

Carbon Lehigh Intermediate Unit #21

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EQUITABLE PARTICIPATION SERVICES REFERRAL FORM PROFESSIONAL DEVELOPMENT OR MATERIALS

**In order to qualify for any of the below services, the Non Public School must have students who are eligible for Special Education Services as per an IDEA Evaluation and are listed on the December 1 Table 14 Child Count.

- Special Education Teacher Coaching/Consultation with Staff
- Group Professional Development Training
- Special Education Materials, Equipment, or Curriculum

| REFERRAL SOURCE: | | |
|---|---|---|
| Private School Name: | | Date of Request: |
| Referred By: | Position: | Phone #: |
| ☐ Special Education Teacher Con☐ Group Professional Developme ☐ Curriculum, Materials, or Equi | nsultation/Coaching for Academics nsultation/Coaching for Behavior ent for Non-Public School Staff ipment cked above – please describe in detail: | |
| 2 correspond of our races needed as ence | promot describe in destine | |
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| SIGNATURE OF ADMINISTRATOR I attest that this building has students the disability thus making them eligible for Child Count. | R: at have been evaluated by their residence district Equitable Participation services. These students | (LEA) and qualified under IDEA with a are listed on our December 1 Table 14 |
| Administrator's Name: | Position: | |
| Signature (electronic allowed): | Date: | |
| SUBMISSION: Return packet to: EPreferrals@cliu.or Equitable Participation Supervisor/C | g onsulting Teacher will follow-up with referrir | ng principal for specific information. |

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