

JOHNSTON PUBLIC SCHOOLS

Special Services

Student Name:

Date:

School:

Grade:

The IEP Team has convened for a manifestation determination to determine if the disciplinary infraction was a manifestation of this student's disability. Based on evaluations previously completed by the IEP team this student's disability is _____.

Disciplinary infraction (include date, time and location):

Summary of Review:

- The IEP Team reviewed the following relevant information in making its manifestation determination:

	YES	NO
√ Evaluation/diagnostic records	___	___
√ IEP	___	___
√ Functional Behavioral Assessment	___	___

- Summary of parent and teacher observations and identification of the problem behavior(s):

Based on a review of the relevant information the IEP Team must determine if the disciplinary infraction was a direct result of the child's disability. That is the infraction was:

- Caused by or has a substantial relationship to the student's disability, or
 - A direct result of the LEAs failure to implement the IEP.
- If YES, Manifestation Found:** student cannot be suspended for the infraction. Current plan and placement must be reviewed.
- If NO, Manifestation Not Found:** Student can be suspended as with non-disabled peers.

Comments:

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Proposed interventions to address problem behaviors (including the need for a Functional Behavioral Assessment and Behavior Intervention Plan, whether the student will follow the disciplinary consequences as outlined in the school's disciplinary procedures):

Summary:

- No - Not a manifestation of the disability
- Yes - Manifestation found

Participants:	Signature	Agree	√	Disagree
Parent	_____	_____		_____
General Educator	_____	_____		_____
Special Educator	_____	_____		_____
LEA Representative	_____	_____		_____
Administrator	_____	_____		_____
Student	_____	_____		_____
Other	_____	_____		_____
Other	_____	_____		_____