The Choice school must decide if it will offer special education services to eligible students. If so, the Choice school must identify what services it is willing and able to provide.

In accordance with 511 IAC 7-49-11, each Choice school serving Choice Scholarship students with disabilities understands and agrees to adhere to the following assurances:

- When an eligible Choice Scholarship student with a disability requiring special education and related services applies, the Choice school must:
  - Inform the parent/guardian what special education and related services it can accommodate and make available;
  - Inform the parent/guardian they may select the Choice school or the public school corporation where the school is located to provide special education and related services to the Choice student; and,
  - Reflect the parent/guardian’s selection of the special education service provider on the Choice Scholarship application and Special Education Service Provider Selection Form.

- If the parent/guardian selects the Choice school as the special education service provider, the Choice school must take the following actions:
  - The Choice school and the Choice Scholarship student’s parent/guardian must meet to determine the student’s special education needs.
    - The school must meet with the parent/guardians “within a reasonable time after the Choice Scholarship student enrolls...”
  - The Choice school must create a Choice Scholarship Education Plan (CSEP).
  - The parent/guardian’s written consent must be obtained to implement the CSEP.
  - The Choice school must provide special education and related services as stated in the CSEP.

- By law (511 IAC 7-49-4), a Choice Scholarship Education Plan must contain the following components:
  - The CSEP must be in writing;
  - The CSEP must include measurable goals for the student;
  - Information on how the student’s progress will be monitored;
  - Information on how the parent/guardians will be informed of the student’s progress;
  - Accommodations that the Choice school will provide to the student, including those needed for the student to participate in statewide assessments;
  - The length, frequency, and duration of the special education and related services to be provided;
  - A statement to inform the parent/guardian that the parent/guardian must provide written consent in order for the Choice school to implement the CSEP;
  - A statement to inform the parent/guardian that they (parent/guardian) may revoke consent at any time by providing a signed, written statement revoking consent;
  - A statement to inform the parent/guardian that revocation of consent encompasses the entire CSEP;
  - A statement informing the parent/guardian that upon receipt of the written revocation, the Choice school will stop implementing the CSEP; and,
  - Signature of the parent/guardian.
• Upon receipt of a written revocation of services from the Choice student’s parent/guardian, the Choice school agrees to immediately provide written notice to the public school corporation of the revocation and provide the public school corporation with a copy of the student’s CSEP.

• If the parent/guardian of a Choice Scholarship student requests an evaluation of the Choice student, the public school corporation shall conduct the reevaluation in accordance with 511 IAC 7-40-8 and the Choice school shall collaborate with the public school corporation and share all relevant information applicable to the reevaluation.

If the Choice school decides not to provide special education services, then special education services will be made available from the public school corporation where the Choice school is located. If the Choice school does not provide the special education services, then the Choice school is not eligible to receive special education funding.

________________________________________________________________________
Signature of Authorized Agent                                                               Date (month/day/year)
________________________________________________________________________
Printed Name of Authorized Agent                                                            Printed Title of Authorized Agent

Choice School Name________________________________________________________________________

Choice School Number __________________________