## **Best Interest Determination Form for Foster Care School Placement**

## **Determination Page**

| Child's Name:   |                      |  |  |  |
|---|----------------------|--|--|--|
| DOB:  | MOSIS #:             |  |  |  |
| School/District of Current Attendance:  |                      |  |  |  |
|   |                      |  |  |  |
| Grade Placement:  | Date of BID Meeting: |  |  |  |
|   |                      |  |  |  |
| <u>'</u>  |                      |  |  |  |
| Determination   |                      |  |  |  |
| ☐ The student shall remain in the school in which the child was enrolled at the time of placement   |                      |  |  |  |
| Name of School/District:  |                      |  |  |  |
| Based on the best interest determination, a change in school placement is needed. The student enrolled in the school of current residence.  |                      |  |  |  |
| Name of School/District:  |                      |  |  |  |
| <b>Note:</b> If a change in educational placement is needed, enrollment should take place immediately at the new school, even if health and educational records are not provided. |                      |  |  |  |
| Was the child or youth informed of the benefits in inviting a significant person to attend the meeting?   |                      |  |  |  |
| ☐ Yes ☐ No  |                      |  |  |  |
| If the person was identified, who did the child invite?   |                      |  |  |  |
|   |                      |  |  |  |
|   |                      |  |  |  |
| NA/hot ook ool doog the abild averfeed NA/hor   |                      |  |  |  |
| What school does the child prefer? Why  |                      |  |  |  |
|   |                      |  |  |  |
|   |                      |  |  |  |
|   |                      |  |  |  |

## **Essential Member Signature Page**

The following essential members participated in determining the school placement that is in the student's best interest:

| student's best interest:   |   |  |                           |  |
|--|---|--|---------------------------|--|
| Participants   | Printed name<br>Title and/or relationship<br>with child | Signature, if essential person (**should sign) | Agree with determination? |  |
| **Child or youth in care   |   |  | ☐ Yes ☐ No                |  |
| **CD service worker or supervisor  |   |  | ☐ Yes ☐ No                |  |
| **Current (if not CD) custodian  |   |  | ☐ Yes ☐ No                |  |
| **LEA representative from child's school at time of placement (school of origin) |   |  | ☐ Yes ☐ No                |  |
| **IEP team for special education purposes, if applicable                         |   |  | ☐ Yes ☐ No                |  |
| Birth parent(s) or prior custodian(s)  |   |  | ☐ Yes ☐ No                |  |
| The child's guardian ad litum  |   |  | ☐ Yes ☐ No                |  |
| Other significant person(s) the child or youth wishes to attend (**if attending) |   |  | ☐ Yes ☐ No                |  |
| Juvenile Officer   |   |  | ☐ Yes ☐ No                |  |
| LEA representative from school of residency                                      |   |  | ☐ Yes ☐ No                |  |
| Psychologist or Physician  |   |  | ☐ Yes ☐ No                |  |
| Other  |   |  | ☐ Yes ☐ No                |  |
| Other  |   |  | ☐ Yes ☐ No                |  |
| Other  |   |  | ☐ Yes ☐ No                |  |

| The student remains in the school of origin unless the answers to the following questions suggest a change of placement is in the child's best interest. |   |  |
|--|---|--|
| 1.   | What is the child's permanency goal and plan?   |  |
| 2.   | What is the expected date for achieving the permanency plan?  |  |
| 3.   | How many schools has the child attended? How many schools has the child attended this year? How have the school transfers affected the child emotionally, socially, academically, and physically? |  |
| 4.   | What are the safety considerations related to school placement?   |  |
| 5.   | Which school does the student prefer? Why? How was this information obtained?   |  |
| 6.   | How does the child feel about any upcoming moves?   |  |

| 7.  | Which school do the birth parents or prior custodians, as appropriate, and the child's current placement provider prefer? Why?   |
|-----|--|
| 8.  | What school(s) do the child's siblings attend?   |
| 9.  | How is the child performing academically?  |
| 10. | Does the child have a current IEP or 504 Plan?   |
| 11. | If the student has a current IEP, is specialized transportation identified as a related service?   |
| 12. | Does the child participate in other specialized instruction? (e.g. gifted program, career and technical program)   |
| 13. | What are the child's academic/career goals? Does one school have programs and activities that address the unique needs or interests of the students that the other school does not have? |

| 14. Describe the child's ties to his or her current so involvement in extracurricular activities.  |  |  |  |
|--|--|--|--|
| 15. Would changing schools affect the student's a sports or other extra-curricular activities, proc how?   | eed to the next grade or graduate on time? If so,  |  |  |
| 16. Would the timing of the school transfer coincide with a logical juncture, such as after testing, after an event that is significant to the child or at the end of the school year?                       |  |  |  |
| 17. How would the length of the commute to school impact the child?  |  |  |  |
| Attach any supporting documentation used in making this determination of best interest. The following is a checklist of sample documents that may be considered. This list in not intended to be exhaustive. |  |  |  |
| <ul> <li>□ Report Cards</li> <li>□ Progress Reports</li> <li>□ Achievement data (test scores)</li> <li>□ Attendance data</li> </ul>  | <ul> <li>□ IEP or 504 Plan</li> <li>□ Emails or correspondence from individuals consulted</li> <li>□ Disciplinary Referrals</li> <li>□ Health reports/records</li> </ul> |  |  |