

# MIS Data Collection Form (Part I)

(This report is to go to the district's CASEMIS data entry person.)

Name: \_\_\_\_\_ A. Next Pupil Count Date: \_\_\_\_\_

<b>Primary Contact Information:</b> Mr./Mrs./Ms. , CA Home: Work: Sec. Hm: Sec. Wk: Sec. Cell:	<b>Service Providers:</b> Case Manager: Service Provider 2 School Psychologist: Service Provider 3 Service Provider 1 Service Provider 4
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## Table A: CASEMIS STUDENT DATA TABLE

<b>B. LEA Identification:</b> A-2) SELPA_CODE 1501   Kern County SELPA A-3) SELPA_FROM _____ A-4) DIST_SERV _____	A-5) DIST_RESID _____ A-6) SCH_CODE _____ A-7) SCH_TYPE _____ HOME SCHOOL _____
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<b>C. Student Demographics:</b> A-10) STUDENT_ID _____ A-11) SSID _____ A-12) SSN _____ A-13) BIRTHDATE _____	A-14) GENDER   <input type="radio"/> Male <input type="radio"/> Female A- (15-18) ETHNICITY 1. _____ 2. _____ 3. _____ 4. _____	A-19) EL (Eng Lang. Learner)   A-20) NATIVE LANG   _____
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<b>D. Program Information:</b> Required if referred after 7/1/06 Referral Information <b>Ages 0 - 3 only</b> A-21) EARLY INT      A-22) IN RFRDATE <input type="radio"/> Y <input type="radio"/> N A-23) IN REFRBY _____ A-24) IN PRNTCST      A-25) IN INTEVAL _____		<b>Ages 4 - 22 only</b> A-21) EARLY INT      A-26) REFR_DATE <input type="radio"/> Y <input type="radio"/> N A-27) REFR BY _____ A-28) PRNT_CSNT      A-29) INIT_EVAL _____
A-30) PLAN TYPE _____		

# MIS Data Collection Form (Part II)

**Name:** \_\_\_\_\_

**A. Next Pupil Count Date: 6/30/2008**

**Special Education**

MIGRANT

RESID\_STAT

Y  N

ENTRY DATE (initial placement)

LAST IEP | NEXT IEP

LAST EVAL | NEXT EVAL

DISABILITY 1

DISABILITY 2

**Infant Data (ages 0 - 2 only)**

**Preschool Data (ages 3 - 5 only)**

SOLE LOW

Y  N

FEDSET\_PRS

INFANT\_SET

A-40) FEDSET\_INF

**Special Education**

FEDSET\_SCH (ages 6-22)

400 | Regular classroom/Public day school

IN\_REGCLS (i.e. 78% = 078)

GRADE

**Participation**

PARTI\_CAH

PARTI\_MATH

PARTI\_SCI

PARTI\_ELA

PARTI\_HIS (History)

PARTI\_WRTG

GRAD\_PLAN (required for students over age 14)

**Transition Information**

TRAN\_GOAL

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

MHS\_ELIGIB

Y  N

MHS\_LANG

Y  N

SPEC\_TRANS

Y  N

**Exit Information**

EXIT\_DATE

EXIT\_REASON

# MIS Data Collection Form (Part III)

**Name:** \_\_\_\_\_ **A. Next Pupil Count Date:** 6/30/2008

<b>TABLE B: STUDENT SERVICE TABLE</b>						
	<u>B-5) SERVICE1 (Primary Service)</u>	<u>Provider</u>	<u>Location</u>	<u>Frequency</u>	<u>Duration</u>	<u>Service Provider Name</u>
1.						>
	<b><u>SERVICE (2 - 8)</u></b>					
2.						>
3.						>
4.						>
5.						>
6.						>
7.						>
8.						>
<b>Extended School Year:</b> <input type="radio"/> Yes <input type="radio"/> No						

## OVERDUE 60 DAY & 3 YR BIRTHDAY REASON

<u>EVLDLAY</u> _____	<u>TBDDLAY</u> _____
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<b>TABLE D: POST-SECONDARY FOLLOW-UP (after one year graduated students only)</b>	
<b>Follow-up Information</b>	
<u>D-18) PST_SECPRG</u> _____	<u>D-19) PST_SECEMP</u> _____