

Michigan Educational Worksheet for Coding Educational Environments

Child Last Name _____ Date of Birth ____ / ____ / ____ UIC _____

Child First Name _____ Date of Report ____ / ____ / ____ CODE _____

- Use the following decision rules to determine the appropriate educational environment category for an individual child (age 3-5). **Check only ONE BOX**
- The order of the categories as listed on the table for reporting children with disabilities ages 3-5 does *not* reflect a continuum from least to most restrictive.
- See complete instructions for guidance: <https://www.ideadata.org/PartBForms.asp#y201011> PART B, INDIVIDUALS WITH DISABILITIES EDUCATION ACT; IMPLEMENTATION OF FAPE REQUIREMENTS; Child Count Date for **2010**.

Column 1	Column 2	Column 3	Column 4
Regular Early Childhood Program includes a majority (at least 50 percent) of nondisabled children (i.e., children not on IEPs).	A = at least 10 hours per week	A1. <input type="checkbox"/> *46	The child is receiving the majority of hours of special education and related services in the Regular Early Childhood Program (and the child attends a Regular Early Childhood Program at least 10 hours per week).
		A2. <input type="checkbox"/> *47	The child is receiving the majority of hours of special education and related services in some other location (and the child attends a Regular Early Childhood Program at least 10 hours per week).
	B = less than 10 hours per week	B1. <input type="checkbox"/> *48	The child is receiving the majority of hours of special education and related services in the Regular Early Childhood Program (and the child attends a Regular Early Childhood Program less than 10 hours per week).
		B2. <input type="checkbox"/> *49	The child is receiving the majority of hours of special education and related services in some other location (and the child attends a Regular Early Childhood Program less than 10 hours per week).
Special Education Program includes less than 50 percent nondisabled children (i.e., children not on IEPs).	C = Special Education Program	C1. <input type="checkbox"/> *22	Separate class. <i>Child</i> attends a special education program in a class with less than 50% nondisabled children. (Do not include children who also attended a regular early childhood program.) Mark only this category even if the child <u>also</u> receives special education services in the home (row D1) or in the service provider location or some other location (row D2).
		C2. <input type="checkbox"/> *26	Separate school. <i>Child</i> receives education programs in public or private day schools designed specifically for children with disabilities. (Do not include children who also attended a regular early childhood program.) Mark only this category even if the child <u>also</u> receives special education services in the home (row D1) or in the service provider location or some other location (row D2).
		C3. <input type="checkbox"/> *25	Residential facility. <i>Child</i> receives education programs in publicly or privately operated residential schools or residential medical facilities on an inpatient basis. (Do not include children who also attended a regular early childhood program.) Mark only this category even if the child <u>also</u> receives special education services in the home (row D1) or in the service provider location or some other location (row D2).
Neither a Regular Early Childhood Program nor a Special Education Program (as defined above).	D = Home or Other (not regular early childhood; not special education program)	D1. <input type="checkbox"/> *23	Home. <i>Child</i> receives special education and related services in the principal residence of the child's family or caregivers, and attends neither a Regular Early Childhood Program nor a Special Education Program provided in a separate class, separate school, or residential facility. This includes the child who receives special education both at home and in a service provider location or some other location that is not in any other category (D2). The term caregiver includes babysitters.
		D2. <input type="checkbox"/> *27	Service provider location or Some Other location that is not in any other category. <i>Child</i> receives all special education and related services from a service provider or some other location that is not in any other category, and who attends neither a Regular Early Childhood Program nor a Special Education Program provided in a separate class, separate school, or residential facility. For example, speech instruction provided in: private clinicians' offices, clinicians' offices located in school buildings, and hospital facilities on an outpatient basis.

*MSDS Codes