

**School District Name**

**Least Restrictive Environment (LRE) Procedural Checklist**

*(Form intended for internal use only – data must be entered in CT-SEDS)*

**Student:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**School:** \_\_\_\_\_ **Date of PPT:** \_\_\_\_\_

*Note: This form is to be completed by the PPT only after all other IEP components have been fully addressed.*

**I. Section A: LRE Screen** *(This section must be completed.)*

**YES NO N/A**

- 1. All of the child’s classes are in the regular educational environment.
- 2. The child has the opportunity to participate in nonacademic and extracurricular services and activities (including meals, recess periods, and services and activities such as counseling services, athletics, transportation, health services, recreational activities, special interest groups or clubs sponsored by the child’s LEA, and employment of students, including both employment by the LEA and assistance in making employment available) to the same extent as peers who do not have disabilities.
- 3. The child is educated in the school that he or she would attend if nondisabled.
- 4. Complete if the child is confined to a detention or correctional facility. The child must remain in the facility during the school day.

**II. Section B: LRE Factors and Considerations** *(Complete only if “NO” has been checked for one or more of the items in Section A 1-3). Do not complete if #4 is “YES” Respond to all items unless otherwise indicated.)*

**YES NO N/A**

- 1. The PPT based the educational placement of the child upon the child’s IEP.
- 2. The PPT ensured that the child is educated to the maximum extent appropriate with children who are nondisabled.
- 3. The PPT ensured that the child participates in nonacademic and extracurricular services and activities with nondisabled children to the maximum extent appropriate to the needs of the child.
- 4. The PPT considered the use of supplementary aids and services (such as resource room, itinerant instruction, assistive technology devices or assistive technology services) in conjunction with regular class placement.
- 5. The PPT determined that the nature and severity of the child’s disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.
- 6. The PPT selected the placement within the continuum of alternative placements which is required to implement the child’s IEP.
- 7. The PPT considered any potential harmful effect of the placement on the child.
- 8. The PPT considered any potential harmful effect of the placement on the quality of the services that the child needs.
- 9. The PPT considered any potential harmful effect of the placement on the education of other children.

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YES NO N/A

10. *Complete if the child is not being educated in the school that he or she would attend if nondisabled.*  
The child's education program is provided as close as possible to the child's home.

11. *Complete if the child's education program has been modified as the result of procedures related to discipline.* The child is receiving education services in an alternative educational setting.

12. *Complete if the child was determined eligible for special education during an initial evaluation.* The PPT determined that an out of district/private placement is needed to implement the IEP.

Comments/Additional Information

DRAFT