

APH 2020 Registration Checklist

	1. Child enrolled by January 6, 2020
	2. Child has a written education plan (e.g., 504 Plan, IEP, or other written action plan)
	3. Eye report within 3 years, unless permanent eye condition exists
	4. Parent Permission Form signed only once while child remains in LEA; signed form to remain in LEA EC records
	5. Eligibility Criteria-- Meets the Definition of Blindness: <u>Distance acuity</u> must be 20/200 or less (e.g., 20/400, 20/800) in better eye, using the Snellen Chart; medical terms such as Counts Fingers, Hand Movements, Object Perception, Light Perception, and Totally Blind are <i>acceptable</i> when acuity and/or field measurements cannot be obtained or Functions at the Definition of Blindness: Visual functioning reduced due to brain injury or dysfunction and visual acuity is not possible to determine; must be based upon eye report by certified ophthalmologist, optometrist, or neurologist
	6. Medical Addendum Form or NC Ophthalmological/Optometric Summary Template completed when eye report does not indicate level of visual functioning
	7. Type of Entry— A student included in the 2019 Registration and again in 2020 is recurring ; A student new to the LEA or not previously included is being added ; A student to be removed from the Registration must be deleted
	8. Ensure correct spelling and punctuation of first, middle (if applicable), and last name
	9. Ensure accuracy of birth date
	10. Ensure accuracy of grade level
	11. Obtain date of current or most recent eye report
	12. Review current Learning Media Assessment to identify Primary and Secondary Reading Mediums
	13. Review primary area of IEP eligibility
	14. Indicate if student receives Specially Designed Instruction from a Teacher of the Visually Impaired
	15. Obtain date when Parent Permission Form was signed
	16. Consider additional comments to add to the Registration (e.g., permanent eye condition, date Medical Addendum Form was sent to doctor, date Release of Medical Records Form was sent to doctor, location of previous LEA if child moved in, official name change for child)

Registration Template Preview

A	B	C
LEA name	Type of Entry: Add; Recurring; Delete	If removing student, why? <u>No Parent Permission</u> to exchange information; <u>Student moved</u> out of LEA; <u>Student graduated</u> ; <u>Student died</u> ; Parent(s) <u>withdrew</u> from LEA; Parent(s) <u>declined services</u> ; Student <u>no longer qualifies</u>

D	E	F
Student First Name	Student Middle Name	Student Last Name

G	H
Date of Birth: 00-00-0000	Grade Code: <u>Infants</u> (children birth-2 years of age); <u>Preschool</u> (children 3-5 years of age); <u>Adult</u> students (over age of 21 years); <u>Functional Curriculum</u> (children in grades 1-12 working toward graduation certificate or non-traditional diploma); <u>Transition</u> (students of school age in secondary instructional programs); <u>Kindergarten</u> ; <u>grades 1 through 12</u>

I	J
Date of most recent Eye report: 00-00-0000	Legal Blindness Criteria: <u>Meets</u> the definition; <u>Functions</u> at the definition

K	L	M
Primary Instructional Language of Learner	Primary Reading Medium: <u>Visual</u> (primary print user); <u>Braille</u> (primary braille user); <u>Auditory</u> (primary auditory learner); <u>Prereader</u> (working towards a readiness level-- infants, preschoolers, or older students with reading potential); <u>Nonreader/Symbolic</u> (non-reading students and students who don't fall within any other categories)	Secondary Reading Medium: <u>Visual</u> (primary print user); <u>Braille</u> (primary braille user); <u>Auditory</u> (primary auditory learner); <u>Prereader</u> (working towards a readiness level-- infants, preschoolers, or older students with reading potential); <u>Nonreader/Symbolic</u> (non-reading students and students who don't fall within any other categories)

N	O
<p>Primary Eligibility on IEP: <u>Home school</u> student; <u>Adult served</u> in residential care facility; Child on <u>IFSP</u>; <u>504 Plan</u>; <u>Autism</u>; <u>Deaf-Blindness</u>; <u>Deafness</u>; <u>Developmental Delay</u>; <u>Hearing Impairment</u>; <u>Intellectual Disability</u> (Mild-Moderate-Severe); <u>Multiple Disabilities</u>; <u>Orthopedic Impairment</u>; <u>Other Health Impaired</u>; <u>Specific Learning Disability</u>; <u>Speech or Language Impairment</u>; <u>Traumatic Brain Injury</u>; <u>Visual Impairment</u></p>	<p>Does student receive Specially Designed Instruction from a Teacher of the Visually Impaired? Yes; No</p>

P	Q
Does the LEA have signed parental permission? Yes; No	Date of Parental Consent 00-00- 0000

R
Comments