Enter District Name Here

**Determination of Educational Representative**

Complete this form at the time of referral for a student who is suspected of needing special services and at the time of enrollment for a student who is transferring into the district and received special education services from another district.

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| Student’s Full Name: |  | SSID: |  |
| Date of Birth: |  | Grade: |  |
| School: |  | | |

1. The student is represented by natural or adoptive parent(s) or a legal guardian. If guardian, attach official copy of court order appointing guardian.

2. The student’s parent(s), as applicable, has/have given permission for a relative/friend with whom his/her child is residing to act as a parent in educational decision-making. Attach a copy of the written statement from the:

Parent(s), as applicable, verifying that the parent(s) are allowing the individual to act as the parent in educational decision-making.

3. The student is, or had been, married. Student represents self. Attach official copy of proof of marriage.

4. The student is 18 over and does not have a court-appointed guardian. Student represents self.

5. The student is 18 or over, has been declared incompetent by court order, and is represented by a guardian. Attach official copy of court order appointing guardian.

6. The student is under 18, but is emancipated by court order. Student represents self. Attach official copy of court order emancipating the student.

**Determination of need for surrogate parent**

7. The student’s parents are unknown. Attach written verification.

8. The student’s parents have not been located after reasonable efforts. Attach copy of written documentation of efforts.

9. The rights of the biological or adoptive parents have been terminated and the student is committed to the state. Attach official copy of both court orders.

**If 7, 8, or 9 apply to the student, a surrogate parent must be appointed.**

**Send to DoSE. (707 KAR 1:280)**

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| **Educational Representative** | **Address** | **Phone** |
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| **ARC Chairperson** | **Signature** | **Date** |
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