Date:			MANIFESTATION
			DETERMINATION
8/07	Date:		
Student Name:			
School		Grade:	DOB:
Description and date of	f behavior/incident subje	ct to review:	
Step 1: The IEP team must review: • All relevant information in the student's file, including the student's IEP • Any teacher observations • Any relevant information provided by the parents Step 2: The IEP team must determine whether the IEP is appropriate. If it is not, the team must revise it and provide the parent a notice of proposed changes.			
Step 3: The IEP team must determine: (a) If the conduct in question was caused by, or had a direct substantial relationship to, the student's disability; or (b) If the conduct in question was the direct result of the school's failure to implement the IEP.			
Step 4: The behavior is either (a) or (b).	considered a manifestation	n of the student's disability	if the team answered "yes" to
Therefore:	The behavior is a ma	anifestation of the student's	s disability.
The behavior is not a manifestation of the student's disability.			
IEP team members pre		NI	T:41-
Name	Title / Parent	Name	Title / Special Education Teacher
	/ Parent		/ Regular Education Teacher
/ Student			/ School District Representative
<u> </u>			/
	<u> </u>		•

Note to Parent(s): If you do not agree with the team's manifestation determination, you may request an expedited due process hearing, mediation, or a conciliation conference. Please advise the district of your decision.

Resources you may contact for further information about parent rights and procedural safeguards: ARC MN (Advocacy for Persons with Developmental Disabilities): 651-523-0823, 1-800-582-5256 www.thearcofminnesota.org

MN Department of Education: 651-582-8689, TTY: 651-582-8201 http://education.state.mn.us MN Disability Law Center: 612-332-1441, 1-800-292-4150, TTY: 612-332-4668 www.mndlc.org PACER (Parent Advocacy Coalition for Education Rights): 952-838-9000, 1-800-53-PACER, TTY: 952-838-0190 www.pacer.org