

**Request for Placement in In-State Programs
Not Currently Approved to Provide Special Education and Related Services**
Under the New Hampshire Standards
for the Education of Children with Disabilities

**Ed 1126.05 Placements in In-State Programs
Not Currently Approved to Provide Special Education and Related Services.**

Please provide the following information regarding the in-state program:			
Name of Approved Nonpublic School:			
Address:			
Nonpublic school Contact: <i>(Name and Title)</i>		Telephone Number:	
		Email address:	
Approved Grade Span:		This non-public school is approved for: <input type="checkbox"/> Males <input type="checkbox"/> Females <input type="checkbox"/> Both	
This non-public school is: <input type="checkbox"/> Day only <input type="checkbox"/> Both Day and Residential			

Please provide the following information regarding the student:			
Student SASID:			
LEA/District:		Date non-public school visited by LEA:	
Start Date:		End Date:	

Name of Person completing this request:				Title:	
Telephone:		Email:			

Ed 1126.05 Placements in In-State Programs Not Currently Approved to Provide Special Education and Related Services.

(a) An LEA shall not place a child with a disability in a program not currently approved to provide special education and related services until the following requirements have been met:

- (1) The LEA shall have conducted a search and determined that there are no approved in-state special education programs available to meet the individual child's need for special education and related services;
- (2) The LEA shall review inspection reports and certificates to determine that the in-state facility meets New Hampshire health and fire regulations for non-public schools as established by public health statute RSA 200:11, Ed 306.07, and the state fire code as adopted by the New Hampshire department of safety in Saf-C 6000;
- (3) A representative of the LEA shall have:
 - a. Visited the facility;
 - b. Reviewed staff qualifications to confirm that such staff are qualified personnel as set forth in Ed 1114.10(a);
 - c. Reviewed instructional materials and setting; and
 - d. Discussed the child's needs with staff providing direct services;
- (4) Subsequent to the visitation required in (3) above, the LEA's IEP team shall determine whether the facility is capable of implementing the child's IEP; and
- (5) The following documentation shall be provided by the LEA to the department to demonstrate program compliance under this paragraph:
 - a. A statement that the facility meets New Hampshire fire and health statutes and rules for schools as referenced in (2) above, including copies of documents relating to inspections currently in effect supplied by the person performing the fire or health inspection;
 - b. The date the facility was visited by a representative of the LEA;
 - c. A description of:
 1. The specific needs of the child which cannot be met by any approved special education program;
 2. A list of the approved programs which were considered and rejected and why they were rejected; and
 3. Why the proposed placement is the least restrictive environment for the child;
 - d. A copy of the child's IEP;
 - e. The following information regarding the proposed program:
 1. School name;
 2. Program name;
 3. Start date;
 4. End date;
 5. Disabilities served by the program;
 6. Whether the education setting is a regular setting or a special setting;
 7. Whether the environment is a self-contained program, a resource room program, a regular education program, or a home-based program;
 8. Age range served;
 9. Sex of students served;
 10. Whether the program is day or residential;
 11. The name of the contact person for the program;
 12. The contact person's title; and
 13. The contact person's telephone number;
 - f. Copies of the certification/licensing credentials of the staff who will be providing the special education and related services to the child; and
 - g. Statements provided shall include:
 1. A statement of how the instructional materials and setting will provide the required involvement in the general curriculum, resulting in progress in the general curriculum as required under 34 CFR 300.320;
 2. A statement, in compliance with the child's IEP, of how the child will participate in state and district-wide assessments;
 3. A statement that the program is capable of implementing the child's IEP and providing FAPE; and
 4. A statement that the program is in full compliance with the behavioral intervention requirements detailed in Ed 1114.07.

(b) The department shall review all documentation submitted by the LEA and shall approve requests for individual placement of children with disabilities at in-state facilities not currently approved to provide special education and related services when the documentation demonstrates that the child will receive FAPE in the least restrictive environment.

(c) The maximum number of placements of individual children with disabilities the department shall approve at any one facility not currently approved to provide special education and related services shall be 5.

(d) Facilities not currently approved to provide special education and related services wishing to serve more than 5 children with disabilities shall apply for special education program approval.

Please assure that the LEA has completed the following:

<input type="checkbox"/>	The LEA has conducted a search and determined that there are no approved instate special education programs available to meet the individual child's need for special education and related services
<input type="checkbox"/>	The LEA's IEP team has determined the facility is capable of implementing the child's IEP
<input type="checkbox"/>	The LEA has reviewed inspection reports and certificates to determine that the in-state facility meets New Hampshire health and fire regulations for non-public schools as established by public health statute RSA 200:11, Ed 306.07, and the state fire code as adopted by the New Hampshire department of safety in Saf-C 6000;
<input type="checkbox"/>	The LEA has reviewed staff qualifications to confirm that such staff are qualified personnel as set forth in Ed 1114.10(a);
<input type="checkbox"/>	The LEA has reviewed instructional materials and setting; and
<input type="checkbox"/>	The LEA has discussed the child's needs with staff providing direct services;

In order for the request to be considered the following must also be attached:

<input type="checkbox"/>	A copy of the student's current IEP with parent consent
<input type="checkbox"/>	A statement that the facility meets New Hampshire fire and health statutes and rules for schools, including copies of documents relating to inspections currently in effect supplied by the person performing the fire or health inspection;
<input type="checkbox"/>	A description of the specific needs of the child which cannot be met by any approved special education program
<input type="checkbox"/>	A list of the approved special education programs which were considered and rejected and why they were rejected
<input type="checkbox"/>	Why the proposed placement is the least restrictive environment for the child
<input type="checkbox"/>	Copies of the certification/licensing credentials of the staff who will be providing the special education and related services to the child
<input type="checkbox"/>	A statement of how the instructional materials and setting will provide the required involvement in the general curriculum, resulting in progress in the general curriculum as required under 34 CFR 300.320
<input type="checkbox"/>	A statement, in compliance with the child's IEP, of how the child will participate in state and district-wide assessments
<input type="checkbox"/>	A statement that the program is capable of implementing the child's IEP and providing FAPE
<input type="checkbox"/>	A statement that the program is in full compliance with the behavioral intervention requirements detailed in Ed 1114.07.

I certify that the information provided by the LEA in this request is accurate:

_____ Date
 Signature of Authorized District (LEA) Representative

NHDOE USE ONLY

_____ Date
 Signature of Authorized NH State Department of Education Representative Approving Request