

**NOTE:** The IEP and DETERMINATION OF ELIGIBILITY form must reflect meaningful parental consultation.  
**Maintain all documents in chronological order, most recent on top.**  
**Please ensure there is no duplication of any documents. You may not require all sections in your file.**  
**File in the following order from front to back:**

# CATEGORY G

## DESIGNATION FILE DOCUMENTATION/CONTENTS

### 1. ADDITIONAL SUPPORTS CHECKLISTS

- Clearly identify all the supports and services that the child is receiving.
- Keep all checklists from year to year. There must be one in place for every school year.
- Don't confuse district services from outside agency services. Keep them separate.
- Document all community services in the space provided. List the ones that parents/guardians have put in place and also list the ones that school/district staff have assisted in securing.
- Equipment requests. Therapeutic swim. Functional Life Skills Allowance.

### 2. DETERMINATION OF ELIGIBILITY FORMS.

- The determination of eligibility form must be completely filled-out.
- The form must be signed by the SSS Coordinator prior to being sent to the District Student Support Services office for processing.
- Attach the necessary documents to the eligibility form when it is sent to the District SSS office.
- Please only send copies of the documents you are attaching to the eligibility form as these will not be returned to the school.
- The eligibility form will be processed, stamped, copied and the original returned to the school.

### 3. COPIES OF ALL IEPs.

- The IEP for ASD must address two areas of need: social interaction; and behaviours/emotional functioning. It can also address five additional areas of need: communication; self determination and independent living; cognition; academics and functional academics; and other health factors (sensory; gross and fine motor, hearing/vision.) Transition to post-secondary (education and career exploration, job skills training) should be an integral part of the secondary school experience.
- IEPs must not be obvious copies of the previous year.
- IEPs must reflect those present at the meeting or, if not possible to be at the meeting, that they were consulted in some matter and asked for input into the development of the IEP.
- The current level of functioning for each goal must clearly identify the student's level of functioning specific to the goal for that area. *This is not an area where progress is documented.*
- The IEP must indicate where the supports and services fit in, who is responsible for each objective and how the student's progress will be monitored/tracked.
- Parents must be given the opportunity to contribute, in a meaningful way, to the development of the IEP.
- The school administrator must sign the IEP indicating that the IEP is reasonable, that parents were given the opportunity to contribute and that it will be the guiding plan for the student.

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### **3. COPIES OF ALL IEPs. (Continued)**

- At reporting times in the school year, the student and parents must receive a report on progress toward the goals in the IEP.
- *Place a copy of the progress report behind the IEP for that school year.*

### **4. PSYCHOLOGICAL ASSESSMENTS**

- Assessment reports from a school psychologist or a community psychologist.
- If there is only a psychological assessment from CDBC it would go in this section.

### **5. SCHOOL-BASED ASSESSMENTS / REPORTS**

- Level A and Level B Assessment Results. *Do not place protocols in the designation file.*
- SLP Reports (from SD68)
- School-Age Therapy Reports (these will have CDC letterhead)
- OT Clinic Reports (these will have CDC letterhead)

### **6. MEDICAL REPORTS / ASSESSMENTS / LETTERS / PLANS / CONSULTS**

- Reports, assessments, and letters from any medical practitioner. Highlight the diagnosis. The diagnosis must be clearly written. If the report lists the diagnosis using language such as “appears to be, resembles, could be, is like...” is not accepted by the Ministry of Education.
- Full CDBC Reports
- Student Health Care Plans, Emergency Care Plans, Risk-Rescue Kit Information
- Student Health Care **Record Sheets** such as seizure records, blood sugar records, medication dispensing records,
- Paediatric Consultation Notes(from SD68)

### **7. BEHAVIOUR**

- Instructional Support Planning Document
- Functional Behaviour Assessments; BASC Results and other school-based behavioural assessments.
- Behaviour Support Plans
- CYFSW contact logs, Complete Intake Forms, Closure Documentation
- District Behaviour Resource Teacher records of consultation.
- Letters of Suspension
- Attendance Reports if pertinent to the student’s IEP (term attendance reports)
- Threat and Violent Incident Reports
- Employee Safety Plan

### **8. PROVINCIAL RESOURCE PROGRAM**

- SET-BC, POPARD, Jack Ledger School,

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### **9. OUTSIDE AGENCIES**

- Child Development Centre Reports from SLP, OT, PT
- MCFD, CYMH,
- VIHA Audiology

### **10. FORMS, APPLICATIONS,**

- Release of Information, Request for Information, SSS Request for Consultation,