#### Ogdensburg City School District Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020

#### Meeting Date: 05/28/2020

		ID	DOB	Gender	Grade	Disat		12
		000077568	10/09/2014	F	JK	•	h/Language Impairment	
5/28/20 -	- Annual Re	eview				Outco	ome: IEP Change: Remain	ns Classified
Primary	Start Date	Fut End Date Serv End Date	/ice		Frq/Cyl/N	inutes	Delivery Recommendation	School/Location
<b>CURREN</b> Yes	<b>T YEAR</b> 06/02/2020	06/26/2020 Spe	ech		6/6 Day (	Sycle/30	Individual	Madill Elementary (PS)/Speech Classroom
	<u>Minutes</u>	Continue classificat	ion of Speech/Lan	guage Impairment				
		Recommendation the Individual Speech s			es			
		12 Month Extended None	Year Recomment	dation:				
		Fall 2020 Recomme Group Speech serv		cle for 30 minutes				
5/28/20 -	- Annual Re	000077548	05/28/2014	М	JK		h/Language Impairment ome: IEP Change: Remair	ns Classified
ommittee: CSE S	ubcommittee						_	
Primary	Start Date	Fut End Date Serv End Date	/ice		Frq/Cyl/N	inutes	Delivery Recommendation	School/Location
<b>CURREN</b> Yes	T YEAR 06/02/2020	06/26/2020 Spe	ech		3/6 Day (	Sycle/30	Individual	Madill Elementary (PS)/Speech Classroom
	06/02/2020	06/26/2020 Spe	ech		3/6 Day (	ycle/30	Group	Madill Elementary (PS)/Speech Classroom
	<u>Minutes</u>	Continue classificat	ion of Speech/Lan	guage Impairment				
		Recommendation the Individual Speech s			es			
	T				144/0000 0.40			Dava 4 - ( 40

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 05/28/2020

		ID	DOB	Gender	Grade	Disat	bility		12M
		Group Speech serv	vices 3 times per cy	cle for 30 minutes					
		12 Month Extended None	d Year Recommend	lation:					
		Fall 2020 Recomm Group Speech serv	endation: <i>v</i> ices 6 times per cy	cle for 30 minutes					
15/29/20	- Annual R	000030121	09/07/2013	М	К		Health Impairment ome: IEP Change: Remain		x
Committee: CSE S		eview				Oute	ome. ILF Ghange. Remain		
Primary	Start Date	Fut End Date Ser End Date	vice		Frq/Cyl/M	inutes	Delivery Recommendation	School/Location	
CURREN	IT YEAR								
Yes	06/02/2020	06/26/2020 Occ	cupational Therap	у	2/6 Day C	ycle/30	Individual	Madill Elementary (BL)/Provid Location	der
	<u>Minutes</u>	Continue classificat	tion of Other Health	Impairment					
		Recommendation t Individual Occupati	hrough June 2020: ional Therapy servio		le for 30 minutes				
		12 Month Extended None	d Year Recommend	lation:					
		Fall 2020 Recomm Group Occupationa	endation: al Therapy services	1 time per cycle fo	r 30 minutes				
		000018013	10/18/2001	М	012	Learnir	ng Disability		
	- Annual R					Outco	ome: IEP Change: Remain	ns Classified	
Committee: Comm		Fut End Date Ser			Frq/Cyl/M		Delivery Recommendation	School/Location	

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 05/28/2020

		ID		OB	Gender	Grade	Disab	ility	12N
Yes	06/02/2020	06/26/2020	Resource	Room		3/6 Day Cy	cle/40		OFA Grades 9-12 (PS)/Resource Room
	<u>Minutes</u>	Continue clas	sification of	Learning Disal	bility				
			om services ducation serv	6 times per cy vices 6 times p	cle for 40 minutes er cycle for 150 mir	nutes in the area	of Buildin	g Trades	
	- Annual Re		)109 Of	5/07/2001	М	012		ealth Impairment me: IEP Change: Remain	s Classified
Primary	Start Date	Fut End Date End Date	Service			Frq/Cyl/Mir	nutes	Delivery Recommendation	School/Location
CURREN Yes		06/26/2020	Resource	Room		6/6 Day Cy	cle/40	Mathematics	OFA Grades 9-12 (PS)/Resource Room
	<u>Minutes</u>	Continue clas	sification of	Other Health I	mpairment				
		Recommenda Resource Ro			cle for 40 minutes				
05/29/20	- Annual Re	000077	7237 1 <sup>7</sup>	1/06/2014	М	К	Autism	me: IEP Change: Remain	on Classified
Committee: CSE S		3VIEW					Outco	me. IEF Change. Kemain	
Primary		Fut End Date End Date	Service			Frq/Cyl/Mir	nutes	Delivery Recommendation	School/Location
CURREN									
CURREN Yes		06/03/2020	Ratio 6:1:	:1		6/6 Day Cy	cle/210	6 students/1 teacher/1 aide	Madill Elementary (PS)/6:1:1 Classroom
				1 onal Therapy		6/6 Day Cy 2/6 Day Cy		6 students/1 teacher/1 aide	

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 05/28/2020

	ID	DOB	Gender	Grade	Disabi	ility	12Mth
09/04/2019	06/03/2020	Speech		6/6 Day C	ycle/30	Individual	Madill Elementary (PS)/Speech Classroom
09/04/2019	06/03/2020	Physical Therapy		2/Weekly/	'30	Individual	Madill Elementary (BL)/Provider Location
Minutes	Continue clas	sification of Autism					
	District 6:1:1 / Individual Spe Individual Occ Individual Phy Individual Sup Behavioral Co Special Trans 12 Month Exte District 6:1:1 / Individual Spe Individual Spe	ation through June 2020 ABA classroom placeme eech services 6 times pe cupational Therapy services oplementary School Per onsultant services 1200 oportation services ended Year Recommen ABA classroom placeme oplementary School Per onsultant services 2 times pe oplementary School Per onsultant services 120 r commendation: ABA classroom placeme eech services 6 times pe cupational Therapy services oplementary School Per oscillant services 6 times per cupational Therapy services oplementary School Per onsultant services 600 r opsultant services 600 r	ent 6 times per cycle er cycle for 30 minut vices 2 times per cyc 2 times per week for rsonnel services 6 tir minutes per year ndation: ent 5 times per week er week for 30 minut rsonnel services 6 tir ninutes for the sumn ent 6 times per cycle er cycle for 30 minut vices 2 times per cyc 2 times per week for rsonnel services 6 tir	es le for 30 minutes r 30 minutes nes per cycle for es nes per cycle for ner e for 280 minutes es le for 30 minutes r 30 minutes	150 minute	S	

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 05/29/2020

Dutcome: Refer to Special Education       Primary     Start Date End Date     Frid/Cyl/Minutes     Delivery Recommendation     School/Location Coordinating Service Provide       CURRENT YEAR Yes     09/04/2019     06/03/2020     Special Education Itinerant     3/Weekly/60     Direct - Individual     Home Base - Preschool/Hom Setting/MORTH COAST OT, AND SLP, PLIC       09/04/2019     06/03/2020     Special Education Itinerant     3/Weekly/60     Individual     John F Kennedy Elementary/Special Classroom/COUNTY OF ST LAWRENCE       Minutes     Continue classification of Preschool Student with a Disability Recommendation through June 2020: Special Education Itinerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 30 minutes     Home Base - Preschool/Student with a Disability Recommendation: Special Education Itinerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 30 minutes       12 Month Extended Year Recommendation: Special Education Itinerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 30 minutes     Start Date Second Education Itinerant Teacher services 3 times per week for 30 minutes       000077423     07/29/2015     M     P     Preschool Student with a Disability   As of 09/01/20: SpeciAl-Language Impairment       021202- Program Review Contraction     000077423     07/29/2015     M     P     Preschool Student with a Disability   As of 09/01/20: SpeciAl-Language Impairment       021202- Start Date Individual Speech S			ID 0000774	<b>DOB</b> 423 07/29/2015	Gender M	Grade P	Disa		1 X
Minutes       Continue classification of Preschool Student with a Disability         Minutes       Continue classification of Preschool Student with a Disability         Recommendation linerant Teacher services 3 times per week for 60 minutes individual Speech services 2 times per week for 60 minutes       John F Kennedy Elementation         000077423       07/29/2015       M       P         Preschool Student with a Disability Individual Speech services 2 times per week for 60 minutes individual Speech services 2 times per week for 30 minutes       School/Location Elementation: Special Education timerant Teacher services 3 times per week for 60 minutes         0000077423       07/29/2015       M       P       Preschool Student with a Disability J As of 09/01/20: Speech/Language Impairment         0000077423       07/29/2015       M       P       Preschool Student with a Disability J As of 09/01/20: Speech/Language Impairment         0000077423       07/29/2015       M       P       Preschool Student with a Disability J As of 09/01/20: Speech/Language Impairment         0000077423       07/29/2015       M       P       Preschool Student with a Disability J As of 09/0	15/29/20 -	Annual R		+23 07/29/2015	IVI	F		•	
End Date         Coordinating Service Provide           CURRENT YEAR         3/Weekly/60         Direct - Individual         Home Base - Preschool/Hom Setting/NORTH COAST OT AND SLP, PLLC           09/04/2019         06/03/2020         Special Education Itinerant         3/Weekly/60         Direct - Individual         Home Base - Preschool/Hom Setting/NORTH COAST OT AND SLP, PLLC           09/04/2019         06/03/2020         Speech         2/Weekly/30         Individual         John F Kennedy Elementary/Speech Classroom/COUNTY OF ST LAWRENCE           Minutes         Continue classification of Preschool Student with a Disability         Recommendation through June 2020: Special Education Itinerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 30 minutes         12 Month Extended Year Recommendation: Special Education Itinerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 30 minutes           000077423         07/29/2015         M         P         Preschool Student with a Disability ] As of 09/01/20: Speech/Language Impairment           0000077423         07/29/2015         M         P         Preschool Student with a Disability ] As of 09/01/20: Speech/Language Impairment           0000077423         07/29/2015         M         P         Preschool Student with a Disability ] As of 09/01/20: Speech/Language Impairment           0000077423         07/29/2015         M         P         Pres							Ould		
Yes     09/04/2019     06/03/2020     Special Education Itinerant     3/Weekly/60     Direct - Individual     Home Base - Preschool/Hom Setting/NORTH COAST OT, AND SLP, PLC       09/04/2019     06/03/2020     Speech     2/Weekly/30     Individual     John F Kennedy Elementary/Speech Classroom/COUNTY OF ST LAWRENCE       Minutes     Continue classification of Preschool Student with a Disability     Recommendation through June 2020: Special Education Itinerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 30 minutes     12 Month Extended Year Recommendation: Special Education Itinerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 60 minutes     12 Month Extended Year Recommendation: Special Education Itinerant Teacher services 3 times per week for 60 minutes       000077423     07/29/2015     M     P     Preschool Student with a Disability   As of 09/01/20: Speech/Language Impairment       000077423     07/29/2015     M     P     Preschool Student with a Disability   As of 09/01/20: Speech/Language Impairment       000077423     07/29/2015     M     P     Preschool Student with a Disability   As of 09/01/20: Speech/Language Impairment       000077423     07/29/2015     M     P     Preschool Student with a Disability   As of 09/01/20: Speech/Language Impairment       0400000000000000000000000000000000000	Primary	Start Date		Service		Frq/Cyl/Mir	nutes	Delivery Recommendation	School/Location Coordinating Service Provider
09/04/2019 06/03/2020 Speech       2/Weekly/30       Individual       John F Kennedy Elementary/Speech Classroom/COUNTY OF ST LAWRENCE         Minutes       Continue classification of Preschool Student with a Disability       Recommendation through June 2020: Special Education timerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 60 minutes       Average (1)         12       Month Extended Year Recommendation: Special Education timerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 30 minutes       Special Education timerant Teacher services 3 times per week for 60 minutes         000077423       07/29/2015       M       P       Preschool Student with a Disability   As of 09/01/20: Speech/Language Impairment         000077423       07/29/2015       M       P       Preschool Student with a Disability   As of 09/01/20: Speech/Language Impairment         05/29/20 - Program Review       Outcome: IEP Change: Remains Classified         Primary       Start Date       Fut End Date       Frq/Cyl/Minutes       Delivery Recommendation Coordinating Service Provide         Yes       09/04/2019       06/03/2020       Special Education Itinerant       3/Weekly/60       Direct - Individual       Home Base - Preschool/Hom Setting/NORTH ECOAST OT,			/ /				_		
Minutes       Continue classification of Preschool Student with a Disability       Elementary/Spéech Classroom/COUNTY OF ST LAWRENCE         Minutes       Continue classification of Preschool Student with a Disability       Recommendation through June 2020: Special Education timerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 30 minutes       12 Month Extended Year Recommendation: Special Education timerant Teacher services 3 times per week for 60 minutes         12 Month Extended Year Recommendation: Special Education timerant Teacher services 3 times per week for 30 minutes       Note that the service 2 times per week for 30 minutes         000077423       07/29/2015       M       P       Preschool Student with a Disability   As of 09/01/20: Speech/Language Impairment         05/29/20 - Program Review       Outcome: IEP Change: Remains Classified         Primary       Start Date       Fut End Date       Service         Primary       Start Date       Fut End Date       Service         Primary       Start Date       Fut End Date       Service Provide         Curreent       Yes       09/04/2019       Special Education Itinerant       3/Weekly/60       Direct - Individual       Home Base - Preschool/Hor Setting/NORTH COAST OT /	Yes	09/04/2019	06/03/2020	Special Education I	tinerant	3/Weekly/6	0	Direct - Individual	Setting/NORTH COAST OT, P
Recommendation through June 2020: Special Education Itinerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 30 minutes         12 Month Extended Year Recommendation: Special Education Itinerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 30 minutes         000077423       07/29/2015       M       P       Preschool Student with a Disability   As of 09/01/20: Speech/Language Impairment         000077423       07/29/2015       M       P       Preschool Student with a Disability   As of 09/01/20: Speech/Language Impairment         05/29/20 - Program Review Contract Comment Comment       Outcome: IEP Change: Remains Classified         Primary       Start Date       Fut End Date       Service       Frq/Cyl/Minutes       Delivery Recommendation       School/Location Coordinating Service Provide         CURRENT YEAR Yes       09/04/2019       06/03/202       Special Education Itinerant       3/Weekly/60       Direct - Individual       Home Base - Preschool/Hom Setting/NORTH COAST OT,		09/04/2019	06/03/2020	Speech		2/Weekly/3	0	Individual	Elementary/Speech Classroom/COUNTY OF ST
Special Education Itinerant Teacher services 3 times per week for 30 minutes         Individual Speech services 2 times per week for 30 minutes         12 Month Extended Year Recommendation:         Special Education Itinerant Teacher services 3 times per week for 60 minutes         Individual Speech services 2 times per week for 30 minutes         Refer to the Committee on Special Education         000077423       07/29/2015         M       P         Preschool Student with a Disability           As of 09/01/20:         Speech/Language Impairment         Outcome:       IEP Change: Remains Classified         Primary       Start Date         Pureschool Student VEAR       School/Location         Yes       09/04/2019       06/03/2020         Special Education Itinerant       3/Weekly/60       Direct - Individual		<u>Minutes</u>	Continue class	sification of Preschool	Student with a Dis	sability			
Special Education Itinerant Teacher services 3 times per week for 60 minutes Individual Speech services 2 times per week for 30 minutes Refer to the Committee on Special Education 000077423 07/29/2015 M P Preschool Student with a Disability   As of 09/01/20: Speech/Language Impairment Outcome: IEP Change: Remains Classified Primary Start Date Fut End Date Service End Date Service Provide CURRENT YEAR Yes 09/04/2019 06/03/2020 Special Education Itinerant 3/Weekly/60 Direct - Individual Home Base - Preschool/Hom Setting/NORTH COAST OT,			Special Educa	tion Itinerant Teacher	services 3 times p		es		
000077423       07/29/2015       M       P       Preschool Student with a Disability   As of 09/01/20: Speech/Language Impairment         05/29/20 - Program Review Committee on Special Education       Outcome: IEP Change: Remains Classified         0100000000000000000000000000000000000			Special Educa	tion Itinerant Teacher	services 3 times p		es		
As of 09/01/20: Speech/Language Impairment Outcome: IEP Change: Remains Classified Primary Start Date Fut End Date Service End Date End Date Frq/Cyl/Minutes Delivery Recommendation School/Location Coordinating Service Provide COURRENT YEAR Yes 09/04/2019 06/03/2020 Special Education Itinerant 3/Weekly/60 Direct - Individual Home Base - Preschool/Hom Setting/NORTH COAST OT,			Refer to the Co	ommittee on Special E	ducation				
Committee: Committee: Committee on Special Education         Primary       Start Date       Fut End Date       Service       Frq/Cyl/Minutes       Delivery Recommendation       School/Location         CURRENT YEAR       Yes       09/04/2019       06/03/2020       Special Education Itinerant       3/Weekly/60       Direct - Individual       Home Base - Preschool/Hom Setting/NORTH COAST OT,			0000774	423 07/29/2015	М	Ρ	As of	09/01/20:	x
End Date       Coordinating Service Provide         CURRENT YEAR       Yes       09/04/2019 06/03/2020       Special Education Itinerant       3/Weekly/60       Direct - Individual       Home Base - Preschool/Hom Setting/NORTH COAST OT,	<b>)5/29/20 -</b> Committee: Committe	Program ee on Special Educat	Review				Outc	ome: IEP Change: Remain	s Classified
Yes       09/04/2019       06/03/2020       Special Education Itinerant       3/Weekly/60       Direct - Individual       Home Base - Preschool/Hom         Setting/NORTH COAST OT,       Setting/NORTH COAST OT,       Setting/NORTH COAST OT,       Setting/NORTH COAST OT,	Primary	Start Date		Service		Frq/Cyl/Mir	nutes	Delivery Recommendation	School/Location Coordinating Service Provider
Setting/NORTH COAST OT,							_		
	Yes	09/04/2019	06/03/2020	Special Education I	tinerant	3/Weekly/6	0	Direct - Individual	Setting/NORTH COAST OT, P
t 2020 ClearTrack200. All rights reserved. Printed: 6/11/2020 8:12 AM Page 5 of 4									Page <b>5</b> of <b>43</b>

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 05/29/2020

	ID	DOB	Gender	Grade	Disab	ility	121
09/04/2019	06/03/2020 Spee	ech		2/Weekly	/30	Individual	John F Kennedy Elementary/Speech Classroom/COUNTY OF ST LAWRENCE
<u>Minutes</u>	Eligible for classifica Fall 2020 Recomme Direct Consultant Te Individual Speech se	endation: eacher services 6 t	times per cycle for	30 minutes in the	area of EL	A	
05/29/20 - Annual Re Committee: CSE Subcommittee	000077465 eview	12/19/2013	F	К	•	/Language Impairment	s Classified
	Fut End Date Serv End Date	vice		Frq/Cyl/M	inutes	Delivery Recommendation	School/Location
CURRENT YEARYes09/04/2019	06/17/2020 Spee	ech		3/6 Day C	cycle/30	Group	Kennedy Elementary (PS)/Speed Classroom
<u>Minutes</u>	Continue classificati Recommendation th Group Speech servi 12 Month Extended None Fall 2020 Recomme Group Speech servi	nrough June 2020: ices 3 times per cy Year Recommenc endation:	cle for 30 minutes				
	000077500	09/10/2014	М	JK	•	/Language Impairment	
05/29/20 - Annual Re Committee: CSE Subcommittee	view				Outco	ome: IEP Change: Remair	IS Classified

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 05/29/2020

		ID	DOB	Gender	Grade Dis	sability	12M
Primary	Start Date	Fut End Date End Date	Service		Frq/Cyl/Minutes	Delivery Recommendation	School/Location
CURREN	NT YEAR						
Yes	11/13/2019	06/17/2020	Ratio 6:1:1		6/6 Day Cycle/2	70 6 students/1 teacher/1 aide	Kennedy Elementary (PS)/6:1:1 Classroom
	11/13/2019	06/17/2020	Occupational Therapy		2/6 Day Cycle/3	0 Individual	Kennedy Elementary (BL)/Provide Location
	11/13/2019	06/17/2020	Speech		6/6 Day Cycle/3	0 Individual	Kennedy Elementary (PS)/Speech Classroom
	11/13/2019	06/17/2020	Physical Therapy		2/Weekly/30	Individual	Kennedy Elementary (BL)/Provide Location
	Minutes	Continue clas	sification of Speech/Langu	uage Impairment			
		Recommenda	tion through June 2020:				

District 6:1:1 classroom placement 6 times per cycle for 270 minutes Individual Speech services 3 times per cycle for 30 minutes Individual Occupational Therapy services 1 time per cycle for 30 minutes Individual Supplementary School Personnel services 6 times per cycle for 330 minutes Behavioral Consultant services 900 minutes per year

12 Month Extended Year Recommendation: District 6:1:1 classroom placement 5 times per week for 150 minutes Individual Speech services 2 times per week for 30 minutes Individual Supplementary School Personnel services 6 times per cycle for 150 minutes Behavioral Consultant services 120 minutes for the summer

М

Fall 2020 Recommendation: No changes

000023042

03/16/2004

05/29/20 - Annual Review

Learning Disability

Outcome: IEP Change: Remains Classified

Primary	Start Date	Fut End Date Service End Date	Frq/Cyl/Minutes	Delivery Recommendation	School/Location
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Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 05/29/2020

		ID	DOB	Gender	Grade	Disability	12Mth
CURRE	ENT YEAR						
Yes	09/04/2019	06/17/2020	Resource Room		6/6 Day	Cycle/40	OFA Grades 9-12 (PS)/Resource Room
	<u>Minutes</u>	Continue clas	ssification of Learning D	isability			
			ation through June 2020 nom services 6 times pe		tes		
		12 Month Ext None	tended Year Recommer	ndation:			
		Fall 2020 Re No changes	commendation:				

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/01/2020

		ID	544	DOB	Gender	Grade	Disak		12
		000077	511	03/05/2015	Μ	Р		nool Student with a Disability	Х
	- Annual Re						Outco	ome: IEP Change: Remain	s Classified
Primary	Start Date	Fut End Date End Date	Servic	e		Frq/Cyl/	Minutes	Delivery Recommendation	School/Location Coordinating Service Provider
	IT YEAR								
res	09/04/2019	06/17/2020	Ratio 8	3:1:1		5/Weekl	y/165	8 students/1 teacher/1 aide	John F Kennedy Elementary/8:1 Classroom/OGDENSBURG CIT SD
	09/04/2019	06/17/2020	Speec	h		3/Weekl	y/30	Individual	John F Kennedy Elementary/Speech Classroom/COUNTY OF ST LAWRENCE
	<u>Minutes</u>	Continue clas	sification	of Preschool S	tudent with a Disa	bility			
		District 8:1:1 of	classroor eech serv	vices 3 times pe	imes per week for r week for 30 mini				
		District 8:1:1 of	classroor eech serv	vices 3 times pe	dation: imes per week for r week for 30 mini				
		Refer to the C	Committe	e on Special Ed	lucation				
		000077	511	03/05/2015	Μ	Ρ		nool Student with a Disability   09/01/20:	x
6/01/20 mmittee: Comm	- Program I	Review					Outco	ome: IEP Change: Remain	s Classified
	Start Date	Fut End Date	Servic	е		Frq/Cyl/	Minutes	Delivery Recommendation	School/Location

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/01/2020

		ID	DOB	Gender	Grade [	Disability	12Mt
Yes	09/04/2019	06/17/2020	Ratio 8:1:1		5/Weekly/165	8 students/1 teacher/1 aide	John F Kennedy Elementary/8:1:1 Classroom/OGDENSBURG CITY SD
	09/04/2019	06/17/2020	Speech		3/Weekly/30	Individual	John F Kennedy Elementary/Speech Classroom/COUNTY OF ST LAWRENCE
	<u>Minutes</u>	Eligible for cla	assification of Autism				
		Adaptive Phy Individual Spe Social Worke Individual Sup Behavioral Co Indirect Spee Special Trans	sroom placement 5 times sical Education services eech services 4 times per r services 1 time per mo oplementary School Per onsultant services 120 n ch Consultant services sportation services Therapy Evaluation	4 times per week for er week for 30 minut onth for 60 minutes sonnel services 5 tir ninutes per week	or 30 minutes tes nes per week for 390 30 minutes	minutes Preschool Student with a Disability	
		000077	'577 09/05/2015	F		Procobool Student with a Disability	
			011 00/00/2010	I		,	
	• Annual Re	eview	00,00,2010	I		Dutcome: IEP Change: Remai	ns Classified
	ttee on Preschool Spec	eview				Outcome: IEP Change: Remai	ns Classified School/Location Coordinating Service Provider
mmittee: Commi Primary CURREN	Start Date	Fut End Date End Date	Service		Frq/Cyl/Minute	Dutcome: IEP Change: Remained attemption Delivery Recommendation	School/Location Coordinating Service Provider
mmittee: Commi	ttee on Preschool Spece	Fut End Date End Date			C	Outcome: IEP Change: Remai	School/Location

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/01/2020

		ID	DOB	Gender	Grade	Disability	12M
	09/23/2019	06/26/2020	Occupational Thera	ру	2/Weekly/30	Individual	John F Kennedy Elementary/Kennedy School/OGDENSBURG CITY SD
	09/23/2019	06/26/2020	Physical Therapy		2/Weekly/30	Individual	John F Kennedy Elementary/Kennedy School/OGDENSBURG CITY SD
	<u>Minutes</u>	Continue clas	sification of Preschool S	Student with a Disa	bility		
		District 12:1:1 Individual Oct Individual Oct Individual Phy Special Trans 12 Month Ext District 12:1:1 Individual Oct Individual Oct Individual Phy Special Trans	ation through June 2020 I Integrated classroom p eech services 2 times pe cupational Therapy 2 tim ysical Therapy 2 times p sportation services ended Year Recommen I Integrated classroom p eech services 2 times pe cupational Therapy 1 tim ysical Therapy 1 time pe sportation services	blacement 5 times p er week for 30 minu hes per week for 30 ber week for 30 minu dation: blacement 5 times p er week for 30 minu he per week for 30 minu	utes ) minutes jutes per week for 150 min utes minutes		
6/01/20 .	- Program I	000077 Roview	7577 09/05/2015	F	Ρ	Preschool Student with a Disability   As of 09/01/20: Speech/Language Impairment Outcome: IEP Change: Remain	ns Classified
	ttee on Special Educat	ion					
Primary		Fut End Date End Date	Service		Frq/Cyl/Minu	Ites Delivery Recommendation	School/Location Coordinating Service Provider
<b>CURREN</b> Yes		06/26/2020	Ratio 12:1:1 Integrat	ted Setting	5/Weekly/16	5 12 students/1 teacher/1 aide	John F Kennedy Elementary/12:1: Classroom/OGDENSBURG CITY

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/01/2020

	ID	DOB	Gender	Grade	Disa	ability	12Mth
09/23/2019 0	6/26/2020	Speech		2/Weekl	y/30	Individual	John F Kennedy Elementary/Kennedy School/OGDENSBURG CITY SD
09/23/2019 0	6/26/2020	Occupational Therapy	/	2/Weekl	y/30	Individual	John F Kennedy Elementary/Kennedy School/OGDENSBURG CITY SD
09/23/2019 0	06/26/2020	Physical Therapy		2/Weekl	y/30	Individual	John F Kennedy Elementary/Kennedy School/OGDENSBURG CITY SD

Minutes Eligible for classification of Speech/Language Impairment

Fall 2020 Recommendation:

Direct Consultant Teacher services 6 times per cycle for 30 minutes in the area of ELA

Individual Speech services 3 times per cycle for 30 minutes

Group Speech services 3 times per cycle for 30 minutes

Individual Occupational Therapy services 1 time per cycle for 30 minutes

Group Occupational Therapy services 1 time per cycle for 30 minutes

Individual Physical Therapy services 2 times per week for 30 minutes

Special Transportation services

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/03/2020

		ID	<b>DOB</b>	Gender	Grade	Disab		121
		00002617	4 10/02/2007	М	006		/Language Impairment	<b>.</b>
06/03/20 Committee: CSE S	- Annual R	eview				Outco	ome: IEP Change: Remair	is Classified
Primary	Start Date	Fut End Date S End Date	Service		Frq/Cyl/M	inutes	Delivery Recommendation	School/Location
CURREN	T YEAR							
Yes	09/04/2019	05/18/2020 F	Ratio 15:1		6/6 Day C	ycle/360	15 students/1 teacher/1 aide	Kennedy Elementary (PS)/15:1 Classroom
	09/04/2019	05/18/2020 \$	speech		3/6 Day C	ycle/30	Group	Kennedy Elementary (PS)/Speec Classroom
	<u>Minutes</u>	Continue classif	ication of Speech/Lar	nguage Impairmen	t			
		District 15:1 clas	n through June 2020 sroom placement 6 t ervices 3 times per c	imes per cycle for				
		12 Month Exten None	ded Year Recommen	dation:				
		Direct Consultar	nmendation: sroom placement 6 t it Teacher services 6 ervices 2 times per c	times per cycle for	r 40 minutes in the	area of sci	ence	
		00002904	5 12/06/2010	М	003	Learnin	g Disability	
06/03/20 Committee: CSE S	- Annual R	eview				Outco	ome: IEP Change: Remain	ns Classified
Primary	Start Date	Fut End Date S End Date	Service		Frq/Cyl/M	inutes	Delivery Recommendation	School/Location
CURREN			Ratio 12:1:1		6/6 Day C	vcle/330	12 students/1 teacher/1	Kennedy Elementary (PS)/12:1:1
CURREN Yes		07/01/2020 F	auo 12.1.1			<i>j</i> 0.0,000	aide	Classroom
	09/04/2019		Speech		6/6 Day C		aide Individual	Classroom Kennedy Elementary (PS)/Speec Classroom

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/03/2020

		ID		DOB	Gende	er Grade	Disab	ility	12N			
	<u>Minutes</u>	Continue class	sification	of Learning	Disability							
		Individual Spe	classrooi ech servi	m placemer ices 6 times								
		12 Month Extended Year Recommendation: None										
		Individual Spe Group Speech	lassroom eech servi h services	placement ices 1 time p 3 times pe	6 times per cyc ber cycle for 30 r cycle for 30 n 100 minutes p	ninutes						
	- Annual Re	000029 eview	152	11/28/2011	М	002	•	/Language Impairment	ns Classified			
ommittee: CSE S	Subcommittee				М	002 Frq/Cyl/I	Outco		ns Classified School/Location			
Primary CURREN	Subcommittee	Fut End Date End Date		•	M	Frq/Cyl/I	Outco	ome: IEP Change: Remain				
ommittee: CSE S	Subcommittee Start Date	Fut End Date End Date 06/26/2020	Service	2:1:1	M	Frq/Cyl/l 6/6 Day	Outco Minutes	Delivery Recommendation	School/Location Kennedy Elementary (PS)/12:1:1			
Primary CURREN	Subcommittee Start Date NT YEAR 09/04/2019	Fut End Date End Date 06/26/2020	Service Ratio 1: Speech	2:1:1		Frq/Cyl/l 6/6 Day 3/6 Day	Outco Minutes Cycle/320	Delivery Recommendation 12 students/1 teacher/1 aide	School/Location Kennedy Elementary (PS)/12:1:1 Classroom Kennedy Elementary (PS)/Speech			
ommittee: CSE & Primary CURREN	Subcommittee Start Date NT YEAR 09/04/2019 09/04/2019	Eview Fut End Date End Date 06/26/2020 06/26/2020 Continue class Recommenda District 12:1:1	Service Ratio 12 Speech sification	2:1:1 of Speech/L igh June 20 m placemer	.anguage Impa 20:	Frq/Cyl/l 6/6 Day 3/6 Day airment	Outco Minutes Cycle/320	Delivery Recommendation 12 students/1 teacher/1 aide	School/Location Kennedy Elementary (PS)/12:1:1 Classroom Kennedy Elementary (PS)/Speech			

None

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020

Meeting Date: 06/03/2020

ID	DOB	Gender	Grade	Disability	12Mth
Fall 2020 Recom	nmendation:				
District 15:1 clas	sroom placement 6	times per cycle for	305 minutes		
Group Speech s	ervices 3 times per	cycle for 30 minutes	6		

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/05/2020

		ID	440	DOB	Gender			isabil			12
	Annual D	0000774	448	09/27/2015	F	Ρ			bl Student with a Disability		X
	- Annual Re						0	utcor	ne: Refer to Special Edu	cation	
Primary	Start Date	Fut End Date End Date	Servic	е			Frq/Cyl/Minute	S	Delivery Recommendation	School/Location Coordinating Service Provid	der
CURREN	IT YEAR									~	
Yes	09/04/2019	07/01/2020	Speec	h			2/Weekly/30		Individual	John F Kennedy Elementary/Speech Classroom/COUNTY OF S <sup>-</sup> LAWRENCE	т
	<u>Minutes</u>	Continue class	sification	of Preschool St	udent with a Disabil	ity					
				ugh June 2020: /ices 2 times per	week for 30 minute	s					
				ear Recommend /ices 2 times per	ation: week for 30 minute	s					
		Refer to the C	ommitte	e on Special Edu	ucation						
)6/05/20	- Program I	0000774 Roview	448	09/27/2015	F	Ρ	A Sp	s of 09 peech/l	ol Student with a Disability   /01/20: .anguage Impairment <b>ne: IEP Change: Remain</b>	e Classified	
Committee: Comm	nittee on Special Educat	ion					0	uicoi	ne. IEF Change. Remain		
Primary	Start Date	Fut End Date End Date	Servic	е			Frq/Cyl/Minute	S	Delivery Recommendation	School/Location Coordinating Service Provid	der
CURREN											
Yes	09/04/2019	07/01/2020	Speec	h			2/Weekly/30		Individual	John F Kennedy Elementary/Speech Classroom/COUNTY OF S LAWRENCE	т

<u>Minutes</u> Eligible for classification of Speech/Language Impairment

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020

Meeting Date: 06/05/2020

		ID		DOB	Gender	Grade	Disab	ility		12Mt
		Fall 2020 Rec Group Speec			ycle for 30 min	utes				
					-					
		000023	3267	06/11/2005	F	008	Other H	lealth Impairment		
	- Annual Re						Outco	me: IEP Change: Remain	ns Classified	
rimary		Fut End Date End Date	Service			Frq/Cyl/I	Minutes	Delivery Recommendation	School/Location	
URREN	T YEAR									
'es	09/04/2019	06/17/2020	Ratio 12	2:1:1		6/6 Day	Cycle/360	12 students/1 teacher/1 aide	Heuvelton Central School (PN)/12:1:1 Classroom	
	09/04/2019	06/17/2020	Counse	ling		1/6 Day	Cycle/30	Group	Heuvelton Central School (PN)/Counselors Office	
	09/04/2019	06/17/2020	Counse	ling		1/6 Day	Cycle/30	Individual	Heuvelton Central School (PN)/Counselors Office	
	<u>Minutes</u>	Continue clas	sification o	of Other Healt	h Impairment					
		Recommenda	ation throu	ah June 2020	:					
		BOCES 12:1:	1 classroo	m placement	6 times per cyc	cle for 360 minutes (I	Heuvelton)			
					per cycle for 3 r cycle for 30 m					
		Special Trans			1 UYUUU 101 JU 11	แกมเธอ				
		12 Month Exte None	ended Yea	ar Recommen	dation:					
		Individual Cou Group Couns	1 classroo unseling se eling servi	m placement ervices 1 time ces 1 time pe	6 times per cyo per cycle for 3 r cycle for 30 m		euvelton)			
		Special Trans	sportation s	services						

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/05/2020

		ID	DOB	Gender	Grade	Disabili			12N
	- Annual Re					Outcom	e: IEP Change: Remain	s Classified	
Primary		Fut End Date End Date	Service		Frq/Cyl/Min	utes [	Delivery Recommendation	School/Location	
CURREN (es		07/01/2020	Ratio 8:1:1		6/6 Day Cy	cle/360 8	8 students/1 teacher/1 aide	Kennedy Elementary (BL)/8:1 Classroom	:1
	09/04/2019	07/01/2020	Counseling		2/Weekly/3	0 I	Individual	Kennedy Elementary (BL)/Counselors Office	
	<u>Minutes</u>	Continue clas	sification of Emotional	Disturbance					
		BOCES 8:1:1 Individual Cou Individual Sup Behavioral Co Special Trans 12 Month Exte BOCES 8:1:1 Fall 2020 Rec BOCES 8:1:1 Individual Cou Individual Cou Individual Sup Behavioral Co	ation through June 202 classroom placement unseling services 2 tim oplementary School Pe- onsultant services 120 portation services ended Year Recommen- classroom placement unseling services 1 tim unseling services 1 tim oplementary School Pe- onsultant services 120 portation services 120	6 times per cycle for les per week for 30 m ersonnel services 6 ti 0 minutes per year endation: 6 times per cycle for le per week for 30 m le per week for 30 m ersonnel services 6 ti	ninutes imes per cycle for 36 r 360 minutes r 360 minutes inutes inutes				
	Annual Re     tree on Preschool Spe			Μ	P Frq/Cyl/Min	Outcom	Student with a Disability <b>ne: Refer to Special Edu</b> Delivery Recommendation		X
Primary	Chart Date								

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/05/2020

		ID		DOB	Gender	Grade	Disabi	ility		12N
Yes	09/04/2019	07/01/2020	Speec	h		2/Weekly	/30	Individual	Home Base - Preschool/ Setting/COUNTY OF ST LAWRENCE	Home
	<u>Minutes</u>	Continue clas	sification	of Preschool S	tudent with a Disabil	ity				
				ugh June 2020: ⁄ices 2 times pe	r week for 30 minute	S				
				ear Recommend vices 2 times pe	lation: r week for 30 minute	S				
		Refer to the 0	Committee	e on Special Ed	ucation					
		000077	7576	02/28/2015	М	Ρ	As of 0	ool Student with a Disability   9/01/20: /Language Impairment		x
							Sheech			
16/05/20 -	Program F	Review					•	me: IEP Change: Remain	ns Classified	
	Start Date	Review <sup>207</sup> Fut End Date End Date	e Service	9		Frq/Cyl/N	Outco		ns Classified School/Location Coordinating Service Pro	ovider
Primary CURREN	Start Date	Fut End Date End Date	Service Speec			Frq/Cyl/N 2/Weekly	Outco	me: IEP Change: Remain	School/Location	
Primary CURREN	Start Date	Fut End Date End Date 07/01/2020	Speec	h	nguage Impairment		Outco	me: IEP Change: Remain	School/Location Coordinating Service Pro Home Base - Preschool/ Setting/COUNTY OF ST	
Primary CURREN	Start Date <b>F YEAR</b> 09/04/2019	Fut End Date End Date 07/01/2020 Eligible for cla Fall 2020 Rea Individual Sp	Speecl assificatio commend eech serv	h on of Speech/La lation: vices 3 times pe	nguage Impairment r cycle for 30 minute rcle for 30 minutes	2/Weekly	Outco	me: IEP Change: Remain	School/Location Coordinating Service Pro Home Base - Preschool/ Setting/COUNTY OF ST	
Primary CURRENT Yes	Start Date <b>F YEAR</b> 09/04/2019	Fut End Date End Date 07/01/2020 Eligible for cla Fall 2020 Rea Individual Spi Group Speed	Speech assificatio commend eech serv h service	h on of Speech/La lation: vices 3 times pe	r cycle for 30 minute	2/Weekly	Outco finutes //30	me: IEP Change: Remain	School/Location Coordinating Service Pro Home Base - Preschool/ Setting/COUNTY OF ST LAWRENCE	

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/05/2020

		ID	DOB	Gender	Grade D	isability	12M			
Primary	Start Date	Fut End Date End Date	Service		Frq/Cyl/Minute	s Delivery Recommendatio	n School/Location			
URREN	TYEAR									
Yes	09/04/2019	06/17/2020	Consultant Teach	er	6/6 Day Cycle/	30 Direct - English	Madill Elementary (PS)/General Education Classroom			
	09/04/2019	06/17/2020	Speech		3/6 Day Cycle/	30 Individual	Madill Elementary (PS)/Speech Classroom			
	09/04/2019	06/17/2020	Speech		3/6 Day Cycle/	30 Group	Madill Elementary (PS)/Speech Classroom			
	<u>Minutes</u>	Continue clas	sification of Speech/L	anguage Impairmen	t					
		Direct Consul Individual Spe Group Speecl Special Trans	ation through June 20 Itant Teacher services eech services 3 times h services 3 times pe sportation services ended Year Recomm	s 6 times per cycle fo per cycle for 30 min r cycle for 30 minute		of English				
		None								
		Resource Roo Individual Spe Group Speec	commendation: om services 6 times p eech services 3 times h services 3 times pe sportation services	per cycle for 30 min	utes					
		000077	796 03/16/2012	2 M	002 O	ther Health Impairment				
6/05/20 • mmittee: CSE Si		Student/Inta	ke		0	Outcome: IEP Change: Remains Classified				
	<u>Minutes</u>	Continue clas	sification of Other He	alth Impairment						
		Recommenda	ation (5/4/20-6/26/20)							

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020

Meeting Date: 06/05/2020

IC	D DOB	Gender	Grade	Disability	12Mth
12 Mont None	th Extended Year Recom	mendation:			
	0 Decommondation				
	0 Recommendation: ce Room services 6 times	per cycle for 40 minute	es		

Individual Counseling services 1 time per cycle for 30 minutes

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/08/2020

		ID		OB	Gender	Grade	Disab		12M
		0000260	032 08	/07/2007	F	007	Intellect	tual Disability	
	- Annual Re ttee on Special Educati						Outco	ome: IEP Change: Remain	ns Classified
Primary	Start Date	Fut End Date End Date	Service			Frq/Cyl/N	linutes	Delivery Recommendation	School/Location
CURREN (es	<b>T YEAR</b> 09/04/2019	06/26/2020	Ratio 12:1	:1		6/6 Day (	Cycle/330	12 students/1 teacher/1 aide	OFA Grades 7-8 (BL)/12:1:1 Classroom
	09/04/2019	06/26/2020	Speech			3/Weekly	//30	Group	OFA Grades 7-8 (BL)/Speech Classroom
	09/04/2019	06/26/2020	Adaptive F	hysical Ed	ucation	3/6 Day (	Cycle/40		OFA Grades 7-8 (PS)/Gym/Pool
	09/04/2019	06/26/2020	Occupatio	nal Therap	y	1/Weekly	//30	Group	OFA Grades 7-8 (BL)/Provider Location
	<u>Minutes</u>	Continue class	sification of I	ntellectual D	lisability				
		Adaptive Phys Group Speech	1 classroom sical Education services 3 f ational Thera portation ser	placement 6 on services imes per we py services vices	3 times per cycle eek for 30 minute 1 time per week	es			
		12 MONUTEXLE		kecommend	auon.				
		Adaptive Phys Group Speech	classroom p sical Education services 2 f ational Thera	lacement 6 on services imes per we py services	times per cycle 3 times per cycle eek for 30 minute 1 time per week	e for 40 minutes es			
		000077		/13/2012	М				

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/08/2020

		ID	DOB	Gender	Grade	Disability	12
mmittee: CSE S	Subcommittee						
Primary	Start Date	Fut End Date End Date	Service		Frq/Cyl/Minut	es Delivery Recommenda	tion School/Location
URREN	IT YEAR						
(es	09/04/2019	07/01/2020	Resource Room		6/6 Day Cycle	e/40	Kennedy Elementary (PS)/Resource Room
	09/04/2019	07/01/2020	Skilled Nursing S	ervice	6/6 Day Cycle	e/15 Individual	Kennedy Elementary (PS)/Health Office
	<u>Minutes</u>	Continue clas	sification of Other He	ealth Impairment			
		Resource Roo Individual Skil Individual Sup Behavioral Co	ation through June 20 om Services 6 times lled Nursing services oplementary School F onsultant services 60 ended Year Recomm	per cycle for 40 min 6 times per cycle fo Personnel services 6 0 minutes per year		minutes	
		Resource Roo Individual Skil	commendation: om Services 6 times lled Nursing services onsultant services 60	6 times per cycle fo			
		000077	608 04/29/2016	6 F	P	Preschool Student with a Disability	x
	- Annual R	eview	000 04/29/2010	о г		Outcome: IEP Change: Rei	
rimary	Start Date	Fut End Date End Date	Service		Frq/Cyl/Minut	es Delivery Recommenda	tion School/Location Coordinating Service Provider
	NT YEAR						
(es	09/04/2019	07/01/2020	Speech		2/Weekly/30	Individual	John F Kennedy Elementary/Speech Classroom/COUNTY OF ST

**Board Action Sheet** 

Meeting Date Range From: 05/28/2020 to 06/10/2020

Meeting Date: 06/08/2020

	Minutes	ID Continue class	DOB sification of Prescho	Gender ol Student with a Dis		Disability	121
		Recommendat	tion through June 20				
					nules		
			ended Year Recomn ech services 2 times	nendation: s per week for 30 mi	nutes		
		Fall 2020 Reco Individual Spee		s per week for 30 mi	nutes		
		0000776	604 02/08/201	6 M	Р	Preschool Student with a Disability	x
	- Annual Re					Outcome: IEP Change: Rem	ains Classified
Primary		Fut End Date End Date	Service		Frq/Cyl/Minu	tes Delivery Recommendation	on School/Location Coordinating Service Provider
CURREN Yes	I <b>T YEAR</b> 09/04/2019	07/01/2020	Speech		2/Weekly/30	Individual	Home Base - Preschool/Home Setting/COUNTY OF ST LAWRENCE
	<u>Minutes</u>	Continue class	sification of Prescho	ol Student with a Di	sability		
		Decommondat	tion through June 20		nutes		
			ech services 2 times	s per week for 50 m	nutes		
		Individual Spee 12 Month Exter	ended Year Recomn				
		Individual Spee 12 Month Exter Individual Spee Fall 2020 Reco	ended Year Recomn ech services 2 time: ommendation:	nendation:	nutes		
		Individual Spee 12 Month Exter Individual Spee Fall 2020 Reco	ended Year Recomn ech services 2 times ommendation: ech services 3 times	nendation: s per week for 30 mi s per week for 30 mi	nutes nutes	Preschool Student with a Disability	X

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/08/2020

		ID	DOB	Gender	Grade	Disability	12N
Primary	Start Date	Fut End Date End Date	Service		Frq/Cyl/Minu	tes Delivery Recommendat	ion School/Location Coordinating Service Provider
URREN	T YEAR						
Yes	01/06/2020	06/26/2020	Speech		2/Weekly/30	Individual	Madill Elementary (preschool)/Provider Location/COUNTY OF ST LAWRENCE
	<u>Minutes</u>	Continue class	sification of Prescho	ol Student with a Disa	bility		
			tion through June 20 ech services 2 times	020: s per week for 30 minu	utes		
			ended Year Recomm ech services 2 times	nendation: s per week for 30 minu	utes		
		·	ech services 2 times	s per week for 30 minu		Procehool Student with a Disphility	
	- Annual Re	Individual Spe 0000776	ech services 2 times		Ρ	Preschool Student with a Disability Outcome: IEP Change: Rer	nains Classified
mmittee: Commit	ttee on Preschool Spe	Individual Spe 0000776	ech services 2 time: 650 12/26/2010		Ρ	Outcome: IEP Change: Rer	ion School/Location
ommittee: Commit Primary	ttee on Preschool Spece	Individual Spe 0000776 eview cial Education Fut End Date	ech services 2 time: 650 12/26/2010		Ρ	Outcome: IEP Change: Rer	
ommittee: Commit	ttee on Preschool Spece	Individual Spe 0000776 eview cial Education Fut End Date End Date	ech services 2 time: 650 12/26/2010	6 M	Ρ	Outcome: IEP Change: Rer	ion School/Location
mmittee: Commit Primary CURREN Yes	Start Date	Individual Spe 0000776 Eview cial Education Fut End Date End Date 06/26/2020	ech services 2 times 650 12/26/2010 Service	6 M	P Frq/Cyl/Minu	Outcome: IEP Change: Ren Ites Delivery Recommendat Direct - Individual	ion School/Location Coordinating Service Provider Home Base - Preschool/Home Setting/CHILDREN'S THERAPY
ommittee: Commit Primary CURREN Yes	ttee on Preschool Spee Start Date T YEAR 12/03/2019	Individual Spe 0000776 eview cial Education Fut End Date End Date 06/26/2020 06/26/2020	ech services 2 times 650 12/26/2010 Service Special Education Speech	6 M	P Frq/Cyl/Minu 2/Weekly/60	Outcome: IEP Change: Ren Ites Delivery Recommendat Direct - Individual	ion School/Location Coordinating Service Provider Home Base - Preschool/Home Setting/CHILDREN'S THERAPY NETWORK Home Base - Preschool/Home Setting/COUNTY OF ST

**Board Action Sheet** 

Meeting Date Range From: 05/28/2020 to 06/10/2020

Meeting Date: 06/08/2020

		ID Individual Spe	DOB eech services 1 t	Gender ime per week for 60 n	Grade ninutes	Disab	bility	12Mt
		Special Educa Individual Spe Fall 2020 Rec Special Educa	eech services 2 t commendation: ation Itinerant Te	ommendation: acher services 2 time imes per week for 30 acher services 2 time imes per week for 30	minutes s per week for 60 n			
	- Annual Re littee on Preschool Spec		7620 04/22/	2016 M	Р		ool Student with a Disability ome: IEP Change: Remain	ns Classified
Primary		Fut End Date End Date	e Service		Frq/Cy	/I/Minutes	Delivery Recommendation	School/Location Coordinating Service Provider
CURREN	IT YEAR 10/07/2019	06/26/2020	Speech		3/Wee	ekly/30	Individual	John F Kennedy Elementary/Provider Location/COUNTY OF ST LAWRENCE
Yes	11/04/2019	06/26/2020	Ratio 12:1:1 I	ntegrated Setting	5/Wee	kly/165	12 students/1 teacher/1 aide	John F Kennedy Elementary/Ratio 12:1:1 Integrated Setting [1211I]/OGDENSBURG CITY SD
	<u>Minutes</u>	Continue clas	ssification of Pres	chool Student with a	Disability			
		District 12:1:1		e 2020: sroom placement 5 tin imes per week for 30		65 minutes		
		District 12:1:1		ommendation: sroom placement 5 tin imes per week for 30		50 minutes		
			commendation: 1 Integrated class	sroom placement 5 tin	nes per week for 16	65 minutes		

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/08/2020

		ID	DOB	Gender	Grade	Disability	1
	- Annual Re		01/22/2016	F	Ρ	Preschool Student with a Disability Outcome: IEP Change: Re	
Primary		Fut End Date End Date	Service		Frq/Cyl/N	Ainutes Delivery Recommenda	ation School/Location Coordinating Service Provider
CURREN Yes	IT YEAR 10/07/2019	06/26/2020	Ratio 12:1:1 Integr	ated Setting	5/Weekly	//165 12 students/1 teacher/ aide	
	10/07/2019	06/26/2020	Speech		3/Weekly	//30 Individual	John F Kennedy Elementary/Kennedy School/OGDENSBURG CITY S
	10/22/2019	06/26/2020	Occupational Ther	ару	2/Weekly	//30 Individual	John F Kennedy Elementary/Kennedy School/OGDENSBURG CITY S
	<u>Minutes</u>	Recommendat District 12:1:1 Individual Spee Individual Occu 12 Month Exte District 12:1:1 Individual Spee	ification of Preschool ion through June 202 Integrated classroom ech services 3 times upational Therapy se Integrated classroom ech services 2 times upational Therapy se ommendation:	0: placement 5 time per week for 30 m vices 2 times per ndation: placement 5 time per week for 30 m	s per week for 165 r inutes week for 30 minutes s per week for 150 r inutes	s minutes	
	- Annual Re		152 01/11/2016	Μ	Ρ	Preschool Student with a Disability Outcome: IEP Change: Re	

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/08/2020

		ID	DOB	Gender	Grade	Disabi	lity	12Mth
Primary	Start Date	Fut End Date End Date	Service		Frq/Cyl/Mi	inutes	Delivery Recommendation	School/Location Coordinating Service Provider
CURREN	NT YEAR							
Yes	09/04/2019	07/01/2020	Ratio 12:1:1 Integ	rated Setting	5/Weekly/	165	12 students/1 teacher/1 aide	John F Kennedy Elementary/12:1:1 Classroom/OGDENSBURG CITY SD
	09/04/2019	07/01/2020	Speech		3/Weekly/	30	Individual	John F Kennedy Elementary/Speech Classroom/OGDENSBURG CITY SD
	11/05/2019	06/26/2020	Occupational The	rapy	2/Weekly/	30	Individual	John F Kennedy Elementary/Provider Location/OGDENSBURG CITY SD

#### Minutes Continue classification of Preschool Student with a Disability

Recommendation through June 2020: District 12:1:1 Integrated classroom placement 5 times per week for 165 minutes Individual Speech services 3 times per week for 30 minutes Individual Occupational Therapy services 2 times per week for 30 minutes Special Transportation services

12 Month Extended Year Recommendation: District 12:1:1 Integrated classroom placement 5 times per week for 150 minutes Individual Occupational Therapy services 1 time per week for 30 minutes Special Transportation services

Fall 2020 Recommendation: No changes

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/09/2020

6/09/20	- Program	ID 000077 Review	<b>DOB</b> 7391 02/16/2015	Gender F	<b>Grade</b> P	Disability Preschool Student with a Disability   As of 09/01/20: Speech/Language Impairment Outcome: IEP Change: Rem	12M ains Classified
mmittee: Comm Primary	nittee on Special Education	Fut End Date	Service		Frq/Cyl/M	inutes Delivery Recommendation	
		End Date					Coordinating Service Provider
Yes		06/26/2020	Ratio 8:1:1		5/Weekly	<pre>/165 8 students/1 teacher/1 a</pre>	ide John F Kennedy Elementary/8:1:1 Classroom/OGDENSBURG CITY SD
	03/27/2020	06/26/2020	Occupational Thera	ру	2/Weekly	'30 Individual	John F Kennedy Elementary/Kennedy School/OGDENSBURG CITY SD
	03/27/2020	06/26/2020	Physical Therapy		1/Weekly	'30 Individual	John F Kennedy Elementary/Kennedy School/OGDENSBURG CITY SD
	03/27/2020	06/26/2020	Speech		3/Weekly	/30 Individual	John F Kennedy Elementary/Kennedy School/OGDENSBURG CITY SD
	Minutes	Eligible for cla	assification of Speech/La	anguage Impairm	ient		
		District 6:1:1 A Individual Spe Individual Occ Individual Phy Individual Sup Behavioral Co	commendation: ABA classroom placeme eech services 6 times pe cupational Therapy services splementary School Per onsultant services 600 n sportation services	er cycle for 30 mi ices 2 times per o 2 times per week sonnel services 6	nutes cycle for 30 minutes : for 30 minutes		
		000077	7415 07/25/2015	М	Р	Preschool Student with a Disability	x

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/09/2020

		ID	DOB G	Gender (	Grade	Disability	12M
Primary	Start Date	Fut End Date End Date	Service		Frq/Cyl/Minu	tes Delivery Recommend	ation School/Location Coordinating Service Provider
CURREN	T YEAR						
Yes	09/04/2019	07/01/2020	Ratio 8:1:1		5/Weekly/16	5 8 students/1 teacher/	1 aide John F Kennedy Elementary/8:1:1 Classroom/OGDENSBURG CITY SD
	09/04/2019	07/01/2020	Occupational Therapy		2/Weekly/30	Individual	John F Kennedy Elementary/Provider Location/NORTH COAST THERAPY
	09/04/2019	07/01/2020	Physical Therapy		2/Weekly/30	Individual	John F Kennedy Elementary/Provider Location/NORTH COAST THERAPY
	09/04/2019	07/01/2020	Speech		3/Weekly/30	Individual	John F Kennedy Elementary/Speech Classroom/OGDENSBURG CITY SD

District 8:1:1 classroom placement 5 times per week for 165 minutes Individual Occupational Therapy services 2 times per week for 30 minutes Individual Physical Therapy services 2 times per week for 30 minutes Individual Speech services 3 times per week for 30 minutes Individual Supplementary School Personnel services 5 times per week for 165 minutes Behavioral Consultant services 1200 minutes per year

12 Month Extended Year Recommendation: District 12:1:1 Integrated classroom placement 5 times per week for 150 minutes Individual Speech services 3 times per week for 30 minutes Individual Occupational Therapy services 2 times per week for 30 minutes Individual Physical Therapy services 2 times per week for 30 minutes Individual Supplementary School Personnel services 5 times per week for 150 minutes Behavioral Consultant 1 time per week for 60 minutes

Refer to the Committee on Special Education

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/09/2020

		ID	DOB	Gender	Grade	Disability	12N
0 <b>6/09/20</b> ommittee: Comm	- Program I	000077 Review	415 07/25/201	5 M	Ρ	Preschool Student with a Disability   As of 09/01/20: Autism <b>Outcome: IEP Change: Remains</b>	Classified
Primary	Start Date	Fut End Date End Date	Service		Frq/Cyl/N		School/Location Coordinating Service Provider
CURREN Yes	IT YEAR 09/04/2019	07/01/2020	Ratio 8:1:1		5/Weekly	C	ohn F Kennedy Elementary/8:1:1 Classroom/OGDENSBURG CITY
	09/04/2019	07/01/2020	Occupational The	rapy	2/Weekly	E	ohn F Kennedy Elementary/Provider .ocation/NORTH COAST THERAPY
	09/04/2019	07/01/2020	Physical Therapy		2/Weekly	E	ohn F Kennedy Elementary/Provider .ocation/NORTH COAST 'HERAPY
	09/04/2019	07/01/2020	Speech		3/Weekly	E	ohn F Kennedy Elementary/Speech Classroom/OGDENSBURG CITY SD

#### Minutes Eligible for classification of Autism

#### Fall 2020 Recommendation:

District 6:1:1 ABA classroom placement 6 times per cycle for 205 minutes Individual Speech services 6 times per cycle for 30 minutes Individual Occupational Therapy services 2 times per cycle for 30 minutes Individual Physical Therapy services 2 times per week for 30 minutes Individual Supplementary School Personnel services 6 times per cycle for 330 minutes Behavioral Consultant services 1200 minutes per year

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/09/2020

		000077	647	03/25/2015	М	Р	Preschoo	ol Student with a Disability	X
	- Annual R						Outcon	ne: Refer to Special Edu	cation
Primary	Start Date	Fut End Date End Date	Service	•		Frq/Cyl/Mir	nutes	Delivery Recommendation	School/Location Coordinating Service Provider
CURRENT Yes 1		06/26/2020	Specia	Education Iti	nerant	2/Weekly/6	60	Direct - Individual	John F Kennedy Elementary/Kennedy School/CHILDREN'S THERAPY NETWORK
	11/19/2019	06/26/2020	Speech	I		3/Weekly/3	30	Individual	John F Kennedy Elementary/Kennedy School/COUNTY OF ST LAWRENCE
	Minutes	Continue class	sification	of Preschool S	tudent with a Disabi	ility			
		Special Educa Individual Spe	ition Itine ech serv		ervices 2 times per r week for 30 minute		tes		
		Special Educa	tion Itine	rant Teacher s	ervices 2 times per v r week for 30 minute	week for 60 minut es	tes		
		Refer to the C	ommittee	on Special Ed	ucation				
		Refer to the C		on Special Ed 03/25/2015	ucation M	Ρ	As of 09	ol Student with a Disability   /01/20: .anguage Impairment	
\$ <b>/09/20</b> nmittee: Comm	- Program	000077 <b>Review</b>		·		Ρ	As of 09 Speech/L	/01/20:	s Classified

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/09/2020

		ID		DOB	Gender	Grade	Disabil	ity	1
Yes	11/19/2019	06/26/2020	Specia	I Education Iti	nerant	2/Weekly/60	0	Direct - Individual	John F Kennedy Elementary/Kennedy School/CHILDREN'S THERAP NETWORK
	11/19/2019	06/26/2020	Speec	h		3/Weekly/30	0	Individual	John F Kennedy Elementary/Kennedy School/COUNTY OF ST LAWRENCE
	<u>Minutes</u>	Eligible for cla	assificatio	on of Speech/La	inguage Impairme	ent			
			ltant Tea h service	cher services 6 s 3 times per cy	times per cycle fo /cle for 30 minute	or 30 minutes in the ar s	rea of ELA		
		000077	7649	02/11/2015	М	Р	Preschoo	bl Student with a Disability	
							As of 06 Declassi	/18/20:	
	- Annual Ro						As of 06 Declassif	/18/20:	sified
	ittee on Preschool Spe		e Servic	е		Frq/Cyl/Min	As of 06 Declassif <b>Outcor</b>	/18/20: fied	School/Location
Committee: Comm	iittee on Preschool Spe	Fut End Date	e Servic	e		Frq/Cyl/Min	As of 06 Declassif <b>Outcor</b>	/18/20: fied <b>ne: IEP Change: Declas</b>	
Committee: Comm	Start Date	Fut End Date		e Il Education Iti	nerant	Frq/Cyl/Min 2/Weekly/60	As of 06 Declassif <b>Outcor</b> utes	/18/20: fied <b>ne: IEP Change: Declas</b>	School/Location
Committee: Comm Primary CURREN	Start Date	rcial Education Fut End Date End Date			nerant		As of 06 Declassif <b>Outcor</b> utes	/18/20: fied <b>ne: IEP Change: Declas</b> Delivery Recommendation	School/Location Coordinating Service Provider John F Kennedy Elementary/Kennedy School/CHILDREN'S THERAP
Committee: Comm Primary CURREN	Start Date Start Date IT YEAR 12/17/2019	End Date End Date 06/26/2020 Declassify	Specia	I Education Iti		2/Weekly/60	As of 06 Declassif <b>Outcor</b> utes	/18/20: fied me: IEP Change: Declas Delivery Recommendation Direct - Individual	School/Location Coordinating Service Provider John F Kennedy Elementary/Kennedy School/CHILDREN'S THERAP NETWORK
Committee: Comm Primary CURREN Yes 06/09/20	Start Date Start Date IT YEAR 12/17/2019	Every End Date End Date 06/26/2020 Declassify 000077 eview	Specia		nerant		As of 06 Declassif <b>Outcor</b> utes 0 Preschoo	/18/20: fied <b>ne: IEP Change: Declas</b> Delivery Recommendation	School/Location Coordinating Service Provider John F Kennedy Elementary/Kennedy School/CHILDREN'S THERAP NETWORK
Committee: Comm Primary CURREN Yes 06/09/20	IT YEAR 12/17/2019 Minutes - Annual Re	Every End Date End Date 06/26/2020 Declassify 000077 eview	Specia 7678	I Education Iti		2/Weekly/60	As of 06 Declassif Outcor utes 0 Preschoo Outcor	/18/20: fied <b>me: IEP Change: Declas</b> Delivery Recommendation Direct - Individual	School/Location Coordinating Service Provider John F Kennedy Elementary/Kennedy School/CHILDREN'S THERAP NETWORK

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/09/2020

		ID	D	OB	Gender	Grade	e D	isability	12Mt
CURREN	IT YEAR								
Yes	12/05/2019	06/26/2020	Speech			2/M	/eekly/30	Group	John F Kennedy Elementary/Kennedy School/COUNTY OF ST LAWRENCE
	<u>Minutes</u>	Continue class	sification of F	Preschool St	tudent with a Disabili	ity			
		Recommenda Individual Spe			r week for 30 minute	S			
		12 Month Exte Individual Spe			lation: r week for 30 minute:	S			
		Refer to the C	ommittee on	Special Ed	ucation				
06/09/20	- Program I	000077 Review	678 10,	18/2015	Μ	Ρ	A Sp	eschool Student with a Disability   s of 09/01/20: beech/Language Impairment utcome: IEP Change: Ren	
Primary	Start Date	Fut End Date End Date	Service			Frq	/Cyl/Minute	s Delivery Recommendati	on School/Location Coordinating Service Provider
CURREN	IT YEAR								
Yes	12/05/2019	06/26/2020	Speech			2/M	/eekly/30	Group	John F Kennedy Elementary/Kennedy School/COUNTY OF ST LAWRENCE

Minutes Eligible for classification of Speech/Language Impairment

Fall 2020 Recommendation: Group Speech services 3 times per cycle for 30 minutes Ogdensburg City School District Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/10/2020

		ID	DOB	Gender	Grade	Disab		121
		000029146	01/27/2011	F	003	Learnir	ng Disability	
6/10/20 mmittee: CSE S	- Annual R	eview				Outco	ome: IEP Change: Remain	s Classified
Primary	Start Date	Fut End Date Se End Date	ervice		Frq/Cyl/№	linutes	Delivery Recommendation	School/Location
<b>CURREN</b> Yes		06/26/2020 Re	esource Room		6/6 Day (	Cycle/40		Kennedy Elementary (PS)/Resource Room
	09/04/2019	06/26/2020 Sp	beech		3/6 Day (	Cycle/30	Group	Kennedy Elementary (PS)/Speec Classroom
	<u>Minutes</u>	Continue classific	ation of Learning [	Disability				
		Resource Room s Group Speech se Shared Suppleme	rvices 3 times per	er cycle for 40 minu cycle for 30 minute onnel 6 times per o		es in all aca	idemic areas	
		Direct Consultant Group Speech se	services 6 times pe Teacher services ervices 3 times per	cycle for 30 minute	or 90 minutes in the es		LA and mathematics	
		000028028	10/02/2009	F	004	Learnir	ng Disability	
6/10/20 mmittee: CSE S	- Annual R	eview				Outco	ome: IEP Change: Remain	s Classified
Primary	Start Date	Fut End Date Se End Date	ervice		Frq/Cyl/N	linutes	Delivery Recommendation	School/Location
CURREN Yes	IT YEAR 11/19/2019	06/26/2020 Re	esource Room		6/6 Day (	Cycle/40		Kennedy Elementary (PS)/Resource Room

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/10/2020

		ID	DOB	Gender	Grade I	Disability	120
	11/19/2019	06/26/2020	Speech		2/6 Day Cycle	e/30 Group	Kennedy Elementary (PS)/Kenned School
	<u>Minutes</u>	Continue clas	sification of Learning	Disability			
		Resource Roo		20: per cycle for 40 minutes r cycle for 30 minutes			
		12 Month Exte None	ended Year Recomm	endation:			
		Resource Roo Direct Consul		per cycle for 40 minutes s 6 times per cycle for 6	0 minutes in the area		
		Group Speech Shared Suppl 000027	h services 3 times pe ementary School Per	r cycle for 30 minutes rsonnel services 6 times	s per cycle for 40 mir 004 L	utes in the areas of science/so earning Disability	
	- Annual Re	Group Speech Shared Suppl 000027	h services 3 times pe ementary School Per	r cycle for 30 minutes rsonnel services 6 times	s per cycle for 40 mir 004 L	utes in the areas of science/so	
nmittee: CSE S	ubcommittee Start Date	Group Speech Shared Suppl 000027	h services 3 times pe ementary School Per 7098 11/28/2009	r cycle for 30 minutes rsonnel services 6 times	s per cycle for 40 mir 004 L	utes in the areas of science/so earning Disability <b>Dutcome: IEP Change:</b>	Remains Classified
Primary	ubcommittee Start Date	Group Speech Shared Suppl 000027 Eview Fut End Date End Date	h services 3 times pe ementary School Per 7098 11/28/2009	r cycle for 30 minutes rsonnel services 6 times	s per cycle for 40 mir 004 L	utes in the areas of science/so earning Disability Dutcome: IEP Change: es Delivery Recommen	Remains Classified
rimary	Start Date	Group Speech Shared Suppl 000027 eview Fut End Date End Date 06/26/2020	h services 3 times pe ementary School Per 7098 11/28/2009 Service	r cycle for 30 minutes rsonnel services 6 times	s per cycle for 40 mir 004 L Frq/Cyl/Minut	utes in the areas of science/so earning Disability Dutcome: IEP Change: es Delivery Recommen	Remains Classified ndation School/Location Kennedy Elementary
mittee: CSE St rimary CURREN	Start Date T YEAR 11/19/2019	Group Speech Shared Suppl 000027 Eview Fut End Date End Date 06/26/2020 Continue clas Recommenda	h services 3 times pe ementary School Per '098 11/28/2009 Service Resource Room sification of Learning ation through June 20	r cycle for 30 minutes rsonnel services 6 times D F	s per cycle for 40 mir 004 L Frq/Cyl/Minut 6/6 Day Cycle	utes in the areas of science/so earning Disability Dutcome: IEP Change: es Delivery Recommen	Remains Classified ndation School/Location Kennedy Elementary

Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/10/2020

		ID		DOB	Gender	Grade	Disal	bility		12
		Fall 2020 Red No changes	commen	dation:						
6/10/20	- Annual R	000028	3095	06/21/2010	F	004		ng Disability ome: IEP Change: Remair	as Classified	
ommittee: CSE	Subcommittee		0			<b>F</b> <sub>1</sub> , <b>0</b> , 1/1		_		
Primary	Start Date	Fut End Date End Date	Servic	e		Frq/Cyl/N	linutes	Delivery Recommendation	School/Location	
CURREN	NT YEAR									
Yes	10/08/2019	06/26/2020	Resou	urce Room		6/6 Day (	Cycle/40		Kennedy Elementary (PS)/Resource Room	
	<u>Minutes</u>	Continue clas	sificatio	n of Learning Dis	sability					
		Resource Ro Shared Supp 12 Month Ext	om servi lementai ended Y	ry School Person ear Recommend	cycle for 40 minu nnel services 6 ti	mes per cycle for 2	00 minutes	in all academic areas		
		Direct Consul Direct Consul	om servi Itant Tea Itant Tea	ices 6 times per acher services 6 acher services 6	times per cycle f	or 60 minutes in the or 30 minutes in the	area of m		ies	
		000029	9129	02/25/2011	F	003	Learni	ng Disability		
				02/25/2011						
	- Annual R	eview		02/23/2011			Outc	ome: IEP Change: Remair	ns Classified	
06/10/20 ommittee: CSE Primary	Subcommittee	eview Fut End Date End Date	Servic			Frq/Cyl/N		ome: IEP Change: Remain	ns Classified School/Location	

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**Board Action Sheet** Meeting Date Range From: 05/28/2020 to 06/10/2020 Meeting Date: 06/10/2020

		ID		DOB	Gender	Grade	Disab	oility	12
	09/04/2019	06/26/2020	Speech	1		3/6 Day	Cycle/30	Group	Kennedy Elementary (PS)/Speed Classroom
	Minutes	Continue clas	sification	of Learning D	isability				
		Group Speec	om servic h services ementary	es 6 times per s 3 times per c School Persc	r cycle for 40 mini cycle for 30 minut onnel services 6 ti	es	20 minutes	in all academic areas	
		None							
		Direct Consul Direct Consul Group Speec	om servic tant Teac tant Teac h services	es 6 times per her services 6 her services 6 s 3 times per c	times per cycle f cycle for 30 minut	or 60 minutes in th or 30 minutes in th es	e area of ma		dies
		000077	419	05/17/2008	F	006	l earnir	ng Disability	
<b>)6/10/20</b>	- Annual R							ome: IEP Change: Remai	ns Classified
Primary	Start Date	Fut End Date End Date	Service	)		Frq/Cyl/l	linutes	Delivery Recommendation	School/Location
CURREN Yes		06/26/2020	Resour	ce Room		6/6 Day	Cycle/40		Kennedy Elementary (PS)/Resource Room
	Minutes	Continue clas	sification	of Learning Di	isability				

Resource Room services 6 times per cycle for 40 minutes Shared Supplementary School Personnel services 6 times per cycle for 40 minutes in the areas of science/social studies

**Board Action Sheet** 

Meeting Date Range From: 05/28/2020 to 06/10/2020

Meeting Date: 06/10/2020

		ID		DOB	Gender	Grade	Disa	bility	12	
		12 Month Exte None	ended Ye	ear Recommend	ation:					
		Integrated Co Direct Consulf	om servic -Teaching tant Teac	ces 6 times per o lg services 6 tim cher services 6 t	ss 6 times per cycle for 40 minute services 6 times per cycle for 40 ner services 6 times per cycle for				sial studies	
		000077	645	09/23/2016	М	Р	Prescl	nool Student with a Disability		
	- Annual R						Outc	ome: IEP Change: Remair	s Classified	
Primary	Start Date	Fut End Date End Date	Service	9		Frq/Cyl/	Minutes	Delivery Recommendation	School/Location Coordinating Service Provider	
CURREN 'es	IT YEAR 01/06/2020	06/26/2020	Specia	I Education Itir	nerant	2/Weekl	y/60	Direct - Individual	Home Base - Preschool/Home Setting/COUNTY OF ST LAWRENCE	
	01/06/2020	06/26/2020	Occupa	ational Therap	у	2/Weekl	y/30	Individual	Home Base - Preschool/Home Setting/NORTH COAST OT, PT AND SLP, PLLC	
		00/00/0000	Cread	h		2/Weekl	y/30	Individual	Home Base - Preschool/Home	
	01/06/2020	06/26/2020	Speech						Setting/NORTH COAST OT, PT AND SLP, PLLC	

Recommendation through June 2020: Special Education Itinerant Teacher services 2 times per week for 60 minutes Individual Speech services 2 times per week for 30 minutes Individual Physical Therapy services 2 times per week for 30 minutes Individual Occupational Therapy services 2 times per week for 30 minutes

**Board Action Sheet** 

Meeting Date Range From: 05/28/2020 to 06/10/2020

Meeting Date: 06/10/2020

		ID	DOB	Gender	Grade D	isability	121
		Special Educat Individual Spect Individual Occu	ech services 2 times	er services 2 times p s per week for 30 mi ervices 2 times per	week for 30 minutes		
		Individual Spee Individual Occu Individual Phys Parent Counse	Beginning Years cla ech services 5 times upational Therapy service sical Therapy service	e per week for 30 mi ervices 2 times per es 2 times per week ervices 2 times per r	week for 30 minutes ( for 30 minutes nonth for 60 minutes	ninutes	
		0000776	631 09/25/2016	δ F	P P	eschool Student with a Disability	
	- Annual Re	eview	631 09/25/2016	6 F		reschool Student with a Disability utcome: IEP Change: Remair	ns Classified
	mittee on Preschool Spe	eview		6 F		utcome: IEP Change: Remair	ns Classified School/Location Coordinating Service Provider
Primary	mittee on Preschool Spe	eview cial Education Fut End Date End Date			C	utcome: IEP Change: Remair	School/Location
Primary	mittee on Preschool Spe Start Date NT YEAR	eview cial Education Fut End Date End Date 06/26/2020	Service		C Frq/Cyl/Minute	utcome: IEP Change: Remain	School/Location Coordinating Service Provider Home Base - Preschool/Home Setting/NORTH COAST OT, PT

Minutes Continue classification of Preschool Student with a Disability

Recommendation through June 2020: Special Education Itinerant Teacher services 2 times per week for 60 minutes Individual Speech services 2 times per week for 30 minutes Individual Occupational Therapy services 2 times per week for 30 minutes

**Board Action Sheet** 

Meeting Date Range From: 05/28/2020 to 06/10/2020

Meeting Date: 06/10/2020

ID	DOB	Gender	Grade	Disability	12Mth
Special Education Individual Speech	h services 2 times p	endation: services 3 times pr per week for 30 min rvices 2 times per w	nutes		
Individual Speech Individual Occupa Parent Counselin	ginning Years class h services 3 times p ational Therapy ser og and Training ser rvices 2 times per r	sroom placement 5 ber week for 30 min rvices 2 times per w vices 2 times per m month for 60 minute	utes veek for 30 minute onth for 60 minut	25	

Ogdensburg City School District Board Action Sheet Meeting Date Range From: 05/28/2020 to 06/10/2020

**Total Meetings 51**