

Wisconsin Department of Public Instruction (DPI) SPECIAL NEEDS SCHOLARSHIP PROGRAM (SNSP) APPLICATION PI-SNSP-0002 (Rev. 06-2022)

This collection is a requirement of Wis. Stat. § 115.7915.

INSTRUCTIONS: The parent or guardian must complete this application. Type or print clearly in ink.

Return completed form and current residency documentation to the school.

School Applying To No abbreviations A Choice School			School Year Applying For: 2022-23					
		STUDENT	INFORMATION	l				
Student's First Name Legal Name Only	МІ	Last Name Legal Name	Only	Suffix	Date of E	Birth Mo./Da	ay/Yr.	2022-23 Grade Level
Katniss		Everdeen			1	1/5/2018		K5
Check One		Check all that Apply		<u> </u>				
Hispanic/Latino		American Indian/	Alaska Native	=	sian	☐ Black/A	African A	merican Native
Not Hispanic/Lat	ino	Hawaiian/Other F	Pacific Islander	⊠ w	/hite			
		IEP OR SERVICE	S PLAN REQUIR	REMENT				
The student must either have: (1) an In or services plan that was developed no e	arlier	than September 15, 2019), AND have not	subseque	ntly been	determined		
Check which one the student has:		Name of Local Education or Services Plan	Agency (LEA) T	hat Deve	loped the	Date of Last IEP Team or Services Plan Evaluation or Reevaluation		
Services Plan (for student parentally placed at a private school)	'	Bristol School Distr	rict				,	7/25/2020
		rvices plan identified abor ad a disability?	ve was develope	ed, did the	e student	have a ree	evaluatio	on that determined the
		FAMILY	INFORMATION	-				
Parent/Guardian First Name	MI	Last Name			Suffix	Telephon	e Area/N	Vo.
Primrose		Everdeen				(414))555-12	234
Parent/Guardian First Name	MI	Last Name			Suffix	Current Resident School District		
		Milwa			Milwauk	ukee School District		
Home Street Address			City			5	State	Zip
74 Hungergame Ln.			West Al	lis			WI	12345
PARENT OR GUARDIAN CERTIFICATION								
Pe Initial here certifying that you receive	ed the	e comparison of the rights	of students with	disabilities	under sp	ecial educa	ation law	and under the SNSP.
Pe Initial here certifying that you have re	eceive	ed a profile of the private s	school's special e	ducation p	orogram.			
I, AS THE PARENT OR GUARDIAN, CERTIFY that all of the information on this application is true and correct. I understand that any of the information on this application or related to this application, including the IEP/services plan and residency documentation, may be subject to further review and verification by school and/or state officials. I ALSO UNDERSTAND that, no more frequently than once every three years, I must make the student available for an IEP reevaluation within 60 days following a request from the public school district for the student to continue to be eligible. I give LEAs permission to release any IEP or services plan for my student to the private school listed above for use in connection with Wis. Stat. §115.7915 and Wis. Admin Code PI 49. Further, the private school listed above may provide any IEP or services plan to SNSP auditors and the DPI.								
Signature of Parent or Guardian MUST be the same name as one of the parents / guardians listed above.					Signed <i>Mo./Day/Yr.</i> 6/202 <i>2</i>			
>Primrose Everdeen								
		FOR SCH	OOL USE ONLY	'				
		tion provided by the parer nat the IEP/services plan re	•		is eligible	Date Ap	٠,	Received Mo./Day/Yr.
The LEA provided a copy of the followin requirements described in the IEP or ser								
IEP (the student is eligible)		ervices Plan (the student	0 ,	.P 1	/the end of		19.12	
Neither an IEP or a Services Plan or								onnlication and bear
I, AS THE ADMINISTRATOR OR DESIGNEE RESPONSIBLE FOR PUPIL ADMISSIONS, have reviewed the student application and have determined that it is properly and completely filled out to the best of my knowledge. I attest that I have received the residency document(s) and IEP/services plan from the LEA in response to the IEP/services plan verification request.								
Signature of School Administrator or D	esign	ee Printed	Name of Schoo	I Adminis	trator or [esignee	Date	Signed Mo./Day/Yr.

COMPARISON OF RIGHTS OF STUDENTS WITH DISABILITIES AND THEIR	
FAMILIES UNDER STATE AND FEDERAL SPECIAL EDUCATION LAW AND	
UNDER THE WISCONSIN SPECIAL NEEDS SCHOLARSHIP PROGRAM	

No FAPE entitlement.

Enrolled in Public School IDEA and Chapter 115

A public school district must provide a free appropriate public education to students with disabilities.

A free appropriate public education (FAPE) includes special education and related services that:

- Are provided at no cost to parents
- Include an appropriate preschool, elementary or secondary school education;
- Are provided consistent with an Individualized Education Program (IEP); and
- Meet the standards of the Wisconsin Department of Public Instruction

Special education is specially designed instruction to meet the needs of the student with a disability.

Examples of related services include speech-language therapy, physical and occupational therapy, audiology services, counseling services, and transportation.

A public school district must also provide supplementary aids and services to allow the student to participate in regular education. Examples of supplementary aids and services include assistive technology devices or software, modification of assignments or tests, and use of specialized equipment.

Special Needs Scholarship Program 115.7915 Parentally-Placed Private School

Students participating in the Special Needs Scholarship Program are parentally placed private school students.

A participating student receives a scholarship in an amount set forth in state law to pay for attendance at an approved private school. Additional tuition or fees may be charged to students.

Individualized Education Program (IEP)

A public school district is required to develop an IEP for each student with a disability. The IEP must describe how the student is currently performing, and include annual goals and services so the student can make progress both toward attaining the annual goals and meeting grade-level expectations. The IEP must also describe how the student's parents will be informed of the student's progress.

The IEP team must meet at least annually to review the IEP, and revise it as necessary.

A public school district must fully implement the IEP and provide all services described in the IEP. If the IEP is not fully implemented, the parent can seek relief, including compensatory services, under the state special education complaint process, mediation, or due process.

A participating private school is required to implement the most recent IEP or services plan, as modified by agreement between the private school and the student's parent. There are no rights to relief if disputes arise and no requirement for an annual review of the IEP.

COMPARISON OF RIGHTS OF STUDENTS WITH DISABILITIES AND THEIR FAMILIES UNDER STATE AND FEDERAL SPECIAL EDUCATION LAW AND UNDER THE WISCONSIN SPECIAL NEEDS SCHOLARSHIP PROGRAM (cont'd)					
Enrolled in Public School IDEA and Chapter 115	Special Needs Scholarship Program 115.7915 Parentally-Placed Private School				
Child Find A public school district is responsible for identifying, locating and evaluating students with suspected disabilities, including parentally-placed students in private schools.					
Reevaluation A public school district must generally reevaluate students with disabilities at least once every three years.	Upon the request of the student's resident school district, the IEP team must conduct a reevaluation no more frequently than once every three years for SNSP eligibility purposes.				
Independent Educational Evaluation (IEE) Parents may obtain an IEE free of charge if the parent disagrees with an evaluation conducted by the public school district, unless the school district initiates a due process hearing to defend its evaluation.	Parents of participating students retain the right to an IEE free of charge if they disagree with an evaluation conducted by a public school district, unless the school district initiates a due process hearing to defend its evaluation.				
Discipline Students with disabilities are entitled to protections regarding school disciplinary practices. Some of these protections include providing educational services when a student is suspended more than 10 days in a school year.					
Mediation Mediation is available through the Wisconsin Special Education Mediation System (WSEMS) at no cost to parents, to resolve disputes in public schools under special education law.	Access to the mediation system is limited to disputes with the public school district over the evaluation of their child.				
This covers a wide range of issues that include evaluations, development of the IEP, implementation of the IEP, where services will be provided, and disciplinary practices.					
State Special Education Complaints Parents may file a complaint with the Department of Public Instruction (DPI) if they believe the public school district did not follow state or federal special education law.	Parents may file a state IDEA complaint with the DPI only regarding disputes concerning the evaluation of their child by the public school district.				
This covers a wide range of issues that include evaluations, development of the IEP, implementation of the IEP, where services will be provided, and disciplinary practices.					
Due Process Hearings Parents may request a due process hearing about disputes regarding the identification, evaluation, educational placement or provision of a free appropriate public education by a public school district.	Parents may request a due process hearing only regarding the evaluation of their child by a public school district.				
This covers a wide range of issues that include evaluations, development of the IEP, implementation of the IEP, where services will be provided, and disciplinary practices.					
Records Parents of students with disabilities must be allowed to review all special education records maintained by the public school district.	Parents of students with disabilities have the right to review special education records maintained by the public school district.				
Prior Written Notice Public school districts must provide parents with written notice before any activity affecting a student's special education identification, evaluation, educational placement or the provision of FAPE.					

55555	a Employee's social security number 123456789	OMB No. 1545-0008				
b Employer identification number (EIN) 12-123456		1 Wages, tips, other compensation 20,000		2 Federal income tax withheld 1,500		
c Employer's name, address, and ZIP code ABC Rental Company 123 Main St Madison, WI 45678		3 Social security wages 20,000		4 Social security tax withheld 500		
		5 Medicare wages and tips		6 Medicare tax withheld 200		
			7 Social security tips		8 Allocated tips	
d Control number			9		10 Dependent care	e benefits
e Employee's first name and initial Last name Suff.		11 No	nqualified plans	12a		
Primrose Everdeen 740 Hungergame Lane Milwaukee, WI 12345		13 Statutory Retirement Thiral-party plan sick pay 14 Other		d e		
				12c		
f Employee's address and ZIP code				12G		
15 State Employer's state ID numb		17 State incom	le tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement
Copy 1—For State, City, or Local Tax Department

2021

Department of the Treasury-Internal Revenue Service

Trinket, Effie

From: Crane, Seneca <Seneca.crane@email.address>

Sent: Monday, July 16, 2022 11:35 AM

To: Trinket, Effie <effie.trinket@email.address>

Subject: Re: SNSP IEP/Services Plan LEA Verification Request



Hi Effie,

Katniss had a 504 Plan that was implemented during the 2021-22 school year. That plan is attached.

Let me know if you need anything else.

Seneca

From: Trinket, Effie <effie.trinket@email.address>

Sent: Friday, July 13, 2022 7:35 AM

To: Crane, Seneca <Seneca.crane@email.address>

Subject: SNSP IEP/Services Plan LEA Verification Request

Morning Seneca,

Could you please send the IEP for Katniss Everdeen, who has a date of birth of 11/05/2018?

Thanks!

Effie Trinket

Section 504 Plan for Katniss Everdeen

A School of Choice

School Year: 2021-22

Katniss Everdeen	11/05/2018	1	Diabetes Type I
Student's Name	Birth Date	Grade	Disability
			•
Peeta Mellark	12		
Homeroom Teacher	Bus Number		

BACKGROUND

The student has type I diabetes. Diabetes is a serious, chronic disease that impairs the body's ability to use food. Insulin, a hormone produced by the pancreas, helps the body convert food into energy. In people with diabetes, either the pancreas doesn't make insulin or the body cannot use insulin properly.

Without insulin, the body's main energy source – glucose – cannot be used as fuel. Rather, glucose builds up in the blood. Over many years, high blood glucose levels can cause damage to the eyes, kidneys, nerves, heart and blood vessels.

The majority of school-aged youth with diabetes have type 1 diabetes. People with type 1 diabetes do not produce insulin and must receive insulin through either injections or an insulin pump. Insulin taken in this manner does not cure diabetes and may cause the student's blood glucose level to become dangerously low. Type 2 diabetes, the most common form of the disease typically afflicting obese adults, has been shown to be increasing in youth. This may be due to the increase in obesity and decrease in physical activity in young people. Students with type 2 diabetes may be able to control their disease through diet and exercise alone or may require oral medications and/or insulin injections. All people with type 1 and type 2 diabetes must carefully balance food, medications, and activity level to keep blood glucose levels as close to normal as possible.

Low blood glucose (hypoglycemia) is the most common immediate health problem for students with diabetes. It occurs when the body gets too much insulin, too little food, a delayed meal, or more than usual amount of exercise. Symptoms of mild to moderate hypoglycemia include tremors, sweating, lightheadedness, irritability, confusion and drowsiness. A student with this degree of hypoglycemia will need to promptly ingest carbohydrates and may require assistance.

Severe hypoglycemia, which is rare, may lead to unconsciousness and convulsions and can be life threatening if not treated promptly.

High blood glucose (hyperglycemia) occurs when the body gets too little insulin, too much food or too little exercise; it may also be caused by stress or an illness such as a cold. The most

common symptoms of hyperglycemia are thirst, frequent urination, and blurry vision. If untreated over a period of days, hyperglycemia can cause a serious condition called diabetic ketoacidosis (DKA) characterized by nausea, vomiting and a high level of ketones in the urine.

For students using insulin infusion pumps, lack of insulin supply may lead to DKA in several hours. DKA can be life-threatening and, thus, requires immediate medical attention. Accordingly, for the student to avoid the serious short and long term complications of blood sugar levels that are either too high or too low, this Section 504 Plan, and the accompanying

Health Plan, must be carefully followed and strictly adhered to by responsible school personnel. To facilitate the appropriate care of the student with diabetes, school and day care personnel must have an understanding of diabetes and be trained in its management and in the treatment of diabetes emergencies. Knowledgeable trained personnel are essential if the student is to avoid the immediate health risks of low blood glucose and to achieve the metabolic control required to decrease risks for later development of diabetes complications.

OBJECTIVE/GOALS OF THIS PLAN

Both high blood sugar levels and low blood sugar levels affect the student's ability to learn as well as seriously endangering the student's health. Blood glucose levels must be maintained in the low range for optimal learning and testing of academic skills. The student has a recognized disability, type I diabetes, that requires the accommodations and modifications set out in this plan to ensure that the student has the same opportunities and conditions for learning and academic testing as classmates, with minimal disruption of the student's regular school schedule and with minimal time away from the classroom. Steps to prevent hypoglycemia and hyperglycemia, and to treat these conditions if they occur, must be taken in accordance with this Plan and with the student's **Health Care Plan**, which is attached to this Section 504 Plan and incorporated into it.

DEFINITIONS USED IN THIS PLAN

1. *Diabetes Care Provider (DCP)*: A staff member who has received training in the care of individuals with diabetes from a health care professional with expertise in diabetes, unless the student's health care provider determines that the parent/guardian is able to provide the school personnel with sufficient oral and written information to allow the school to have a safe and appropriate environment for the child, in which case the parent/guardian may provide this training.

This training shall include instruction in:
☐ the unassisted administration of glucagon and insulin shots and recording of results;
□ understanding physician instructions concerning drug dosage, frequency, and manner of
administration;
□ applicable state regulations concerning drug storage, security, and record-keeping;
□ symptoms of hypoglycemia and hyperglycemia and the time within which glucagon or insulir
shots are to be administered to prevent adverse consequences;

□ recommended schedules and menus for meals and snacks, recommended frequency of and activities in exercise periods, and actions to take if normal schedule is disrupted. performing finger-stick blood glucose testing, urine ketone testing, and recording the results; and □ the appropriate steps to take when glucose level results are outside of the target ranges indicated in the student's Health Care Plan.
2. Diabetes Care Assistant Provider (DCAP): A staff member who has received training from a health care professional with expertise in diabetes, a DCP, or the student's parent/guardian (if the student's health care provider determines that the parent/guardian is able to provide the school personnel with sufficient oral and written information to allow the school to have a safe and appropriate environment for the child).
This training shall include instruction in: recognizing the symptoms of hypoglycemia and hyperglycemia; knowing the proper method for referring a student who exhibits symptoms of hypoglycemia or hyperglycmeia to a DCP; and recommended schedules and menus for meals and snacks, recommended frequency of and activities in exercise periods, and actions to take if normal schedule is disrupted.
3. Bus Driver Diabetes Care Provider (BDDCP): A bus driver who has received training by a health care professional with expertise in diabetes, a DCP, or the student's parent/guardian (if the student's health care provider determines that the parent/guardian is able to provide the school personnel with sufficient oral and written information to allow the school to have a safe and appropriate environment for the child).
This training shall include instruction in: □ recognizing the symptoms of hypoglycemia and hyperglycemia; and □ knowing the appropriate steps to take when glucose levels are creating emergency conditions.
4. <i>Health Care Plan</i> : A plan developed under Section 504 of the Rehabilitation Act of 1973, the Americans With Disabilities Act of 1990, and, as appropriate, the Individuals With Disabilities

ACADEMIC-RELATED ACCOMMODATIONS

1. HEALTH CARE SUPERVISION

1.1. At least 1 adult staff members will receive training to be an Diabetes Care Provider (DCP), and a DCP will be available **at all times** during school hours, during extracurricular activities, and on field trips to oversee the student's health care in accordance with this Section 504 Plan and the student's Health Care Plan, including performing or overseeing insulin injections, blood glucose tests, ketone tests, and responding to hyperglycemia and hypoglycemia including administering glucagon. A written back-up plan will be implemented to ensure that a DCP is available in the event that the primary DCP is unavailable.

Education Act, that identifies the health care needs of — and services to be provided to — a

student with diabetes. This plan is approved by the student's treating physician.

- 1.2. Any staff member who has primary care for the student at any time during school hours, extracurricular activities, or during field trips, and who is not a DCP, shall receive training to be a DCAP. Primary care means that the staff member is in charge of a class or activity in which the student participates.
- 1.3. Any bus driver who transports the student when neither a DCP nor DCAP is present must be a BDDCP.

2. TRAINED PERSONNEL

2.1 The following school staff members (including teachers, counselors, health aides, cafeteria and lib Care Providers (DCPs) by <u>Casey Flickerman</u>	rary staff) v	will be trained to		es
2.2 The following School staff members (including teachers, counselors, health aides, cafeteria and lib Care Assistant Providers (DCAPs) by	rary staff) v	will be trained to		es
2.3 The following bus drivers will be trained to be (BDDCP) by(date):	come Bus I	Oriver Diabetes (Care Providers	
3 STUDENT'S LEVEL OF SELF-CARE The student's current ability to perform various disactivities check in the chart below:	abetes self-	management skil	lls is indicated b	y
	Yes	No	N/A	
Totally independent management (only requires adult assistance during severe hypoglycemia)		X		
Student tests blood glucose level independently		X		
Student needs verification of blood glucose number by (circle one or both) DCP DCAP	er	X		
Blood glucose testing to be done by DCP	X			

Student administers insulin independently			
Student self-injects insulin with verification of dosage by <i>(circle one or both)</i> DCP DCAP		X	
Insulin injections to be done by DCP			
Student self-treats mild hypoglycemia	X		
Student requires assistance to treat mild hypoglycemia from:(circle one or both) DCP DCAP	X		

4 SNACKS AND MEALS

- 4.1 A DCP will work with the student and his/her parents/guardians to coordinate a meal and snack schedule in accordance with the attached Health Care Plan that will coincide with the schedule of classmates to the closest extent possible. The student shall each lunch at the same time each day, or earlier if experiencing hypoglycemia. The student shall have enough time to finish lunch. A snack and quick-acting source of glucose must always be immediately available to the student.
- 4.2 The parents/guardians will pack snacks for each day and will provide a supply of additional snacks to be kept at the school to treat hypoglycemia or for emergency situations.
- 4.3 All school personnel will permit the student to eat a snack in the classroom or wherever the child is (including, but not limited to classrooms, gym, auditorium, playground, field trips, and school bus) at times designated in the Health Care Plan and whenever needed to treat hypoglycemia or in response to a change in the student's regular schedule. A source of glucose will be immediately available wherever the student is.
- 4.4 A designated DCP or DCAP will ensure that the student takes snacks and meals at the specified time(s) each day.
- 4.5 The attached Health Care Plan sets out the regular time(s) for snacks each day, what constitutes a snack, when the student should have additional snacks, and where snacks are kept.

5 WATER AND BATHROOM ACCESS

- 5.1 The student shall be permitted to have immediate access to water by keeping a water bottle in the student's possession and at the student's desk, and by permitting the student to use the drinking fountain without restriction.
- 5.2 The student shall be permitted to use the bathroom without restriction.

6. TREATING HIGH OR LOW BLOOD SUGAR

- 6.1 The student shall have immediate access to blood glucose testing equipment, insulin and syringes, and to glucose in the form of food, juice, glucose gel or tablets in order to treat hypoglycemia. The student shall be permitted to carry this equipment with him/her at all times.
- 6.2 When any staff member believes the student is showing signs of high or low blood sugar, the staff member will seek a designated DCP for further assistance while making sure an adult stays with the student at all times. Never send a student with actual -- or suspected -- high or low blood sugar anywhere alone.
- 6.3 High or low blood sugar levels should be treated as set out in the attached Health Care Plan.

Approved and received:

Primrose Exerdeen	7/15/20	
Parent/Guardian	Date	
Parent/Guardian Approved and received:	Date	
school official School Representative and Title		