



NORTH CAROLINA DEPARTMENT OF PUBLIC INSTRUCTION

Catherine Truitt, Superintendent of Public Instruction
www.dpi.nc.gov

Early Learning Sensory Support Program - Visual Impairment
2022/2023 Request for Services Form

Child's Name: _____ DOB: _____ Sex: [] male [] female
Race: _____ County: _____ Parents' Names: _____
Address: _____ Cell phone: _____ Home: _____
Primary Language of Parent: _____ Child: _____ Visual Diagnosis: _____
Interpreter/Translation needed (Y/N) _____ If child is in legal custody of someone other than the person with whom he/she lives,
complete the following: Legally Responsible Party: _____ Phone: _____
Address: _____ E-mail: _____

REQUEST FOR SERVICES SOURCE AND CONCERNS:

Local Education Agency Making Request: _____
Is this request the result of an IEP decision? [] Yes [] No Contact Person: _____
Phone: _____ Fax: _____ E-mail: _____

For NEW Requests the most current eye report or medical report related to vision is requested. Fax to 919-733-1873 For questions please call 984-292-3063

Table with 4 columns: Assessments being Requested (Please check all that apply), Due Date, Address, ELSSP to Complete (Accept or Decline). Rows include Functional Vision Assessment, Learning Media Assessment, Orientation & Mobility (O&M), and Other (please specify).

Table with 4 columns: Services being Requested (Please check all that apply), Frequency and Intensity, Address, ELSSP to Complete (Accept or Decline). Rows include SDI for vision related goals, Orientation & Mobility (O&M), Supports for School Personnel from Teacher of the Visually Impaired, Supports for School Personnel from O&M Specialist, ESY Services, and Other (please specify).

Typed Name & Signature of IEP Team Local Education Agency (LEA) Representative _____ Date _____
After review of current program capacity ELSSP will inform the LEA of the decision to accept or decline within 14 days of its receipt.

Signature of ELSSP Lead Contact _____ Date _____

OFFICE OF EXCEPTIONAL CHILDREN

Sherry H. Thomas, Senior Director | sherry.thomas@dpi.nc.gov
6356 Mail Service Center, Raleigh, North Carolina 27699-6356 | (984) 292-3063 | Fax (919) 733-1873
AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER