



MINOOKA COMMUNITY HIGH SCHOOL DISTRICT #111

Special Education or Section 504 Plan Records

Please complete the attached from **only** if your child currently has an
Individual educational Plan (IEP) or a Section 504 Plan

Students with an IEP may receive the following types of support within school:

- * Direct instructional support from a special education teacher
- * Support on a consultative basis from a special education teacher
- * Direct or consultative services from related service providers (social work, speech/
language therapy, occupational therapy, physical therapy, hearing itinerate support, ext.)

Students with an IEP are eligible for special education support, instruction, and services under one or more of the following:

Specific Learning Disability (SLD)	Other Health Impairment (OHI)
Emotional Disability (OHI)	Intellectual Disability (Int D)
Orthopedic Impairment (PI)	Visual Impairment (VI)
Hearing Impairment (HI)	Deafness (D)
Deaf-Blindness (D-B)	Multiple Disabilities (MD)
Autism (AUT)	Traumatic Brain Injury (TBI)
Speech or Language Impairment (S/L)	

*** If you have a copy of your child's current IEP, please provide the appropriate school counselor with a full copy of the document. This will help to speed up the process of ensuring that your son or daughter receives the proper support at Minooka Community High School.



MINOOKA COMMUNITY HIGH SCHOOL DISTRICT #111

Parental Release of Records

Student Name: _____ D.O.B. _____ DATE _____

Grade: _____ Parent Phone: _____ Parent email: _____

Minooka Community High School District #111 is committed to a policy of maintaining the confidentiality of medical or educational records of all students. Requesting or releasing any information is only done with the written authorization of the child's parent or guardian. You have the right to inspect and copy your child's records, to challenge the contents of such records, and to limit any such consent to designated records or designated portions of information within the records. Information obtained by the MCHS District #111 shall be accessible only to the MCHS Dist. #111 personnel who have cause to provide direct service to your child. If it should become necessary, additional copies of this consent form will be made. This release is effective only six months after the date below.

Records are to be Obtained from: _____

Please complete this from only if your child currently has an Individual Educational Plan (IEP) or a 504 Plan

(School Full name-No abbreviations)

(Address Street, PO Box)

Records are to be Released to:

(City, State, Zip)

(IEP or 504 Plan Contact Name, phone or email)

Consent is given for the Minooka Community High School District 111 to:

OBTAIN	RELEASE	
_____	_____	Achievement Test Scores
_____	_____	Psychological Report
_____	_____	Social Developmental Reports
_____	_____	Physical, Dental and Medical Reports
_____	_____	Speech and Language Reports
_____	_____	Audiological Reports
_____	_____	Annual Progress and Staffing Reports
_____	_____	Consultation
_____	_____	Other: _____

My student had a current IEP _____ 504 Plan _____ at his/her previous school.

Parent's or Guardian's Signature _____

Relationship: _____ Date: _____

Student Signature _____