

Children birth to age 3 years only

MARSS Special Education Student Information

Complete the information in Section 1, make 2 copies, and give one copy to your building MARSS Coordinator at the time of referral to obtain the MARSS ID # and to provide them with demographic information and status start date.

Section 1

NAME: _____ **ID #:** _____

GRADE: EC **BIRTHDATE:** _____ **IEP MANAGER:** _____

GENDER: M F **Primary Language:** _____ **RACE/ETHNICITY:** _____

PARENTS NAME: _____

ADDRESS: _____

RESIDENT DISTRICT: _____ **SERVING DISTRICT:** _____

For children age birth to age 3 the first MARSS record must have an **evaluation status of code 2.**

***STATUS START DATE:** _____

For infants and toddlers (age 2 or younger at the time of referral) the STATUS START DATE should be the date the referral was received by IEIC facilitator.

After evaluation, complete the information in Section 2 and give the second copy to your MARSS Coordinator.

Section 2

***STATUS END DATE:** _____ The STATUS END DATE should be the date the results are shared with the parent or, for children determined eligible, the date of IFSP team meeting.

Child evaluated and found **not eligible: Status End Code 25-**

***HOURS SPENT EVALUATING THIS STUDENT:** _____

*** PRIMARY DISABILITY CLASSIFICATION:** _____

*** FEDERAL CHILD COUNT SETTING:** _____

***SPECIAL EDUCATION EVALUATION STATUS:**

Code 2: Early Childhood Evaluated (Child under age 3 was referred for evaluation)

Code 3: Evaluated – Requires services but not yet in a program (this code is **rarely** used) Please talk to Director of Sp Ed before using this code.

Code 4: Evaluated – Receiving services via an IEP or IFSP

Code 5: Evaluated – Requires services, but parents refuse

Code 6: Evaluated – Receiving services via an IIIP

***STATUS START DATE FOR CODES 4 & 6:** _____

Code 7: IEP/IFSP/IIIP was terminated during the school year