

Student _____ Date of Birth _____ Grade _____ Student ID _____
School _____ Date of Incident _____ Meeting Date _____ Notification Date: _____

REVIEW

1. **Sources of Information:** (check all that were reviewed) IEP BIP Discipline Report
 Assessments/Evaluations Teacher Observations Medical Information 504 Plan FBA
2. **Discipline Action History**
Number of in school suspensions: _____ Total # of days: _____
Number of out of school suspensions/expulsions: _____ Total # of days: _____
3. **Describe the conduct violation:**
4. **Describe the district policy concerning the behavior:**
5. **Does the proposed disciplinary action constitute a change of placement?** (i.e., a suspension of over 10 consecutive days or a series of suspensions totaling more than 10 days in one school year)
6. **Has the student had other manifestation determinations this year:** Yes No
a. If yes, list dates and findings:
7. **Was the behavior in question an isolated incident or a recurrent pattern of behavior?**
8. **Does the student have a Behavior Intervention Plan (BIP)?** Yes No
a. Have services/ interventions consistent with BIP been provided? Yes No
b. Does the plan need revision? Yes No
9. **Student's disability:**
a. **Is there any pertinent medical or other diagnoses to consider?** Yes No
i. If yes explain:
b. **Is there a current evaluation open?** Yes No
i. If yes, suspected disability/ purpose of evaluation:

MANIFESTATION DETERMINATION

- A. Was the conduct in question caused by the student's disability or had a direct and substantial relationship to the student's disability? Yes No
- B. Was the conduct in question a direct result of the school's failure to implement the student's IEP or 504 plan? Yes No (If yes, the LEA must take immediate steps to ensure that all services set forth in the child's IEP are provided, consistent with the child's needs as identified in the IEP)

Is the conduct in question a manifestation of the student's disability? Yes No

(If either a or b is yes, the conduct in question is considered a manifestation of the student's disability and the student must be returned to the placement from which he or she was removed as part of the disciplinary action, with two exceptions: if the behavioral infraction involved special circumstances (see link below for more information); or if the parents and LEA agree to change the child's placement as part of the modification of the

BIP. The team should conduct a FBA and create a BIP, unless one has been recently completed examining similar conduct. In such cases, consider if any revisions need to be made to the BIP.)

If all questions are answered, no, the conduct is not a manifestation and the student may be disciplined in a manner consistent with his or her non-disabled peers; however, the student must continue to receive FAPE (the student must have access, in another setting, to special education services and access to the general education curriculum during the course of the suspensions/ expulsion).

*Refer to: <http://www.parentcenterhub.org/manifestation/> and <http://www.parentcenterhub.org/disciplineregs/> for more information

SIGNATURES

Role: Print Name	Signature	Agree	Disagree	Date
Parent/guardian:				
General education teacher				
Special education teacher				
School administrator/ LEA designee				
Student (18 or older)				
Interpreter of evaluation/school psychologist				
Other				
Other:				

The Notice of Procedural Safeguards were given and explained to the parent(s)/ guardian(s):

Yes No

Date Reviewed: _____ Signature of Person Explaining Rights _____

If Applicable

I give permission for a Functional Behavior Assessment to be conducted to help develop a Behavior Intervention Plan. Yes No

Parent Signature _____