

Location:	Hearing:	CourtRoom:
Name:	Case#:	Hearing Date:
Section 3-816.4(c)(1) Inquired about status of educational stability at the following hearings:(MDEC Code = CISES) Shelter Care <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure Adjudication <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure Disposition <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure Any Change of Placement <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure		
Section 3-816.4(c)(1) Is the child or youth enrolled in school? <input type="checkbox"/> Yes, what school? _____ <input type="checkbox"/> No <input type="checkbox"/> Not Sure	Section 3-816.4(c)(7) If the child or youth is not in a school setting, what educational services is the child or youth receiving and from whom?(MDEC Code = CIDMG) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure	
Section 3-816.4(c)(2) Are the child's siblings in the same school? <input type="checkbox"/> Yes <input type="checkbox"/> No	Section 3-816.4(c)(8) Does this child or youth have a responsible adult serving as an educational advocate (<i>guardian</i>)?(MDEC Code = CIDMG) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure	
Section 3-816.4(c)(4) Where is the school located in relation to the child's or youth's current foster care placement? _____	Section 3-816.4(c)(8) If there is no designated educational advocate (<i>guardian</i>), who ensures that the child's educational needs are being met?(MDEC Code = CIDMG) _____	
Section 3-816.4(c)(3) Has the child changed schools because of a change in his/her foster care placement? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure If yes, how many times? _____	Section 3-816.4(c)(1) If the child is of preschool age, is the child enrolled in an appropriate early childhood education program? (MDEC Code = CISES) <input type="checkbox"/> Yes, name of program _____ <input type="checkbox"/> No <input type="checkbox"/> Not sure	
Section 3-816.4(c)(6) If it is not in the best interest of the child to remain at the current school, has the child welfare agency coordinated with the appropriate local educational agencies to ensure immediate enrollment in the new school and prompt release of all educational records to the new school? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure	If the child is under the age of three, is there a need to refer the child to the Infants and Toddlers with Disabilities Program for screening or evaluation?(MDEC Code = CISES) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure	
Section 3-816.4(c)(5) How is the child or youth getting to and from school?	Section 3-816.4(c)(1) Is the grade level appropriate?(MDEC Code = CISES) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure If not, what plan is in place to place child in appropriate grade level? _____ What grade is the child in? _____	
Section 3-816.4(c)(7) Is the child or youth regularly attending school? <input type="checkbox"/> Yes <input type="checkbox"/> No, why not? _____		
Section 3-816.4(c)(7) How many days of school has the child or youth been absent and why? # of days _____ Reason: _____	If the child is entitled to early intervention services, does the child have a current Individualized Family Service Plan (IFSP) that includes appropriate services? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure	
Additional Questions for Specified Groups		
Special Education and Related Services Under Individuals with Disabilities Education Act (IDEA) and Section 504		
If the child has a physical mental health or emotional disability that impacts learning, has the child been evaluated for Special Education/Section 504 eligibility and services? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure If no, who will make a referral for evaluation or assessment? _____ If yes, what are the results of the assessment? _____ _____ _____	Section 3-816.4 (c)(9) Does the child or youth have an Individualized Education Plan (IEP)? (MDEC Code = CAIEP) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure If so, is the plan meeting the child's or youth's needs? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure	
For Older and Transitioning Youth		
Section 3-816.4(c)(10) Is the youth on track to graduate and receive a high school diploma or a certificate?(MDEC Code = CAIEP) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	Is the youth receiving assistance in applying for post-secondary schooling, or vocational training, transitional services, if the youth has an IEP, and financial aid (i.e. State Tuition Waiver, Education and Training Voucher [ETV], completed FAFSA by March 1st.)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure	
Section 3-816.4(c)(10) If not, what is being done to ensure that the youth gets on track to do so?(MDEC Code = CAIEP) _____ _____		
Additional Comments		
Judge/Magistrate Initials _____	Signature _____	