



# Private/Parochial School Student Referral for Special Education Services

MCPS Form 336-13  
February 2017  
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Office of Special Education  
Division of Business, Fiscal and Information Services  
MONTGOMERY COUNTY PUBLIC SCHOOLS (MCPS)  
850 Hungerford Drive, Room 225, Rockville, Maryland 20850

## INSTRUCTIONS

The parents/guardians of a Private/Parochial school student seeking evaluation by Montgomery County Public Schools (MCPS) for special education services must complete this form and provide a copy of the student's birth certificate or other evidence of birth as noted below. On page 2 of this form, there are links to other MCPS forms that are required to be completed as part of a comprehensive referral packet. We ask that parent(s)/guardian(s) provide a copy of any private assessments with the completed referral packet if they would like the Individualized Education Program (IEP) team to consider the assessment findings.

Please submit all required forms and any additional documents as a completed packet electronically via e-mail or mail to: MCPS, Private/Parochial Office, 850 Hungerford Drive, Room 225, Rockville, MD 20850.

## STUDENT INFORMATION

Name must match birth certificate or other evidence of birth, i.e, Passport/Visa, Physician's certificate, Baptismal or Church Certification, Hospital Certificate, Parent's Affidavit, Birth Registration, or other legal, notarized identification. Document must be attached.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  Male  Female Grade \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_ Cell Phone \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_ Work Phone \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Language(s) spoken at home \_\_\_\_\_

## LANGUAGE FOR WRITTEN COMMUNICATION

Amharic  Chinese  English  French  Korean  Spanish  Vietnamese  Other \_\_\_\_\_

## ETHNICITY

1. **ETHNICITY DESIGNATION.** Read the definition below and check the box that indicates this student's heritage.

Is this student Hispanic or Latino? (Select one answer.)  Yes  No

Persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race, are considered **Hispanic or Latino**.

2. **RACE DESIGNATION.** Read the descriptions below and check the boxes that indicate this student's race. **You must select at least one race, regardless of ethnicity designation. More than one response can be selected.**

Indicate this student's race. (Select all that apply.)

- American Indian or Alaskan Native:** A person having origins in any of the original peoples of North or South America (including Central America), and who maintains a tribal affiliation or community attachment.
- Asian:** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, or Vietnam.
- Black or African American:** A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White:** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

## IMMUNIZATIONS

Proof of immunization compliance—MCPS Regulation JEA-RB: *Enrollment of Students*, requires a copy of one of the following:

- Maryland Department of Health and Mental Hygiene Immunization Certificate 896
- Computer-generated printout from doctor's office
- Other (should be available from your child's private/parochial school) \_\_\_\_\_

**SCHOOL INFORMATION**

Private/Parochial School \_\_\_\_\_  
Address \_\_\_\_\_  
Private/Parochial School Contact \_\_\_\_\_ School Phone \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
MCPS Home School \_\_\_\_\_  
Has student ever been enrolled in MCPS?  Yes  No  
If so, last school attended \_\_\_\_\_

**REASON FOR REFERRAL**

Parent/Guardian Request \_\_\_\_\_ School Request \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ADDITIONAL INFORMATION**

Additional information may be included with the following **REQUIRED** forms:

- MCPS Form 272-10, *Documentation of Interventions*—completed by private/parochial school staff member(s)
- MCPS Form 272-9, *Teacher Referral (Teacher signature required)*—completed by private/parochial school staff member(s)
- MCPS Form 336-22, *Eligibility Screening Parent Interview/Questionnaire*—completed by the parent(s)/guardian(s)
- MCPS Form 336-21, *Classroom Observation*—completed by the private/parochial school staff member(s)
- MCPS Form 336-20, *Educational History*—completed by the private/parochial school staff member(s) in collaboration with the parent(s)/guardian(s)
- MCPS Form 336-32, *Authorization for Release of Confidential Information*—(Parent/Guardian signature required) completed by the parent(s)/guardian(s)

I have reviewed this application and the information included and authorize their release to Montgomery County Public Schools for use in the Individualized Education Program (IEP) process to determine the eligibility of my child for special education services.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_