SAN MATEO COUNTY SELPA
PROGRAM TRANSFER APPLICATION

This form must be submitted to the SELPA by October 25th of the year prior to the Program Transfer.

Receiving District: _____________________________  Sending District: ________________________________

Name _____________________________  Title _____________________________  Date: ___/___/___

Education code E.C. 56207(a) pertaining to program transfers reads as follows:
30 EC 56207 - Transfer of Educational Programs and Services Already in Operation
No educational programs and services already in operation in school districts or a county office of education pursuant to Part 30 (commencing with Section 56000) shall be transferred to another school district or a county office of education or from a county office of education to a school district unless the special education local plan area has developed a plan for the transfer which addresses, at a minimum, all of the following:
(1) Pupil needs.
(2) The availability of the full continuum of services to affected pupils.
(3) The functional continuation of the current individualized education programs of all affected pupils.
(4) The provision of services in the least restrictive environment from which affected pupils can benefit.
(5) The maintenance of all appropriate support services.
(6) The assurance that there will be compliance with all federal and state laws and regulations and special education local plan area policies.
(7) The means through which parents and staff were represented in the planning process.

Please attach your responses to the questions below on a separate page.

A. How does the plan for the program transfer address pupil needs?

1. Describe each student’s needs including the special education and related services and the accommodations and special factors.

2. Does the district currently employ adequate support staff required to implement the IEP (e.g. Braille transcriber, sign language interpreter, etc)? If no, describe the District plan to secure the support staff.

3. What is the district's plan to provide the needed support as part of this program transfer? (Be specific, for example, if the district does not have an employee; explain who will provide a needed service, (recruit and hire, contract with NPA or other provider, etc.) NOTE: Hard to fill positions need to be taken in account when planning to hire new staff.

B. Will the program transfer ensure the availability of a full continuum of services to affected pupils?

YES ☐  NO ☐
C. How does the program transfer allow the provision of services in the least restrictive environment (LRE)?

1. Describe the way in which students are currently integrated in the LRE.

2. Describe how integration will be provided as a result of the program transfer, including how staff will be trained.

D. How does the plan assure that there will be compliance with the Individuals with Disabilities Education Act (IDEA) and California Education Code, Regulations and San Mateo County Special Education Local Plan Area (SELPA) policies?

1. Explain how District will train staff or how the district has already trained staff on SELPA policies and State/federal IDEA laws.

E. How were parents and staff represented in the planning process?

1. Describe how parents and staff were involved in the planning process. Provide a timeline of communication about the intended program transfer request that includes communication with parent and staff in advance of the submission.

F. Other

1. Has the cost for the special education and related services been factored in when analyzing the fiscal impact of the program transfer including personnel, books, supplies, specialized equipment, transportation, other consumables and training for the District? YES ☐ NO ☐

2. Does the district have the appropriate space including modified bathrooms if appropriate? YES ☐ NO

3. Does the district understand the rights of the certificated and classified employees to transfer with the program? (See attached SELPA Program Transfer Policy) YES ☐ NO

In order to establish that the District administration is fully aware of the consequences of the proposed program transfer including personnel /collective bargaining issues, facilities issues, and additional cost or savings including initial or ongoing supplies and equipment and/or contractual services, the SELPA requests signatures from the Special Education Administrator as well as the Superintendent and CBO.

____________________________________  ___/___/___
Special Education Administrator Signature  Date

____________________________________  ___/___/___
CBO Signature  Date

____________________________________  ___/___/___
Superintendent Signature  Date