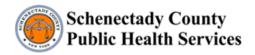


## Schenectady County Children with Special Needs Program Justification for Extended School Year CPSE Services Documentation Form

Student Name:		DOB:	2025-2026 School Year
School District:	Preschoo		
<b>Directions:</b> To qualify for extended functionality <b>and</b> show limited ability significant needs across multiple don	ty to retain previously mastere	ed skills/concepts over time	e (i.e. regression); or demonstrate
<b>Provide</b> your rationale for recomme student's functionality. The rational the skills listed in your data below.	•		how regression of skills impacts the ter the break in services in reference to
<b>Include</b> here statements for children emotional, communication).	that demonstrate significant i	needs across multiple doma	ins (cognitive, motor, adaptive, social-



- \*\*\*Documentation of regression is ongoing with multiple measures taken throughout the school year.
- \*\*\*Please include additional methods of documentation such as graphs, charts or checklists (either copy or summarize, if needed).
- \*\*\*All teachers and therapists working with the child should merge information onto one form and submit with Annual Review.

Documentation of regression: Program or Related Service Area:		Signature: Date:		
Length of Absence	Skill Measured prior to absence	Data level of skill prior to absence	Data Level of skill after absence	Length of Time to Recoup Skills
Documentation	of regression:	Sig	nature:	
	lated Service Area:	<b>D</b> a	te:	
Length of Absence	Skill Measured prior to absence	Data level of skill prior to absence	Data Level of skill after absence	Length of Time to Recoup Skills