

Fulton City School District
167 South Fourth Street
Fulton, New York 13069
593-5520-Office, 593-5519-Fax

CPSE Evaluation Request

Evaluator: _____ CPSE Date: _____

All documentation including IEP draft due by: _____ Date signed consent received: _____

Section above for CPSE use only: Contact CPSE Chair immediately if you cannot meet this time frame.

Did Child Receive EI? Yes No

Child's Name: _____ DOB: _____
 Last First Middle

Gender: M F Native Language _____ Student ID (*optional*): _____

Hispanic: Yes or No

Ethnicity: American Indian Asian or Black Hispanic White Multi-racial
 or Alaskan Pac. Island

Address: _____ Apt. # _____

City: _____ Zip Code: _____ County: _____

Parent/Guardian: _____

Phone: Home _____ Business _____ Cell _____

How to contact parent/guardian if there is no phone: _____

Email address: _____

Current Services: _____

Preschool / Daycare: _____

Child's Physician: _____

Reason for referral: _____

Check evaluation components requested:

Evaluation Component	Evaluation
Physical/Medical*	
Social History*	
Psychological*	
Educational	
Occupational Therapy	
Physical Therapy	
Speech/Language	
Other:	
TOD- Teacher of Deaf	
TOVI- Teacher of Visually Impaired	

**These three components, in addition to an observation of a child in the natural setting, are required components of all initial CPSE evaluations, including transitions to EI.*

Please choose the other component based on the child's suspected disability.

If a child is **transitioning from EI** and you are recommending Psychological testing only, please make sure you check **educational evaluation**. The psychologist will then be responsible for pulling together the goals by being in contact with current EI providers.

Previous EI evaluation(s): yes no Report(s) attached: yes no

Please forward all EI records to the evaluation team of the parent's choice.

Comments: _____

Approved by CPSE Chairperson: yes no

CPSE Chairperson Signature: _____

Date: _____

Date faxed to evaluation team: _____ Date faxed to county: _____