

# Special Needs Funding Level 2 and 3

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November 2016

Manitoba Education and Training publishes the *Funding of Schools* booklet each year which outlines the base support grants and categorical grants provided to school divisions.

➤ All students are funded students: per pupil grant, Categorical grants (e.g. ENI, AAA, EAL, etc).

➤ In addition, some grants target students with special needs specifically:

- Student Services Grant
- Clinician/Coordinator Grant

These grants are used by school divisions to provide a continuum of supports for students with special needs.

➤ In addition to those, there are also categorical grants that are student specific

- Level 2 and Level 3 grants are provided to school divisions to help reimburse costs when students with severe to profound needs meet established funding criteria.

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### Related Links

- Public Schools Enrolment and Categorical Grants
- A Statistical Profile of Education in Manitoba
- FRAME Manual

### Finance and Statistics



#### Funding of Schools 2016/2017 School Year

[Funding of Schools 2016/2017 School Year](#) (PDF 592 KB)

This brief summary is intended to be an easy-to-read reference guide describing funding for the 2016/2017 school year.

For funding of schools report from 2015/2016 school year:  
[Funding of Schools 2015/2016 School Year](#)



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<http://www.edu.gov.mb.ca/k12/finance/schfund/index.html>

## Low Incidence Level 2 and 3 Support

### **Level 2 Support - \$9,500 per student**

Funding eligibility criteria for Level 2 support are based on the student's profile of need and level of support required for a major portion of the school day, and full time attendance.

### **Level 3 Support - \$21,130 per student**

Funding eligibility criteria for Level 3 support are based on the student's profile of need and level of support required for the entire school day, additional specialized supports provided by the school division/district, and programming requirements significantly beyond those established for Level 2 support.

# How can you use Level 2/3 funding?

- Intended to be a reimbursement for costs associated with the exceptional needs of the student for whom you are applying
  
- Must benefit the student for whom you are applying
  
- For example:
  - EA time
  - Resource teacher or Counsellor time
  - Clinician time
  - Assistive technology

## Criteria for Level 2 Categories

**Severe multiple-disabilities (MH2):** The student has a combination of two or more severe disabilities that produce severe multiple developmental, behavioural, and/or learning difficulties. The student may have a severe cognitive disability compounded by a physical disability so severe that s/he requires student specific programming (e.g. adaptation and/or modification or individualized programming), beyond the usual educational programming provided for students with moderate special needs. If the student does not have a cognitive disability, s/he may display two or more severe physical disabilities and consequently requires intensive assistance and/or supervision throughout a significant proportion of the school day. [Annotated descriptor](#).

## Criteria for Level 2 Categories

**Severe** On the Special Needs Funding website, following the two or more criteria for each category, there is a link to an Annotated descriptor which provides more detailed information about what to include on the funding application form.

two or more criteria for each category, there is a link to an Annotated descriptor which provides more detailed information about what to include on the funding application form.

developed and/or modification or individualized programming provided for students with moderate special needs. If the student does not have a cognitive disability, s/he may display two or more severe physical disabilities and consequently requires intensive assistance and/or supervision throughout a significant proportion of the school day. [Annotated descriptor](#).

**Moderate Autism Spectrum Disorder (ASD2):** The student has a diagnosis of an ASD that is expressed in significant difficulties with social interaction, verbal and non-verbal communication, and a narrow pre-occupation with a fixed range of interests and activities.

Secondarily, the student may have a significant cognitive disability or delays in adaptive skill development resulting in the need for assistance with activities of daily living during the school day. The student also demonstrates persistent patterns of behaviour that interfere with his/her ability to learn. The student requires student specific programming, such as adaptation and/or modification beyond the usual education programming provided for students with moderate special needs for a major portion of the school day.



**Deaf or hard of hearing (HOH2):** The student is confirmed to have a permanent bilateral moderate to severe hearing loss, based on a comprehensive assessment administered by a qualified specialist. Due to a hearing loss that has significantly affected the development of speech and/or language, the student requires student-specific planning and significant adaptations to participate effectively and benefit from instruction for a major portion of the school day.

**Severely visually impaired (VI2):** The student's vision is impaired to the degree that he or she requires extensive adaptations to the learning environment and specifically to print medium, including magnification for all print use. Student specific planning and support are required to participate effectively and benefit from instruction for a major portion of the school day. This may include direct instruction in Braille and Orientation and Mobility.

**Very severely emotionally/behaviourally disordered (EBD2):** The student exhibits severe emotional/behavioural disorder(s) characterized by significant behavioural excesses or deficits which disrupt the student’s thinking, feeling, mood, ability to relate to others, and daily functioning. Beyond the emotional impact, the student’s physical, social and cognitive skills may be affected. These behaviours continue over a period of time. The student requires student specific programming and supports with ongoing formal interagency involvement.

**Other (OTH2):**

Special conditions can be considered when the profile of need is severe to profound and the intensity of supports provided are commensurate with the level of need, but these needs and supports do not appear to fit under other level 2 categories.

## Criteria for Level 3 Categories

**Profound multiple-disability (MH3):** The student has a combination of extremely severe disabilities that produce profound multiple developmental, behavioural, and/or learning difficulties. The student may have a severe cognitive disability compounded by a physical disability so severe that s/he requires student specific programming (e.g. adaptation and/or modification or individualized programming), throughout the school day. If the student does not have a cognitive disability, s/he may display two or more extremely severe physical disabilities and consequently requires intensive assistance and/or supervision throughout the school day.

**Severe to Profound Autism Spectrum Disorder (ASD3):** The student has a diagnosis of an ASD that is expressed in severe and pervasive difficulties in social interaction, verbal and non-verbal communication, and a narrow range of interests, activities, and behaviours. In addition, the student has a significant cognitive disability with corresponding delays in adaptive skill development. Secondly, the student may also experience severe difficulty with managing change in daily routines and activities, severe reactions to sensory stimuli, and a persistent pattern of behaviours that are dangerous to him/her self or others. The student requires student-specific programming (e.g. adaptation and/or modification or individualized programming) and intensive support throughout the school day.

**Deaf (HOH3):** The student is confirmed to have a permanent bilateral severe to profound hearing loss (based on a comprehensive assessment administered by a qualified specialist) that affects communication so profoundly that s/he requires student specific planning, extensive adaptations and support throughout the school day to participate effectively and benefit from instruction in the educational setting.

**Blind (VI3):** The student's vision is impaired to the degree that he or she requires extensive adaptations to the learning environment, and specifically to print medium. Student specific planning and support are required throughout the school day to participate effectively and benefit from instruction in the educational setting. This may include direct instruction in Braille and Orientation and Mobility.

**Profoundly emotionally/behaviourally disordered (EBD3):** The student exhibits profound emotional/behavioural disorders and associated learning difficulties requiring highly specific programming and intensive support services at school and in the community. This applies to the student:

- who is a danger to self and/or to others and whose actions are marked by impulsive, aggressive, and violent behaviour
- whose behaviour is chronic -- the disorder persists over a lengthy period of time
- whose behaviour is pervasive and consistent -- the disorder negatively affects all environments, including home, school, and community
- who requires or receives a combination of statutory and non-statutory services from Manitoba Education and Training, The Department of Families, the Department of Health, Seniors and Active Living, and/or Justice as defined within the *Child and Family Services Act*, the *Mental Health Act*, and the *Youth Criminal Justice Act*.

## Unified Referral and Intake System (URIS) Group A Healthcare Procedures:

URIS funding is available for students who require one or more of the following complex medical procedures that must be performed by a registered nurse:

- ventilator care
- tracheostomy care
- suctioning (tracheal/pharyngeal)
- nasogastric tube care and/or feeding
- complex administration (e.g., via infusion pump, nasogastric tube, injection other than EpiPen or equivalent)
- central or peripheral venous line interventions
- other clinical interventions

Level 2 and 3 funding information and forms can be found at:

<http://www.edu.gov.mb.ca/k12/specedu/funding/index.html>

“Student Services Information for Parents” can be found at:

<http://www.edu.gov.mb.ca/k12/specedu/parent/index.html>



## Level 2 and 3 Funding Process

- There are 3 funding periods and 4 funding deadlines per year.
- If you are unsure whether a student may meet criteria, check with your Student Services Administrator before writing the application.
- Communication with parents
- Completed, signed applications are submitted to your Student Services Administrator.
- Student Services Administrator screens the applications before submitting them to the Funding Review Team.

## Funding Decision Form

- The Funding Review Team consists of Manitoba EAL staff, all have extensive experience working in school divisions with students with special needs.
- Once the funding review team receives the applications from the Student Services Administrator of a school division, each application is reviewed, based on the Criteria for Level 2 or 3 funding support.
- The funding team members complete a **funding decision form** to document the decision-making process.
- The **funding decision form** aligns with the information provided on the funding application, as well as the Criteria for Level 2 or 3 funding support and annotated descriptors.

## Additional Information Requests

- Additional information is requested if information that has not been provided or communicated in sufficient detail to determine eligibility for funding.
- Additional Information Requests are sent to Student Services Administrators, who review them and gather the necessary information from school teams.
- The funding review team then combines the additional information with the original application to make a funding decision. Please do not re-send original application.

## Level 2 and 3 Funding Re-read Process

- Re-read request are to be submitted within 10 days of your school division receiving funding results.
  
- Re-read requests should contain:
  - Student name, MET #
  - New information not contained in the original application
  - Please do not re-submit the original application
  
- If you have questions regarding a funding decision after receiving re-read results, contact your Student Services Administration for clarification.

## Eligibility Criteria

To be considered eligible for special needs Level 2 and 3 funding, a student must:

- Be registered in the school division submitting the application
- Be receiving a full day of programming in school or an appropriate alternative setting, or 3 high school credits per semester
- Meet the specific criteria for level 2 or 3 funding

## Determining Maximum-Year Funding

To be considered for maximum-year funding:

- The student must have a life-long disability (EBD not considered life-long)
- The application must be complete and thorough
- The student must be receiving the equivalent of a full day of programming
- The student must not have significant attendance issues

## Determining Multi-Year Funding

To be considered for multi-year funding:

- The student must have a disability that requires long-term intervention
- The application must be complete and thorough
- The student must be receiving the equivalent of a full day of programming
- The student must not have significant attendance issues
- Number of years match developmental transition times (i.e. grades 4, 8, 12)

## Multi- and Maximum-Year Funding

- Continuation of Multi- and Maximum-year funding for any given student is dependent upon continuing to meet eligibility criteria



## Final year of funding to consolidate gains

- Current application no longer meets the criteria in the funding guidelines
- Student has been funded for 1 or more years
- In recognition of need for time to transition student to other types of supports, a final year of funding is provided
- Can reapply if profile of need changes such that meets the criteria in the funding guidelines once again

## Attendance

- The student is present in a school or an appropriate alternative setting for the prescribed length of the school day
- Attendance is reported when a funding application is submitted
- Funding could be granted at 50% or denied as the student would not meet criteria

# Low Incidence Funding Attendance Reporting Process

## June

- By June 15, school divisions and funded independent schools electronically submit annual attendance reports for all students receiving special needs funding level 2 or 3

## October-November

- Members of the attendance working group make follow up contact with school divisions and funded independent schools to discuss students whose attendance was reported to be <70%
- Level 2/3 funding could be reduced to 50% or deferred if attendance continues to be an issue . . . . .

# Student Services Review and Reporting (SSR&R) Process

Manitoba Education and Training implements the process on a three year cycle working with school divisions to:

- Follow-up on recommendations from previous SSR&R report.
- Identify how school divisions are identifying and responding to the needs of students with special needs
- Verify that the funding is being used to support the students for whom it was intended
- Discuss the Student Services Grant as it relates to the Standards for Student Services and the continuum of supports provided.

## SSR&R (continued)

- review Individual Education Plans (IEPs) for each student to be observed during the process as compared to the Standards for Student Services
- Engage in dialogue with schools/school divisions about policy, programming, services, and supports for students with exceptional learning needs
- Identify recommendations as a result of the review.

# **The Low Incidence Funding Application**



**SPECIAL N  
FUNDING APPL**

Date:

Student:

M.E.T. Number:

Student Enrolment Co

D.O.B: Day:      Month

Category and Level a

**Current Information (functional adaptive skills):**

- This section is intended for information from informal assessment/observation.
- It is divided into eight domains.
- Each domain begins with a checkbox for use when a student is functioning at an age-appropriate level or shows no difficulty in the domain.
- If the student is experiencing difficulty in that domain, use the space below to describe their functional adaptive skills and the supports required to address his or her learning needs.

**Please use point form wherever possible.**

**1. CURRENT INFORMATION**

**I. Academic**

\_\_\_ At, or above, grade level.

If not, please describe current level of achievement and reasons for the delay:

Please describe resources/interventions/support staff/specialized equipment identified in the student's plan to address needs in this domain:



# SPECIAL NEEDS CATEGORICAL FUNDING LEVELS 2 & 3 FUNDING APPLICATION FORM FOR THE SCHOOL YEAR \_\_\_\_\_

Date:

Student:

School:

M.E.T. Number:

School Division:

Student Enrolment Code:

D.O.B: Day:      Month:

Category and Level assigned:

**Please use point form**

Descriptions of resources and interventions related to each domain:

- Should match the needs identified in that domain
- Should be brief and in point form.
- Should include an estimate of the amount of time required
- May include school-based, divisional or community supports.

## 1. CURRENT INFORMATION

### I. Academic

\_\_\_ At, or above, grade level

If not, please describe current level of achievement and reasons for the delay:

Please describe resources/interventions/support staff/specialized equipment identified in the student's plan to address needs in this domain:

## SPECIAL NEEDS CATEGORICAL FUNDING LEVELS 2 & 3 FUNDING APPLICATION FORM FOR THE SCHOOL YEAR \_\_\_\_\_

Date:

Student:

School:

M.E.T. Nu

Academic –

Student E

If the student is not achieving at grade level, indicate what grade level the student is achieving at.

D.O.B: Da

Category

Note: For the purpose of this application, academic achievement at or close to grade level will be considered indicative of normal cognitive development (i.e., no WISC required).

Please use

### 1. CURRENT INFO

#### I. Academic

\_\_\_ At, or above, grade level.

If not, please describe current level of achievement and reasons for the delay:

Please describe resources/interventions/support staff/specialized equipment identified in the student's plan to address needs in this domain:

## II. Communication

Primary communication mode: Speech \_\_\_ ASL \_\_\_ AAC \_\_\_ Other \_\_\_

\_\_\_ Age-appropriate communication skills.

If not, please describe:

i. Receptive language

ii. Expressive language

Communication –

- Describe the student’s expressive and receptive communication skills.
- Description may include verbal and non-verbal communication skills.

Please describe:

\_\_\_ identified in the student’s plan to address needs in this domain:

## III. Social/Emotional

\_\_\_ No current social/emotional concerns.

If there are social/emotional concerns, please describe:

Description	Frequency

**II. Communication**

Primary communication

\_\_\_ Age-appropriate communication

If not, please describe:

i. Receptive language

ii. Expressive language

Social/emotional – Describe the social/emotional concerns: these may adversely impact social relationships and/or limit the student’s potential to learn or participate in school or community activities, but are not dangerous to the student or others (for example, tantrums, swearing, withdrawal).

Please describe resources/interventions/support staff/specialized equipment identified in the student’s plan to address needs in this domain:

**III. Social/Emotional**

\_\_\_ No current social/emotional concerns.

If there are social/emotional concerns, please describe:

Description	Frequency

## II. Communication

Primary communication mode: Speech \_\_\_ ASL \_\_\_ AAC \_\_\_ Other \_\_\_

\_\_\_ Age-appropriate communication skills.

If not, please describe:

i. Receptive language

ii. Expressive language

Please describe results identified in the

### Description:

- What does the social/emotional behaviour look like?
- Describe the intensity, duration, and the context of the social/emotional behaviour.

## III. Social/Emotional

\_\_\_ No current social/emotional concerns.

If there are social/emotional concerns, please describe:

Description	Frequency

## II. Communication

Primary communication mode: Speech \_\_\_ ASL \_\_\_ AAC \_\_\_ Other \_\_\_

\_\_\_ Age-appropriate communication skills.

If not, please describe:

i. Receptive language skills:

ii. Expressive language skills:

Please describe resources/interventions identified in the student's IEP:

Frequency:

- Provide a frequency count based on days, weeks, or months. For example, 3/day, or 7/month, etc.
- Do not simply state “daily,” “weekly,” or “monthly.”

## III. Social/Emotional

\_\_\_ No current social/emotional concerns

If there are social/emotional concerns, please describe:

Description	Frequency

#### IV. Self-Management

\_\_\_ Age-appropriate self-management skills (as outlined below)

If not, describe the current functional skills in the relevant area(s):

- i. Eating
- ii. Grooming
- iii. Dressing
- iv. Toileting
- v. Other self-management skills

Please describe resources identified in the student's

Self-management – describe the student's functional adaptive skills. Be specific.  
e.g., If a student needs help with toileting, say what kind of help the student needs: e.g., “The student is diapered and requires 2 adults to change him 3-4 times per day”.  
Describe the level of prompting required to do a task: e.g. hand-over-hand, physical, visual, verbal, etc.

#### IV. Self-Management

\_\_\_ Age-appropriate self-management

If not, describe the current functioning

- i. Eating
- ii. Grooming
- iii. Dressing
- iv. Toileting
- v. Other self-management concerns (e.g., safety)

#### Other self-management concerns

- Describe adaptive functioning in the school, home, community compared to other students his/her age
- describe factors that may place a student at risk for accident and/or injury (e.g., falling, eating inedible objects).

Please describe resources/interventions/support staff/specialized equipment identified in the student's plan to address needs in this domain:



## V. Special Health Care Needs

No special health care needs

If there are special health care needs:

Please describe resources/interventions identified in the student's plan to address these needs:

Special health care needs – describe any special health care needs that require adult support. Note: Refer to the URIS manual for URIS Group A criteria and Group A application form.

## VI. Motor Skills

Age-appropriate motor skills.

If not, please describe:

i. Gross Motor Skills/Mobility:

ii. Fine Motor Skills:

Please describe resources/interventions/support staff/specialized equipment identified in the student's plan to address needs in this domain:

## V. Special Health Care Needs

\_\_\_ No special health care needs

If there are special health care ne

Please describe resources/interventions  
identified in the student's plan

## VI. Motor Skills

\_\_\_ Age-appropriate motor skills

If not, please describe:

i. Gross Motor Skills/Mobility:

ii. Fine Motor Skills:

Please describe resources/interventions/support staff/specialized equipment  
identified in the student's plan to address needs in this domain:

Motor Skills – Be specific. Describe the student's functional motor and mobility skills (e.g., uses wheelchair, walker). Under what conditions is it needed? (e.g. to transport to and from school and on field trips or longer outings) Can the student operate the wheelchair independently? If not, under what conditions is adult assistance required? (e.g. adult assistance required only on longer outings-30 minutes or more)

## VII. Sensory

### i. Vision

\_\_\_ Vision within normal range

If not, please describe:

### ii. Hearing

\_\_\_ Hearing within normal range.

If not, please describe and attach a recent audiogram:

### iii. Other sensory needs – Please describe:

Please describe resources/interventions/support staff/specialized equipment identified in the student's plan to address needs in this domain:

Sensory – describe whether the student has difficulty with vision or hearing.

## VII. Sensory

### i. Vision

\_\_\_ Vision within normal range.

If not, please describe:

### ii. Hearing

\_\_\_ Hearing within normal range.

If not, please describe:

### iii. Other sensory needs

Please describe resources/assistive equipment identified in the student's IEP in this domain:

For vision, provide information describing:

- visual acuity (for example, 20/200, light perception only, no measurable acuity, etc.)
- the student's primary learning mode (visual, tactile, or dual – both visual and tactile)
- the student's primary mode for reading and writing (for example, print, large print, magnified large print, or Braille)
- whether the student's vision is stable or deteriorating

## VII. Sensory

### i. Vision

\_\_\_ Vision within normal range.

If not, please describe:

### ii. Hearing

\_\_\_ Hearing within normal range.

If not, please describe and attach a recent audiogram:

### iii. Other sensory needs – Please describe:

Please describe resources/interventions/support staff/specialized equipment identified in the student's plan to address needs in this domain:

For hearing, provide information describing:

- the degree and severity of the loss
- the age of diagnosis and the student's experience with amplification
- whether the loss is stable or deteriorating

Note: A recent audiogram is required for students with a hearing loss.

## VII. Sensory

### i. Vision

\_\_\_ Vision within normal range

If not, please describe:

### ii. Hearing

\_\_\_ Hearing within normal range

If not, please describe and attach a recent audiogram:

### iii. Other sensory needs – Please describe:

Other sensory needs – describe other sensory issues (for example, over or under reaction to touch, smell, taste, visual, and/or auditory stimuli in the student's environment).

Please describe resources/interventions/support staff/specialized equipment identified in the student's plan to address needs in this domain:

### VIII. Behaviour

\_\_\_ No behaviours that are dangerous to self or others.

If there are concerns, please describe behaviour that is dangerous to self and/or others:

Behaviour Description	Frequency of Behaviour

\_\_\_ The above or similar behaviours are evident across living/learning environments.

Also include 2 or 3 recent examples of the most serious/violent behaviours including: date, precipitating incident (if known), specific behaviour and outcome or impact of violence.

In the team’s opinion, state the relevant life experiences and/or other factors underlying or causing the identified behaviours:

Please describe resources/interventions/support staff/specialized equipment identified in the student’s plan to address needs in this domain:

## VIII. Behaviour

\_\_\_ No behaviours that are dangerous to self or others.

If there are concerns about behaviours that are dangerous to self and/or others:

Behaviour Description

Behaviour – Describe challenging behaviours that are dangerous to the student or others.

Note: A profile of behaviours that are primarily oppositional, defiant, impulsive, disruptive are challenging, but typically not consistent with Level 2 criteria.

\_\_\_ The above or similar behaviours are evident across living/learning environments.

Also include 2 or 3 recent examples of the most serious/violent behaviours including: date, precipitating incident (if known), specific behaviour and outcome or impact of violence.

In the team's opinion, state the relevant life experiences and/or other factors underlying or causing the identified behaviours:

Please describe resources/interventions/support staff/specialized equipment identified in the student's plan to address needs in this domain:



### VIII. Behaviour

\_\_\_ No behaviours that are dangerous to self or others.

If there are concerns, please describe behaviour that is dangerous to self and/or others:

Behaviour Description	Frequency of Behaviour

Behaviour Description:

- What does the dangerous behaviour look like?
- Describe the intensity, duration, and the context of the dangerous behaviour.

...s living/learning

...lent behaviours

...behaviour and outcome or

...and/or other factors

underlying or causing the identified behaviours:

Please describe resources/interventions/support staff/specialized equipment identified in the student's plan to address needs in this domain:

## VIII. Behaviour

\_\_\_ No behaviours that are dangerous to self or others.

If there are concerns, please describe behaviour that is dangerous to self and/or others:

Behaviour Description	Frequency of Behaviour

\_\_\_ The above environments.

Also include 2 or 3 including: date, pre impact of violence.

Frequency:

- Provide a frequency count based on days, weeks, or months. For example, 3/day, or 7/month, etc.
- Do not simply state “daily,” “weekly,” or “monthly.”

or

In the team’s opinion, state the relevant life experiences and/or other factors underlying or causing the identified behaviours:

Please describe resources/interventions/support staff/specialized equipment identified in the student’s plan to address needs in this domain:

### VIII. Behaviour

No behaviours that are dangerous to self or others.

If there are concerns, please describe behaviour that is dangerous to self and/or others:

Behaviour Description	Frequency of Behaviour

The above or similar behaviours are evident across living/learning environments.

Also include 2 or 3 examples of behaviours including: date, place, and impact of violence.

In the team's opinion, what are the underlying or causing factors

Put an 'X' beside this statement if the behaviours identified in the table occur in the home, community, or other settings

\*This often gets missed.

Please describe resources/interventions/support staff/specialized equipment identified in the student's plan to address needs in this domain:

### VIII. Behaviour

No behaviours that are a concern.  
 If there are concerns, please describe the behaviours that concern self and/or others:

Behaviour Description

Please describe the most serious dangerous behaviours that have occurred within the past year. If intensive supports are reducing the incidents of severe behaviour, state that clearly and indicate why you feel intensive supports are still necessary (e.g., still acts out dangerously in less structured situations, adult intervention regularly required in order to prevent escalation, etc.). **Do not remove supports so that you have incidents to document here.**

The above or similar behaviours occur consistently across living/learning environments.

Also include 2 or 3 recent examples of the most serious/violent behaviours including: date, precipitating incident (if known), specific behaviour and outcome or impact of violence.

In the team's opinion, state the relevant life experiences and/or other factors underlying or causing the identified behaviours:

Please describe resources/interventions/support staff/specialized equipment identified in the student's plan to address needs in this domain:

## VIII. Behaviour

\_\_\_ No behaviours that are dangerous to self or others.

If there are concerns  
self and/or others:

Behaviour Description

Describe the factors in the student's life that the team believes are the mostly likely reason for the behaviours. Note: information provided must not violate the Youth Criminal Justice Act (YCJA), the Protection of Health Information Act (PHIA), or the Freedom of Information and Protection of Privacy Act (FIPPA). Please do not include personal information about people other than the student for whom you are applying.

\_\_\_ The above or similar  
environments.

Also include 2 or 3 recent incidents including: date, precipitating incident, specific behaviour and outcome or impact of violence.

In the team's opinion, state the relevant life experiences and/or other factors underlying or causing the identified behaviours:

Please describe resources/interventions/support staff/specialized equipment identified in the student's plan to address needs in this domain:

**IX. Additional Student Inform**

Other relevant student information

Additional Student Information – use this section to provide any other relevant student information not captured in the previous domains, including information about resources, interventions, support staff, etc.

## 2. RESULTS OF MOST RECENT FORMAL DIAGNOSIS/ASSESSMENT

Date	Professional (Name and Title)	Results of Diagnosis/Assessment

## 3. ATTENDANCE

Days Attended	
Days Possible	
Percentage (Highlight, Press F9 to Refresh)	%

If days attended are less than 70% of days possible, please give reasons and a detailed plan to improve attendance:

If daily programming provided is less than a full day, please give reasons and a detailed plan to increase to a full programming day:

## 2. RESULTS OF MOST RECENT FORMAL DIAGNOSIS/ASSESSMENT

	Professional (Name and Title)	Results of Diagnosis/Assessment
--	----------------------------------	------------------------------------

Results of Most Recent Formal Diagnosis/Assessment – identify any relevant formal diagnostic / assessment data by providing the date, the name and title of the professional, the name of the assessment tool, and the results of the diagnosis or assessment.

Please note:

- When reporting the results of tests, include the **test scores** and the **type of test score** (for example, percentile, quotient, age-equivalent, grade-equivalent, etc.)
- Please report **complete** test results, not partial ones
- You may wish to consult with the clinician responsible for the assessment results to ensure accurate reporting
- For the purposes of special needs funding, it is not necessary to repeat a cognitive assessment as long as a qualified mental health professional is able to verify that the results of past cognitive assessment(s) remain valid.



## 2. RESULTS OF MOS

Date

Attendance – insert the days attended and days possible, and the percentage is calculated automatically by pressing F9.  
 If attendance is below 70% or the student is receiving less than a full day of programming, indicate the reasons why and what is going to be done to address the issue(s).

## 3. ATTENDANCE

Days Attended	
Days Possible	
Percentage (Highlight, Press F9 to Refresh)	%

If days attended are less than 70% of days possible, please give reasons and a detailed plan to improve attendance:

If daily programming provided is less than a full day, please give reasons and a detailed plan to increase to a full programming day:

**I certify that the information contained in this application is true and accurate.**

\_\_\_\_\_  
Student Services Administrator

\_\_\_\_\_  
Principal

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Signatures – Student Services Administrator  
and School Principal must sign.

## NOTICE TO and CONSENT about PERSONAL INFORMATION and PERSONAL HEALTH INFORMATION

On behalf of my minor age child/ward:

I am 18 years of age or older and:

**I CONSENT** to the collection, disclosure and use of my child's personal information and personal health information for purposes and under the conditions noted above.

**I HAVE BEEN INVOLVED** in an individual planning process for above named child and agree to the proposed plan and funding application to Manitoba Education.

\_\_\_\_\_  
\_\_\_ Parent  
\_\_\_ Legal Guardian (Please indicate title/role and agency)

\_\_\_\_\_  
Date

**I CONSENT** to the collection, disclosure and use of my personal information and personal health information for purposes and under the conditions noted above.

**I HAVE BEEN INVOLVED** in an individual planning process and agree to the proposed plan and funding application to Manitoba Education.

\_\_\_\_\_  
\_\_\_ Student

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On behalf of my minor age c

**I CONSENT** to the collection and use of my child's personal and personal health information for the purposes and under the conditions above.

**I HAVE BEEN INVOLVED** in the planning process for above and agree to the proposed funding application to Manitoba Education.

\_\_\_\_ Parent

\_\_\_\_ Legal Guardian (Please indicate title/role and agency)

\_\_\_\_  
Date

Signatures – parent / legal guardian must sign for non-adult students. **Legal guardian** means court-appointed legal guardian or guardianship established through a provision of the Child and Family Services Act or the Court of Queen's Bench Surrogate Practice Act. The legal guardian of a child is usually the child's social worker working for an agency or authority linked with Child and Family Services. Indicate social worker's name and agency.

Please note:

- Foster parents are not typically legal guardians
- It is understood that parents/legal guardians have had access to the complete application form.

## NOTICE TO and CONSENT about PERSONAL INFORMATION and PERSONAL HEALTH INFORMATION

On behalf of my minor age child/ward: \_\_\_\_\_ I am 18 years of age or older and:

**I CONSENT** to the collection, use and use of my child's personal information and personal health information for the purposes and under the conditions set out above.

**I HAVE BEEN INVOLVED** in a planning process for above and agree to the proposed plan and funding application to Manitoba Education.

\_\_\_\_ Parent  
\_\_\_\_ Legal Guardian (Please indicate title/role and agency)

\_\_\_\_  
Date

If a parent/legal guardian refuses to sign, send the application with a brief description of the reasons for not signing and the process followed in attempting to resolve the issues.

\_\_\_\_ planning process and agree to the proposed plan and funding application to Manitoba Education.

\_\_\_\_ Student

## NOTICE TO and CONSENT about PERSONAL INFORMATION and PERSONAL HEALTH INFORMATION

On behalf of my minor age child/ward:

I am 18 years of age or older and:

**I CONSENT** to the collection, disclosure and use of my child's personal information and personal health information for purposes and under conditions set out above.

**I HAVE BEEN INVOLVED** in the planning process for above named child/ward and agree to the proposed plan and funding application to Manitoba Education.

\_\_\_\_ Parent  
 \_\_\_\_ Legal Guardian (Please indicate title/role and agency)

\_\_\_\_  
 Date

**I CONSENT** to the collection, disclosure and use of my personal information and personal health information for purposes and under conditions set out above.

I have read the proposed plan and funding application to Manitoba Education.

\_\_\_\_ Student

If a student is 18 years of age or older, the student must sign the funding application.

**Note:** Costs are required for URIS Group A and EBD 3 only.