**Manifestation Determination Review**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Student’s Name: |  | DOB: |  | SSID: |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| School Name: |  |  | Grade Level: |  |  | Review Date: |  |

|  |  |
| --- | --- |
| Code of Conduct violation: |  |

**Summary of the information considered:**

|  |  |  |
| --- | --- | --- |
| Student’s behavior(s) | | |
|  | | |
| Student’s IEP | | |
|  | | |
| Teacher(s) comments | | |
|  | | |
| Relevant information provided by the parent(s) | | |
|  | | |
| Total number of days suspended this school year, comments | | |
|  | | |
| Other relevant information (include grades and attendance) | | |
|  | | |
|  | | |
| [ ] Yes | [ ] No | Was the conduct in question caused by or does it have a direct and substantial relationship to the student’s disability? |
|  | | |
| [ ] Yes | [ ] No | Was the conduct in question a direct result of the LEA’s failure to implement the IEP? |

**Manifestation Determination Review**

|  |  |  |  |
| --- | --- | --- | --- |
| Student’s Name: |  | DOB: |  |

**Determination:**

The LEA, parent, and relevant members of the IEP team looked at all information and determined that the conduct:

|  |  |  |  |
| --- | --- | --- | --- |
| [ ] | **IS**  a manifestation of the disability and the student will be returned to the placement specified in his/her IEP, unless: (a) the school and parent(s) agree to a change of placement through the IEP process; or (b) the student is assigned to an alternative educational setting for possession of a weapon, illegal drugs or for infliction of serious bodily injury on another person. | | |
|  | | | |
|  | | **[ ]** | The team will conduct a functional behavioral assessment and will implement a behavioral intervention plan for the student. |
|  | | **[ ]** | The team has recently conducted a functional behavioral assessment and will implement a behavioral intervention plan for the student. |
|  | | **[ ]** | The team will review the existing behavioral intervention plan and modify it, as necessary, to address the conduct that resulted in the disciplinary removal. |

|  |  |
| --- | --- |
| [ ] | **IS NOT**  a manifestation of the disability and disciplinary removal may occur. The LEA will continue to make a free appropriate public education (FAPE) available to the student in a manner which enables the student to continue to participate in the general education curriculum, although in another setting, and to progress toward meeting the goals set out in the student’s IEP. The LEA may conduct a functional behavioral assessment and develop a behavioral intervention plan designed to address the conduct violation so that it does not recur. |
|  | |

The following people attended and participated in the meeting for the Manifestation Determination.

|  |  |  |
| --- | --- | --- |
| **Position** | **Signature** | **Date** |
| Parent |  |  |
| Parent |  |  |
| General Education Teacher |  |  |
| Special Education Teacher |  |  |
| LEA Representative |  |  |
| Someone Who Can Interpret the Instructional Implications of the Evaluation Results |  |  |
| Student |  |  |
| Career/Technical Education Representative |  |  |
| Other Agency Representative |  |  |
|  |  |  |
|  |  |  |

Dissenting Opinion Team Members:

|  |  |  |
| --- | --- | --- |
| **Position** | **Signature** | **Date** |
|  |  |  |
|  |  |  |