BEST INTEREST	DETERMINATION FORM
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Case	Number:		

Child's Name:

Copy provided to child's placement provider: _____on: _____

Completed by:_____

Date: _____

Check 1: Initial Entry into Custody Placement Change Educational Services Meeting

Section I: Best Interest Determination / Educational Needs

- 1. How many schools has the child attended? How many schools has the child attended this year? How have the school transfers affected the child emotionally, socially, academically, and physically?
- 2. How does the student feel about any upcoming moves?
- 3. What, if any, are the safety considerations related to school placement?

	School Preference	Why?
Student		
Birth Parent		
Placement Provider		

4. Which school is preferred by the student, birth parent and placement provider and why?

- 5. What school(s) do the student's siblings attend?
- 6. How is the student performing academically?
- 7. Does the student have a current IEP or a 504 Plan? If so, for what need?
- 8. If the student has a current IEP, is specialized transportation identified as a related service?
- 9. How does the student's behavior impact his or her educational success? Should additional services be considered?
- 10. Does the student participate in other specialized instruction? (e.g., gifted program, career and technical program)?

Child's Name: _____

- 11. What are the student's academic/career goals? Does one school have programs and activities that address the unique needs or interests of the student that the other school does not have?
- 12. Describe the student's ties to his or her current school, including significant relationships and involvement in extracurricular activities? Can these ties or relationships be maintained if a school change is determined to be in the child's best interests?
- 13. Would (or has) a change in schools affect the student's ability to earn full academic credit, participate in sports or other extra-curricular activities, proceed to the next grade, or graduate on time? If so, how?
- 14. Would (or did) the timing of the school transfer coincide with a logical juncture, such as after testing, after an event that is significant to the student or at the end of the school semester or year?
- 15. How would the length of the commute to school impact the student?

16.	Would a school change impact on the child's permanency goal?	🗌 Yes	□No
	If yes, explain:		

Section II: Best Interest Determination (check one) (Not completed for ES Meetings)			
The child shall remain in the school in which the child was enrolled			
Based on the best interest determination, a change in school is needed			
If it is NOT in the best interest of the child to stay in the same school in which he or she was previously enrolled, explain why:			
Based on child's best interests, what educational services must be available at the selected school?			
Name of School Selected:			
Enrollment in selected school will be completed by:by (date):			

Child's Name: _____

Section III: Next Steps/Educational Services Needed (attach additional pages if needed)

	What?	Who is responsible?	By when?
1			
2			
3			
4			

Section IV: Comments

Child/Youth Desires and/or Comments:

Parent's Desire and/or Comments:

Placement Provider Comments:

BEST INTEREST DETERMINATION FORM

Case Number: _____

Child's Name: _____

Section V: Signature Page

The following individuals participated in determining the school placement in the student's best interest.

Participant Role (** indicates essential role)	Printed name	Title and/or Relationship with child	Signature	Agree with determination?
Student **				Yes No
Child welfare social worker or supervisor**				Yes No
Current placement/care provider				Yes No
School representative from student's school at time of placement**				Yes No
IEP team for special education purposes, if applicable				Yes No
Birth parent(s) and/or prior caretakers(s)				Yes No
The student's Guardian ad Litem				Yes No
Other significant person(s) the student wishes to attend**				Yes No
Other				Yes No
Other				Yes No
Other				Yes No