed

- \_\_\_\_ Draft IEP/placement reviewed  
\_\_\_\_ Diploma Options discussed, if applicable  
\_\_\_\_ IEP/placement signed  
\_\_\_\_ IEP/paperwork provided to parent  
\_\_\_\_ handed \_\_\_\_ mailed \_\_\_\_ student

### Meeting Notes:

Today we need to re-establish Kodie's eligibility for special education services in Oregon. Alesha - has been eligible since elementary school. Joyce reviewed the previous evaluations from Idaho & Oregon. Behavior, particularly off task, inattentive behavior significantly impact his educational performance. We have all the necessary components to establish eligibility in the category of Emotional Disturbance. Lynn Holt diagnosed him with ADHD in 2010. Alesha said she didn't know that - Joyce will double check. We can send her a copy of the medical statement. Joyce reviewed the questions - the team agrees he qualifies - signed the statement.

permission to excuse Mr. Mitchell, English Teacher, requested of  
Alexandra - granted. DME HP taken from Idaho for Frank's  
conviction.

Special Edus reviewed - no only one that applies  
is that his behavior impedes his learning, or learning  
of others.

Present work - added to strengths (active, academic  
skills tested <sup>recently</sup> as a strength). Grades are not good at this  
point - is passing words: Now has Team: Life-time work.  
Kodie was changed from Algebra I to Transition Math.  
Kodie said he didn't understand Algebra I. Julie explained  
3 credits needed at Algebra I level or higher to graduate.  
No room to fail math. Kodie - Transition math seems to be  
a challenge but I can do it. Mr. Rider can provide more  
challenging math for Kodie if he finds it too easy. Mr. Mitchell  
said he's moved Kodie to front of class because he was  
distracting to others. Kodie says he doesn't know what's going on  
in English. He's not taking notes to date. Kodie will try to take  
notes. Parent concerned? Having him reassessed for ADHD.  
Ertter offered for teachers to complete updated behavior  
checklists, called Vandemilt to inform the Dr. of what they  
observed at school. There is a parent version too. Alexandra will also  
request Dr. records from Idaho. Permission for checklists requested

#### Follow Up Responsibilities:

Kodie asked about his test scores - Ertter explained he  
was good reading: math skills: very strong written language  
skills. It's not that he can't do the work, it's his inattentiveness  
of task, lack of work completion that's getting in the way.

Draft deals reviewed - OK w/ team. Aletha wants him to bring homework home.

Julie proposes Kodie having 1 period in the learning center to receive specially designed instruction in study/organization skills. Kodie likes his schedule; doesn't want to be an elective class. Aletha said she thinks he needs the learning center class. Trans - once caught up in learning center, could access PE part-time, if NW.

Januik would like it. Red asked for a list of missing assignments. Trans - "Parent View" is a way to check regularly. Will get user name & password. Julie can provide input to parent on missing assignments.

Placement discussed. We chose general ed with 1 learning center class with the opportunity to attend PE when he's caught up in class (3<sup>rd</sup> period).

Diploma options figured shared w/ parents: Kodie.

#### Follow Up Responsibilities:

Trans will talk to Mr. Januik about the flexible.

Education Agency Logo and Information Here

Written Agreements between the Parent and the District

Student Name Dakota Stark Birth Date 2-14-2000 Student ID # \_\_\_\_\_  
Attending School Seaside High School Case Manager Ms. Greene

The authorized District staff has explained to the Parent that he or she is not required to enter into any of these agreements.

Julie Greene  
Authorized District Staff - Print Name

9-30-14  
Date

1. THREE YEAR RE-EVALUATION-

- ☐ The District and the Parent agree that the District will not conduct a three-year re-evaluation which is due on: \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_ Authorized District Staff Signature \_\_\_\_\_ Date \_\_\_\_\_

Note: Prior Notice about Evaluation/Consent for Evaluation is not required.

2. IEP TEAM ATTENDANCE NOT REQUIRED

A. CONTENT AREA OF EXCUSED MEMBER NOT DISCUSSED AT MEETING

- ☐ The District and the Parent agree that the following member(s) of the IEP team are not required to attend the IEP meeting on \_\_\_\_\_ in whole or in part, because the member's area of the curriculum or related service is not being modified or discussed in the meeting. List name(s) of member(s):  
\_\_\_\_\_  
\_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_ Authorized District Staff Signature \_\_\_\_\_ Date \_\_\_\_\_

B. CONTENT AREA OF EXCUSED MEMBER DISCUSSED AT MEETING

- ☒ The District and the Parent agree that the following member(s) of the IEP team may be excused from attending the IEP meeting on 9-30-14 in whole or in part, when the meeting involves a modification to or discussion of the member's area of the curriculum or related services, if the member submits in writing to the team input into the IEP before the meeting. List name(s) of member(s):  
Mr. Mizell English  
Alisha Fenn 9/27/14

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_ Authorized District Staff Signature \_\_\_\_\_ Date \_\_\_\_\_

SEASIDE SD 10

NOTICE OF TEAM MEETING

Date: 09/24/14

Dear Alesha Stark  
(Parent)

and

(student; required for students who are or will be 16 or older while the IEP is in effect, if a purpose of the meeting is to consider postsecondary goals and transition services)

You are invited to a meeting for Stark, Dakota

SSID: 9633626

At this meeting we will:

- ☒ Review existing information about your child, and
  - ☐ Decide if your child should be evaluated for special education eligibility.
  - ☐ Decide whether additional testing is needed.
  - ☒ Decide whether your child is eligible for or continues to be eligible for special education.
- ☐ Develop or review an individualized education program (IEP) and placement for your child. The development of the IEP will be based on information from a variety of sources including the most recent evaluation, progress reports, test results, and information from you.
- ☐ Consider your child's transition needs or services for a student age 18 or older. (To the extent appropriate, with the consent of the parents or adult student, the district must invite a representative of any participating agencies likely to be responsible to provide or pay for transition services.)
- ☐ Conduct a Manifestation Determination meeting.
- ☒ Review Idaho IEP and determine Oregon Eligibility

The meeting is scheduled for Tuesday 09/30/14 at 8:30 am  
(Date) (Time)

The meeting will be held at Principal's Conference Room

(Location)

We encourage you to participate in all meetings about your child's special education program. If you cannot attend this meeting, or wish to discuss a different meeting location or time, or would like to participate through alternate means, please contact:

Julie Greene/Special Education teacher at 503-738-5586 by 09/29/14  
(Name) (Phone) (Date)

If you choose not to participate, the meeting may be conducted without you. If you are not going to attend, please contact the individual named above to provide them with information you wish to have considered as part of this meeting.

The individuals required to attend are: Name/Position/Agency	Other individuals invited to attend are: Name/Position/Agency
Elizabeth Friedman/Director of Special Education	
Julie Greene/Special Education teacher	
Mr. Mizell/English teacher	

You may invite other individuals who have knowledge or special expertise about your child. Please contact us if you plan to invite others, not listed on this invitation, to the meeting. For an IEP meeting, you and the district may agree to excuse a required participant or allow their participation by submission of written input. See Written Agreement form.

Sincerely,

Julie Greene/Special Education teacher

503-738-5586

Signature/Title

Phone