

## ACAP Alternate Participation Decision Worksheet

Student Name: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Current LRE: \_\_\_\_\_ Case Manager: \_\_\_\_\_ Has the student repeated a grade? \_\_\_\_\_

### Factors for Team Consideration

Area of Evaluation		Strengths		Weaknesses	
<b>Cognitive</b>					
Assessment	Date Given	Area	Score	Area	Score
<b>Achievement</b>					
Assessment	Date Given	Area	Score	Area	Score
<b>Developmental</b>					
Assessment	Date Given	Area	Score	Area	Score

<b>Adaptive Behavior</b>					
Assessment	Date Given	Area	Score	Area	Score

<b>Speech-Language</b>					
Assessment	Date Given	Area	Score	Area	Score

<b>Benchmarks</b>					
Assessment	Date Given	Above Benchmark	At Benchmark	Below Benchmark	

<b>Classroom Assessments</b>					
Assessment	Date Given	80% or Above		50% or Below	

**Carefully consider the following statements and answer and write “yes” or “no” on the line provided:**

\_\_\_\_ Does the student demonstrate cognitive functioning and adaptive behavior in school, work, home, and community environments which is significantly below chronological age expectations even with program accommodations?

\_\_\_\_ Does the student require extensive direct instruction and/or extensive supports in multiple settings to acquire, maintain and generalize academic and functional skills necessary for application in school, work, home, and community environments?

\_\_\_\_ Does the student demonstrate complex cognitive disabilities concurrent with deficits in adaptive behavior that are below chronological age expectations, which prevent the student from meaningful participation in the standard academic core curriculum or achievement of the appropriate grade level expectations?