

## School Administrative Unit #24

Districts of

Stoddard      Henniker      Weare      John Stark

### **HEARING IMPAIRMENT ELIGIBILITY DETERMINATION FORM**

**Student:**

**Date:**

**DOB:**

**School:**

**Grade:**

1. ☐ YES ☐ NO The student has an impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance but that is not included under the definition of deafness.
2. ☐ YES ☐ NO Evaluation information confirms there is an adverse effect on educational performance, academic or social interactions.

Supporting Evidence:

3. ☐ YES ☐ NO Evaluation confirms that limited English proficiency was not a determinant factor in the eligibility decision.
4. ☐ YES ☐ NO Does the student require specialized instruction?

The Special Education Team used the above determination of the evaluation data to determine:

- ☐ The student has a hearing impairment and requires special education and related services in order to benefit from education.
- ☐ The student has a hearing impairment and does not require specialized instruction.
- ☐ The student does not have a hearing impairment.
- ☐ Evaluation data was insufficient to determine eligibility. Additional assessments and/or data in the area(s) of:

will be obtained/collected. The Special Education Team will reconvene by \_\_\_\_\_ to review and determine eligibility.