Appendix G: Request for Modified Schedule

To be completed by First Class Pre-K Site Director and submitted to the Regional Director.

Please note that if a child has a current IEP (Individualized Education Program), please disregard this form and consult with the IEP team for any modification(s) to the child’s schedule.

Name of Class: ______________________________________________ County: _________________________________
Coach: ___________________________________________ Monitor: _______________________
Lead Teacher: __________________________________________ Email: _______________________
Site Director Submitting Request: ____________________________________________________________
Contact Number: __________________________________________ Date Submitted: _______________________
Do you have any other modified schedule? Yes ☐ No ☐
Child’s Name: _______________________ Diagnosis (if applicable): _______________________
Is anyone from the local school system coming into your classroom to assist this child? Yes ☐ No ☐
If yes, how often? __________________________________________________________
Has the child been referred for testing with results? Yes ☐ No ☐
Is the child ineligible for services? Yes ☐ No ☐
If the child does not have an IEP, have the parents agreed to a referral for special education testing? Yes ☐ No ☐
Do you have your Coach’s support for this modified schedule? Yes ☐ No ☐
Modified Schedule Request ☐ Approved ☐ Denied Date: _______________________
Regional Director verified child’s schedule: _______________________________________________________
Comments: ____________________________________________________________
Date modified schedule lifted: ______________________________________________________

Please describe examples of how this child requires more time from both teachers than other children in the classroom. Be as detailed as possible. We rely on this information to support our decision:

1. Specific reason(s) a modified schedule is being requested.
2. Interventions already implemented to help the child benefit from the program.
3. Information including all documentation of written correspondence and meeting notes detailing ongoing involvement with parents/family, including the discussion regarding a special education referral.
4. Behavioral documentation and instructional observations of the child to support the modified schedule request.
5. Any additional documentation parents/family voluntarily provides, such as documentation of consultation with any other outside resources (ie: child’s pediatrician, counseling services, or local school system).
6. A written schedule including the length of the child’s proposed day, proposed daily schedule including times and the activities during this time period, and the justification for the proposed schedule.
7. A written plan describing how the child’s attendance will be increased over time to the typical 6.5 hour day.