# **INSTRUCTIONS FOR COMPLETING DATA SHEET, DI-SE-F43B**

# SECTION I - School Information

Contact Person: Write the name of the person who is to be contacted for clarification and/or additional areas. Complete the remaining blanks with school name and telephone number.

# SECTION II - School and Certification Information

Teacher Name: List each special education teacher for one school <u>before</u> naming teachers of another school. Record each teacher's name only once, regardless of the number of schools served by the teacher. Also, list related service personnel (e.g., L/S, OT, PT).

Column(\*): Indicate those teachers who are participating members of the Assessment Team by placing an asterisk (\*) beside the teacher's name.

Complete the following blanks:

Teacher's Social Security Number (Last 4 digits) Certificate number (Cert. Number) Class Code Number, listed on teacher's certificate Area(s) of Endorsement, Code Number(s) listed on teacher's certificate Valid period of time of certification (Validity Date) Attach a copy of each teacher's license which clearly denotes the areas of certification Quarterly updates of data sheets will be necessary as changes in personnel or certification occur

### SECTION III - Program Information

Exceptionalities (Excep.): In this column specify the types of exceptionalities served in the class using the following abbreviations:

- SLD Specific Learning Disability
- L/S Language/Speech Impaired
- HI Hearing Impaired
- VI Visually Impaired
- DB Deaf-Blind
- EMD Emotional Disability

- OHI Other Health Impairment
- MD Multiple Disabilities
- AU Autism
- DD Developmentally Delayed
- TBI Traumatic Brain Injury
- OI Orthopedic Impairment

Type Program (Type Prog.): List the type of program using the following abbreviations:

SC	-	Self-Contained	DD	-	Developmentally Delayed
RP	-	Resource Program	VP	-	Vocational Preparation (Cooperative)
HBD	-	Homebound	AUD	-	Audiology

### **SECTION IV -** Student Information

Ages: List number of children in each age group served in classes listed and record the total served by each teacher.

### NOTE: A faxed copy of the DI-SE-F43B form is not acceptable.