

**Extended School Year Summary**

Student: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_ Date: \_\_\_\_\_

**Supporting Data**

<p><b>Regression/Recoupment</b></p>	<p><input type="checkbox"/> Data <u>does not</u> reveal Regression/Recoupment concerns</p> <p><input type="checkbox"/> Data reveals regression/recoupment concerns Describe:</p>	<p><input type="checkbox"/> No ESY services necessary.</p> <p><input type="checkbox"/> ESY services will be provided as follows:</p>	<p><b>Does the review of data indicate that the student benefited from previous ESY services?</b></p> <p><b>YES NO</b> (circle one)</p>
<p><b>Breakthrough Opportunities</b></p>	<p><input type="checkbox"/> Data <u>does not</u> reveal breakthrough of skills.</p> <p><input type="checkbox"/> Data reveals breakthrough of skills. Describe:</p>	<p><input type="checkbox"/> No ESY services necessary.</p> <p><input type="checkbox"/> ESY services will be provided as follows:</p>	<p><b>Does the review of data indicate that the student benefited from previous ESY services?</b></p> <p><b>YES NO</b> (circle one)</p>
<p><b>Degree/Rate of Progress</b></p>	<p><input type="checkbox"/> Data <u>does not</u> reveal concerns with degree or rate of progress.</p> <p><input type="checkbox"/> Data reveals concerns with degree or rate of progress. Describe:</p>	<p><input type="checkbox"/> No ESY services necessary.</p> <p><input type="checkbox"/> ESY services will be provided as follows:</p>	<p><b>Does the review of data indicate that the student benefited from previous ESY services?</b></p> <p><b>YES NO</b> (circle one)</p>
<p><b>Nature/Severity of Disability</b></p>	<p><input type="checkbox"/> Data <u>does not</u> reveal impact of the disability.</p> <p><input type="checkbox"/> Data reveals impact of the disability. Describe:</p>	<p><input type="checkbox"/> No ESY services necessary.</p> <p><input type="checkbox"/> ESY services will be provided as follows:</p>	<p><b>Does the review of data indicate that the student benefited from previous ESY services?</b></p> <p><b>YES NO</b> (circle one)</p>

Attach this completed document to the IEP or IEP Addendum.

5/3/2006 DRAFT