

Emotional or Behavioral Disorders (EBD)

Student Name: _____ DOB: _____

Building: _____ Reviewer Name: _____

Date of Evaluation Report: _____ Eligible: ____ Yes ____ No

Date of Evaluation Report: _____ Eligible: ____ Yes ____ No

_____ Evaluation (Must meet initial criteria)

_____ Reevaluation

Based on information in the Evaluation Report and in the student file, K-12 students must meet the criteria in A through D below. Pre-kindergarten students must meet the requirements outlined in A, B, E and F. A pupil must demonstrate an established pattern of emotional or behavioral responses that represents a significant difference from peers.

A. Significantly Different Behaviors

_____ The student must exhibit withdrawn or anxious behaviors, pervasive unhappiness, depression, severe problems with mood or feelings of self-worth as defined by behaviors, such as:

_____ Isolating self from peers

_____ Overly perfectionistic

_____ Displaying intense fears or school refusal

_____ Failing to express emotion

_____ Displaying pervasive sad disposition

_____ Changes in eating or sleeping patterns

_____ Developing physical symptoms related to worry or stress

_____ Other: _____

OR

_____ The student must exhibit disordered thought processes manifested by unusual behavior patterns, atypical communication styles or distorted interpersonal relationships, such as:

_____ Reality distortion beyond normal developmental fantasy and play or talk

_____ Inappropriate laughter, crying, sounds, or language

_____ Self-mutilation

_____ Developmentally inappropriate sexual acting out or developmentally inappropriate self-stimulation

_____ Rigid, ritualistic patterning

_____ Perseveration or obsession with specific objects

_____ Overly affectionate behavior towards unfamiliar persons

_____ Hallucinating or delusions of grandeur

_____ Other: _____

OR

_____ The student must exhibit aggressive, hyperactive, or impulsive behaviors that are developmentally inappropriate, such as:

_____ Physically or verbally abusive behaviors

_____ Impulsive or violent, destructive, or intimidating behavior

_____ Behaviors that are threatening to others or excessively antagonistic

_____ Other: _____

B. Adverse Effects on Educational Performance

The student's pattern of emotional or behavioral responses must adversely affect education performance and result in **at least ONE** of the following:

_____ Inability to demonstrate satisfactory social competence that is significantly different from appropriate age, cultural or ethnic norms;

OR

_____ A pattern of unsatisfactory educational progress that is not primarily a result of intellectual, sensory, physical health, cultural or linguistic factors; illegal chemical use; autism spectrum disorders; or inconsistent educational programming.

C. Areas of Impact K-12

Documentation of prior interventions and the evaluation data for K-12 students must establish significant impairments in **at least ONE** of the following areas:

_____ intrapersonal _____ academic _____ vocational _____ social skills

The impaired area identified above must meet ALL of the following criteria:

- _____ Severely interferes with the pupil's or other students' educational performance
- _____ Is consistently exhibited by occurrences in at least three different settings: two educational settings, one of which is the classroom, and a setting in either home, child care, or community
- _____ Has been occurring throughout a minimum of six months, or results from the well-documented, sudden onset of a serious mental health disorder diagnosed by a licensed mental health professional

D. Evaluation Requirements K-12

The evaluation may include data from vocational skills measures; personality measures; self-report scales; adaptive behavior rating scales; communication measures; diagnostic assessment and mental health evaluation reviews; environmental, socio-cultural and ethnic information reviews; gross and fine motor and sensory motor measures; or chemical health assessments.

K-12 evaluation must be supported by current or existing data from ALL of the following:

- _____ Clinically significant scores on standardized, nationally normed behavior rating scales
- _____ Individually administered, standardized, nationally normed tests of intellectual ability and academic achievement
- _____ Record review
- _____ Mental health screening
- _____ Interviews with parent, pupil and teacher
- _____ Three systematic observations in the classroom or other learning environments
- _____ Health history review procedures
- _____ Functional behavioral assessment

FOR PRE-KINDERGARTEN STUDENTS: The student must meet criteria in areas A and B above. Additionally, the student must meet requirements for E and F.

E. Areas of Impact Pre-K

Evaluation data must establish and define developmentally significant impairments in at least ONE of the following areas for pre-kindergarten students:

_____self-care _____social relations _____social or emotional growth

The area(s) identified above must meet ALL of the following criteria:

_____ Data must document that emotional or behavioral responses are exhibited in at least one setting including either in the home, at childcare, or in the community

_____ Has been occurring throughout a minimum of six months, or results from the well-documented, sudden onset of a serious mental health disorder diagnosed by a licensed mental health professional

F. Evaluation of Pre-K

Pre-K evaluations must be supported by current or existing data from each of the following areas:

_____ Two or more systematic observations, including one in the home

_____ A case history, including medical, cultural and developmental information

_____ Information on the student's cognitive ability, social skills and communication abilities

_____ Standardized and informal interviews, including parent, teacher, caregiver and childcare provider

_____ Standardized adaptive behavior scales

Review of Eligibility Determination

To determine compliance with eligibility determination, one of the following MUST be checked.

_____ The documentation supports the team decision.

_____ The documentation does not support the team decision.

For complete information regarding disability criteria requirements, refer to MN Rule 3525.1329