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| Determination of Eligibility: Visual Impairment, Including Blindness | | | | | | |
| **Definition:** A child with a Visual Impairment, Including Blindness, has an impairment in vision that, even with correction, adversely affects the child’s educational performance and that requires specialized instruction. The term includes low vision, blindness, and/or progressive vision loss. **ECEA 2.08(11)** | | | | | | |
| **The team has addressed each of the following statements and has determined: IDEA 34 C.F.R. §§ 300.304(c)(6) and 300.306(b), ECEA 2.08(11)** | | | | | | |
| Yes | No | 1. The evaluation is sufficiently comprehensive to appropriately identify all of the child’s special education and related services needs, whether or not commonly linked to the disability category. (Answer must be “yes” in order for the child to be eligible for services.) | | | | |
| Yes | No | 2. The child **can**receive reasonable educational benefit from general education alone. (Answer must be “no” in order for the child to be eligible for services.) | | | | |
|  |  | 1. The child’s performance: (All answers below must be “is not” for the child to be eligible for services.) | | | | |
|  |  | **is** | **is not** | due to a lack of appropriate instruction in math; and | | |
| **is** | **is not** | due to limited English proficiency. | | |
| **is** | **is not** | due to a lack of appropriate instruction in reading, including the essential components of reading instruction | | |
| **A determination that a child is an eligible child with a Visual Impairment, Including Blindness may include: ECEA 2.08(11)(a)** | | | | | | |
| Yes | No | Visual acuity of no better than 20/70 in the better eye after correction; **and/or** | | | | |
| Yes | No | Visual field restriction to 20 degrees or less; **and/or** | | | | |
| Yes | No | A physical condition of the visual system that cannot be medically corrected and, as such, affects visual functioning. These criteria are reserved for special situations such as, but not restricted to cortical visual impairment and/or progressive vision loss where field and visual acuity loss alone do not meet the aforementioned criteria; **and/or** | | | | |
| Yes | No | Other conditions that involve an impairment in vision that, even with correction, adversely affects the child’s educational performance. | | | | |
| Yes | No | As a result of the condition, the child requires specialized instruction. | | | | |
| |  |  | | --- | --- | |  | This box should be checked in the event that a child who is Deaf-Blind does not meet the above requirements for Visual Impairment, Including Blindness, but the combination of an existing vision loss and the documented hearing loss adversely affects the child’s educational performance. | | | | | | | |
| Yes | No | **The child has a disability as defined in the State Rules for the Administration of the Exceptional Children’s Educational Act and is eligible for special education.** | | | | |
| **Multidisciplinary Team Members IDEA 34 C.F.R. § 300.306(a)(1); ECEA 4.02(6)(b)** | | | | |  | **Title** |
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A copy of the evaluation report(s) and the eligibility statement has been provided to the parent(s). **IDEA 34 C.F.R. § 300.306(a)(2)**