

**SPECIFIC LEARNING DISABILITY ELIGIBILITY CHECKLIST**

<b>Student:</b>		<b>School/Grade:</b>		<b>Date:</b>	
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**Specific Learning Disability Definition:**

The term means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. 20 U.S.C. § 1401(30)(A); 34 C.F.R. § 300.8(c)(10)(i).

**Eligibility Questions – Answer ALL of Them. Do NOT Stop until ALL are Answered.**

<b>1. Is there a disorder in one or more of the basic psychological processes involved in understanding or in using language?</b>	<b>YES</b>	<b>NO</b>
<b>Verification:</b>		

*To be eligible, the answer to Question 1 must be yes. Proceed to next question.*

<b>2. Is the student failing to achieve adequately for the student's age or to meet State-approved grade level standards in any of the areas below, when provided with learning experiences and instruction appropriate for the student's age or State approved grade level standards?</b>	<b>YES</b>	<b>NO</b>								
<b>If so, identify the area(s):</b>										
<table> <tr> <td><input type="checkbox"/> oral expression</td> <td><input type="checkbox"/> reading fluency skills</td> </tr> <tr> <td><input type="checkbox"/> listening comprehension</td> <td><input type="checkbox"/> reading comprehension</td> </tr> <tr> <td><input type="checkbox"/> written expression</td> <td><input type="checkbox"/> mathematics calculation</td> </tr> <tr> <td><input type="checkbox"/> basic reading skill</td> <td><input type="checkbox"/> mathematics problem solving</td> </tr> </table>			<input type="checkbox"/> oral expression	<input type="checkbox"/> reading fluency skills	<input type="checkbox"/> listening comprehension	<input type="checkbox"/> reading comprehension	<input type="checkbox"/> written expression	<input type="checkbox"/> mathematics calculation	<input type="checkbox"/> basic reading skill	<input type="checkbox"/> mathematics problem solving
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<b>Verification:</b>										

*To be eligible, the answer to Question 2 must be yes. Proceed to next question.*

**SPECIFIC LEARNING DISABILITY ELIGIBILITY CHECKLIST IHBA-R**

	YES	NO	N/A
<p><b>3-a. Does the student exhibit a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, State approved grade level standards, or intellectual development, that is determined by the IEP team to be relevant to the identification of a specific learning disability, using appropriate assessments;</b></p> <p><b><u>or</u></b></p> <p><b>3-b. Has the student failed to make sufficient progress to meet age or State-approved grade level standards in one or more of the areas identified in Question 2 when using a process based on the student's response to scientific, research based intervention (RTI)?</b></p>			
<b>Verification:</b>			

*To be eligible, the answer to Question 3-a or 3-b must be yes. Proceed to next question.*

	YES	NO
<p><b>4. Is the underachievement due to the lack of appropriate instruction in reading or math?</b></p>		
<p><i>In making this determination, the Team must consider:</i></p> <p><i>a) Data that demonstrates that prior to, or as a part of, the referral process, the child was provided appropriate instruction in regular education settings, delivered by qualified personnel; <u>and</u></i></p> <p><i>b) Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, which was provided to the child's parents.</i></p>		

*To be eligible, the answer to Question 4 must be no. Proceed to next question.*

<b>5. Is the student's lack of achievement primarily the result of:</b>		
<b>a. Visual, Hearing or Motor Disability</b>	YES	NO
<b>Explain:</b>		
<b>b. Intellectual Disability</b>	YES	NO
<b>Explain:</b>		
<b>c. Emotional Disturbance</b>	YES	NO

**SPECIFIC LEARNING DISABILITY ELIGIBILITY CHECKLIST IHBA-R**

Page 3 of 4

Explain:

<b>d. Environmental, Cultural or Economic Disadvantage and/or Limited English proficiency?</b>	YES	NO
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Explain:

*To be eligible, the answers Question 5a through 5d must all be no. Proceed to next question.*

<b>6. Relevant behavior noted during the observation(s) and its relationship to academic functioning:</b>
<i>The child must be observed in learning environment (including the regular classroom setting) to document the child's academic performance and behavior in the areas of difficulty.</i>

<b>7. Educationally relevant medical findings:</b>	YES	NO
If yes, specify:		

<b>8. Are evaluations utilized valid and reliable assessments and performed by qualified individuals, consistent with NH Ed 1107.04(b), Table 1100.1?</b>	YES	NO
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**Eligibility Conclusions:**

<b>A. Does a specific learning disability exist?</b>	YES	NO
<i>To be eligible, answers to questions 1, 2, 3, and 8 must each be "Yes," and the answers to questions 4 and 5(a) through 5(d) must each be "No."</i>		

*To be eligible, the answer to Question A must be yes. Proceed to Question B.*

<b>B. If there is a specific learning disability, does the child require special education, or special education and related services, because of that disability?</b>	YES	NO
Explain:		

*If the answers to Questions A and B are "yes," the student qualifies for special education as a child with a specific learning disability. If the answer to either question is "no," then the student is ineligible under this disability category.*

<b>C. CONCLUSION:</b> The child qualifies for special education based on a specific learning disability.	<b>YES</b>	<b>NO</b>
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*Team members should certify their agreement or disagreement by signing below.*

**I certify that this report reflects my conclusions:**

NAME and TITLE:	NAME and TITLE:

**I certify that this report does not reflect my conclusion.**

NAME and TITLE:	NAME and TITLE:

**Dissenting members shall submit a separate statement.**

Law Reference:

Appendix Reference:

Date Adopted: October 9, 2017

Last Review/Revision Date: