

**STATEMENT OF ELIGIBILITY
ELIGIBILITY TEAM REPORT
ORTHOPEDIC IMPAIRMENT**

Pupil's Name _____ Birthdate _____ Grade _____

According to state regulations (NAC 388.400):

- This pupil **is not eligible** for special education under the category of orthopedic impairment.
- This pupil **is eligible** for special education under the category of orthopedic impairment, based on the following criteria.

CRITERIA FOR ORTHOPEDIC IMPAIRMENT

- The pupil suffers from a severe orthopedic impairment which adversely affects the pupil's educational performance.
- The pupil has one or more of the following conditions (check one or more):
 - A congenital anomaly, including, without limitation, clubfoot or the absence of a member
 - A disease, including, without limitation, bone tuberculosis or poliomyelitis
 - Any other cause, including, without limitation, cerebral palsy, an amputation, a fracture or a burn causing a contracture
- The controlling factor for the student's eligibility is not the lack of appropriate instruction in reading, including the essential components of reading instruction, or lack of appropriate instruction in math.
- The controlling factor for the student's eligibility is not limited English proficiency.
- By reason of the pupil's Orthopedic Impairment, the pupil needs special education and related services.

Eligibility Team Members:

_____ Signature/School Nurse or Other Person Qualified to Interpret a Health Assessment	_____ Agree/Disagree	_____ Signature/Physical Therapist/ Occupational Therapist/Other Specialist	_____ Agree/Disagree
_____ Signature/Regular Classroom Teacher	_____ Agree/Disagree	_____ Signature/Other	_____ Agree/Disagree
_____ Signature/Parent	_____ Agree/Disagree	_____ Signature/Other	_____ Agree/Disagree

- Any decision of an eligibility team must be justified in a written report. Parents have been provided a copy of the report and any other documentation relating to the determination of the pupil's eligibility. (NAC 388.340.4)