## **School Administrative Unit #24**

Districts of

John Stark Henniker Weare Stoddard

## OTHER HEALTH IMPAIRMENT (OHI) ELIGIBILITY DETERMINATION FORM

Student:				Date:		
DOB:			School:	Grade:		
The Special Education Team determines a student has the disability of other health impairment and is eligible for specially designed instruction and related services when:						
The Special Education Team compared and analyzed evaluation data and documents the following interpretation:						
1.	☐ YES	□NO	Does the student have limited strength, vitality or heightened alertness to environmental stimuli in t			
2.	YES	YES NO If yes to question #1, is the limited strength, vitality or alertness, including a heightened alertness to environmental stimuli due to a documented chronic or acute health problem such as asthma, attention deficit disorder or attention deficit hyperactivity, disorder, diabetes, epilepsy, heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia, and Tourette syndrome; (attach documentation of diagnosis).				
3.	☐ YES	□NO	Evaluation information confirms there is an advers	e effect on educational		
Supporting Evidence:						
4.	☐ YES	□ №	Does the student require specialized instruction?			
5.	☐ YES	□ NO	Evaluation confirms that limited English proficience in the eligibility decision.	y was not a determinant factor		
The	Special E	ducation T	eam used the above determination of the evaluatio	n data to determine:		
	The student has an Other Health Impairment and requires special education and related services in order to benefit from education.					
	The student has an Other Health Impairment and does not require specialized instruction.					
	The student does not have an Other Health 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.				

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