

Rural Champaign County Special Education Cooperative

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REPORT FOR STUDENT EXITING SPECIAL EDUCATION

Student:	SIS ID:
Date of Birth:	School:
Parent/Guardian:	Special Education Teacher:
Exit or Drop Date:	Student has exited to (if known):

REASON FOR EXIT

✓ **the code** listed below that most accurately describes why the student is no longer receiving services or no longer listed on the FACTS in the same manner.

(Codes **1, 2, 3,** and **4** are intended for **high school age students only**. Elementary districts may **NOT** use these codes.)

1. Graduated with diploma
 2. Graduated through certificate of completing/fulfillment of IEP requirements.
 3. Reached maximum age
 4. Dropped out (**must be at least 17 or older only**)

 5. Deceased.
 6. Moved out-of-district; known to be enrolled in another district. Name of District (**if known**): _____
 7. Moved out-of-district; unknown if enrolled in another district. (**Caution: The use of this exit code will be reported as a drop out on the federal report.**)
 9. Returned to regular education program full-time; no longer in need of special education services
 10. Withdrawn by parent/guardian from public school program and placed independently. (**Circle one below**)
 - Private/Parochial school (**Name of School:** _____)
 - Home schooled
 11. Placed in a (**Circle one below**):
 - Department of Human Services school (See Educational Environment Codes 13, 14 or 15)
 - Department of Corrections facility
 - County-operated jail
 - Detention center
 12. Refused Services. (**Revocation of consent**)
 14. Ran away
 15. Attending alternative educational setting, e.g., a Regional Safe School Program
 16. Attending interim alternative educational setting for a maximum of 45 days (23 Illinois Administrative Code 226.400f)
 17. Expelled (**not attending RSSP**)
- Other: Please Explain: _____