# Public Agency Placement of Students With Disabilities in Private Schools

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*Note: This document was updated to comply with Michigan Department of Education standards for accessibility. No other content changes were made.* 



Michigan Department of Education Office of Special Education



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#### Michigan Department of Education (MDE)

Office of Special Education P.O. Box 30008 Lansing, MI 48909 888-320-8384 <u>MDE website</u> (www.michigan.gov/mde)

## Public Agency Placement of Students With Disabilities in Private Schools

It is the policy of the state of Michigan that if a student with a disability is placed in or referred to a private school or facility by a public agency for the purpose of providing a free appropriate public education (FAPE) to the student, special education and related services will be provided to the student in conformance with an individualized education program (IEP) that meets the requirements of the law, at no cost to the parents, and at a school or facility that meets the standards that apply to the state and local educational agencies (LEA), including Part B requirements. Whenever private placements are made by a public agency, the student and parents have all the rights of a student with a disability available to them under the Individuals with Disabilities Education Act (IDEA) and Michigan laws. Public agencies ensure that a representative of the private school attends or participates in the meetings to develop IEPs for students who may be placed in private schools.

When contemplating a private school placement, the IEP must describe the FAPE in the least restrictive environment and can recommend a private facility. The IEP should not determine a facility. The state must approve the facility per the IDEA at 34 CFR §§ 300.145 through 300.146.

### Criteria

The following criteria must be met in order for private placement to be considered:

Placements are based on the identified needs of individual students with disabilities as documented in their respective IEPs.

The superintendent of the applicant district assures that:

- 1. The school is currently licensed OR approved as a private school within the state in which a student shall be placed;
- 2. All administrative personnel are licensed or otherwise approved to fulfill their assigned responsibilities;
- 3. All instructional and support personnel necessary to implement the student's IEP have the required qualifications and credentials necessary to carry out their responsibilities; and
- 4. The private school is capable of educating the student with his/her identified disability and able to fulfill the programs and services identified in the IEP.

Michigan Department of Education, Office of Special Education

### Application

The Application for Private School Placement must be completed and submitted to the Michigan Department of Education (MDE) for approval.

### Contract

A contract between the private school and the resident/applicant school must be completed.

The contract must include:

- An assurance that the private school will fulfill the obligations of the student's IEP;
- 2. An assurance that the applicant district will conduct an IEP meeting for the student at least annually and conduct reevaluations as required;
- 3. An itemization of costs associated with the placement in the private school AND what agency is responsible for payment. At a minimum, this itemization shall include:
  - a. Tuition;
  - b. Room and Board;
  - c. Medical and Therapy Costs;
  - d. Related Services; Costs; and
  - e. Transportation Costs and Frequency of Transportation to and From Home
- 4. An assurance that the administration of the private school has agreed to inform the superintendent of the applicant district of any changes to the conditions above.

## Application for Facility Approval for Private School Placement

## **PART A: Resident/Applicant District Only** School Year: Applicant District Name: Superintendent: **Special Education Director: District Street Address:** District City, State, Zip: **District Phone Number:** Intermediate School District Name: **ISD** Contact: **ISD Phone Number:** Student Name: Student Date of Birth: Student Street Address: Student City, State, Zip: Parent/Guardian Name: School District of Residence: Parent/Guardian Street Address: Parent/Guardian City, State, Zip: Parent/Guardian Phone Number: Student's Current District of Residence:

Current District of Operation for the Student's IEP:

Describe the factors leading up to the Individualized Education Program (IEP) team determination that a private placement was necessary. Attach an additional sheet if necessary.

What were the circumstances that the student's needs could not be met through the applicant's school district? Attach an additional sheet if necessary. Describe any other public or private placements that were considered and the reasons for rejection. Attach an additional sheet if necessary.

Describe any unique programming or services that are provided by the selected private placement to meet the student's needs. Attach an additional sheet if necessary.

The superintendent of the applicant district assures that:

- 1. The school is currently licensed OR approved as a private school within the state in which a student shall be placed;
- 2. All administrative personnel are licensed or otherwise approved to fulfill their assigned responsibilities;
- 3. All instructional and support personnel necessary to implement the student's IEP have the required qualifications necessary to carry out their responsibilities; and
- 4. The private school is capable of educating the student with his/her identified disability, and is able to fulfill the programs and services identified in the IEP.

#### PART B: SIGNATURES AND ASSURANCES

The superintendent of the applicant district and the intermediate school district have read this application and, to the best of their knowledge, assures the information contained in, attached to, or enclosed with this application is true and accurate.

Applicant District Superintendent

Date

Intermediate School District Superintendent Date

The parent(s) or guardian(2) responsible for the student has read this application and agrees with the information provided.

Parent/Guardian

Parent/Guardian

Date

Date

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