



Placement

Student Name _____ ID# _____ Date of meeting _____

Special Education Placement Continuum Options considered and selected (check all that apply):

Considered	Selected		Considered	Selected	
<input type="checkbox"/>	<input type="checkbox"/>	General Education Class(es) (including integrated settings)	<input type="checkbox"/>	<input type="checkbox"/>	State Operated Program
<input type="checkbox"/>	<input type="checkbox"/>	Special Class(es)	<input type="checkbox"/>	<input type="checkbox"/>	Private Residential School
<input type="checkbox"/>	<input type="checkbox"/>	Public Separate Day School	<input type="checkbox"/>	<input type="checkbox"/>	Home Based Instruction
<input type="checkbox"/>	<input type="checkbox"/>	Private Day School	<input type="checkbox"/>	<input type="checkbox"/>	Homebound Services
			<input type="checkbox"/>	<input type="checkbox"/>	Other (Described) _____

Special Education Placement Rationale:

Based upon identified services and placement continuum options checked above, and discussion by the IEP team that included LRE considerations, the selected placement is the Least Restrictive Environment for this student.

Proposed School Assignment(s): _____ Date(s) _____
_____ Date(s) _____

Placement Disclaimer

This school assignment may be subject to revision as a result of changes in residence or school assignment areas, misconduct or disciplinary action, relocation or reconfiguration of programs, failure to satisfy generally-applicable regular education program requirements, or for other reasons that do not constitute a change in placement. For private school placements, this school assignment is also subject to successful completion of any school application, interview and acceptance process, and continued good standing enrollment.

Transportation: This student does NOT require special transportation
 This student does require special transportation

If special transportation is required, give reason _____

Extended School Year (ESY) Services:

Does the student require ESY services in order to receive a free and appropriate public education (FAPE)?

- The IEP team determined the student does not require ESY services.
- The IEP team determined the student requires ESY services.
- The IEP team determined and/or address ESY services at a later date.

A copy of the *ESY Information* form and an explanation of ESY services were provided to parent, document discussion on the Present Level of Performance, page 309.

Information from the Fairfax County Public Schools student scholastic record is released on the condition that the recipient agrees not to permit any other party to have access to such information without the written consent of the parent or of the eligible student.