Verndale Public School District
Total Special Education System (TSES)

Updated September 2026

This document serves as the Total Special Education System Plan for Verndale School District in accordance with Minnesota Rule 3525.1100. This plan also includes an assurance for compliance with the federal requirements pertaining to districts' special education responsibilities found in United States Code; title 20; chapter 33; sections 1400 et seq.; and Code of Federal Regulations; title 34; part 300. This document is a companion to the Application for Special Education Funds – Statement of Assurances (ED-01350-29).

Jamie Wothe, Verndale District Special Education Director, is responsible for program development, coordination, and evaluation; in-service training; and general special education supervision and administration. Following is the contact information for the Freshwater Education District Special

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I. Child Study Procedures

The district's identification system is developed according to the requirement of nondiscrimination as the Verndale School District does not discriminate in education on the basis of race, color, creed, religion, national origin, sex, age, marital status, status with regard to public assistance, sexual orientation, or disability.

A. Identification
Verndale School District has developed systems designed to identify pupils with disabilities beginning at birth, pupils with disabilities attending public and nonpublic schools, and pupils with disabilities who are of school age and are not attending any school.

Children Birth to 3:
Plan for Receiving Referrals: Freshwater Education member districts along with public health and human service agencies from the three (3) counties of Todd, Wadena and Ottertail as well as Head Start Services and Community Action Councils from those counties have collaborated and belong to the Region V Interagency Early Intervention Committee (IEIC). The Region V IEIC meets on a quarterly basis to discuss the needs of the Region. Referrals can be made year round Freshwater for children Birth to 3 years old. Referrals can come from family members, daycare facilities, early childhood family educators, the medical community, public health and other county services. The referral is taken by the Birth – 3 assessment facilitator. A service coordinator is assigned and completes the initial intake and screening. This information is reviewed and a determination is made whether to assess.

Infant and toddler intervention services under United States Code; title 20; chapter 33; section 1431 et seq.; and Code of Federal Regulations; title 34; part 303; are available in Verndale School District to children from birth through two years of age who meet the outlined criteria.

The team determines that a child from birth through the age of two years is eligible for infant and toddler intervention services if:

A. the child meets the criteria of one of the disability categories in United States Code; title 20; chapter 33; sections 1400; et. seq.; as defined in Minnesota Rules; or

B. the child meets one of the criteria for developmental delay in subitem (1) or the criteria in subitem (2);

(1) the child has a diagnosed physical or mental condition or disorder that has a high probability of resulting in developmental delay regardless of whether the child has a demonstrated need or delay; or

(2) the child is experiencing a developmental delay that is demonstrated by a score of 1.5 standard deviations or more below the mean, as measured by the appropriate diagnostic measures and procedures, in one or more of the following areas:

(a) cognitive development;

(b) physical development, including vision and hearing;

(c) communication development;

(d) social or emotional development; and

(e) adaptive development.

(3) The child's eligibility is established through the application of informed clinical opinion. Informed clinical opinion may be used as an independent basis to establish a child's eligibility under this part even when other instruments do not establish eligibility; however, in no event may informed clinical opinion be used to negate the results of evaluation instruments to establish eligibility.

Children age 3 to Kindergarten:

Plan for Receiving Referrals: Freshwater Education District receives referrals for children ages 3 to Kindergarten from a variety of sources. An Early Childhood Special Education (ECSE) teacher then calls the parent to set up a home visit. The ECSE teacher does a screening at the home visit to see if the child would benefit from a full assessment. Referrals for this age come from family members, daycare facilities, early childhood family educators, the medical community, public health and other county offices.

The team shall determine that a child from the age of three years through the age of six years is eligible for special education when:

A. the child meets the criteria of one of the categorical disabilities in United States Code, title 20, chapter 33, sections 1400 et seq., as defined in Minnesota Rules; or

B. the child meets one of the criteria for developmental delay in subitem (1) and the criteria in subitem (2). Freshwater Education District has elected the option of implementing these criteria for developmental delay.

(1) The child:

(a) has a diagnosed physical or mental condition or disorder that has a high probability or resulting in developmental delay; or

(b) has a delay in each of two or more of the areas of cognitive development; physical development, including vision and hearing; communication development; social or emotional development; and adaptive development, that is verified by an evaluation using one or more technically adequate, norm-referenced instruments. The instruments must be individually administered by appropriately trained professionals and the scores must be at least 1.5 standard deviations below the mean in each area.

(2) The child's need for special education is supported by:

(a) at least one documented, systematic observation in the child's routine setting by an appropriate professional or, if observation in the daily routine setting is not possible, the alternative setting must be justified;

(b) a developmental history; and

(c) at least one other evaluation procedure in each area of identified delay that is conducted on a different day than the medical or norm-referenced evaluation; which may include criterion-referenced instruments, language samples, or curriculum-based measures.

Children Kindergarten through age 22:

Plan for Receiving Referrals: Each Freshwater Education member district/building conducts weekly or bi-weekly student assistance team meetings. At these meetings, representatives from both special education and general education discuss students who are not making progress and have been referred to the team by their classroom teachers, their parents or an outside agency. The team then determines a baseline and develops specific interventions that are implemented for 4 to 6 weeks. If the child doesn't make progress during the intervention, the intervention is reviewed and changed if needed. If progress is still not made after 6 weeks, a referral for special education services is made. Each building also conducts weekly or bi-weekly child study team meetings where initial referrals for special education services from the student assistance team, teachers, parents and outside agencies are considered. In order to identify students who may have a disability and are in need of specialized services who do not attend public school, a letter is sent to all private/parochial schools within FED member district boundaries as well as parents of homeschooled students to assure that students with needs are properly identified.

Verndale School District's plan for identifying a child with a specific learning disability is consistent with Minnesota Rule 3525.1341. Verndale School District implements its interventions consistent with that plan. The Verndale School District does not use the SRBI process to identify students with a disability.

B. Evaluation

Children Birth through age 3:

The evaluation used to determine whether a child is eligible for infant and toddler intervention services must be conducted within the timelines established in Code of Federal Regulations; title 34; part 303. It must be based on informed clinical opinion; and must be multidisciplinary in nature, involving two or more disciplines or professions; and must be conducted by personnel trained to utilize appropriate methods and procedures. The evaluation must include:

1. A review of the child's current records related to health status and medical history;

2. an evaluation of the child's levels of cognitive, physical, communication, social or emotional, and adaptive developmental functioning;

3. an assessment of the unique needs of the child in terms of each of the developmental areas in item B; and

4. at least one documented, systematic observation in the child's daily routine setting by an appropriate professional or, if observation in the child's daily setting is not possible, the alternative setting must be justified.

The team shall conduct an evaluation and hold an IFSP meeting (if qualified) for special education purposes within a time not to exceed 45 calendar days from the date of referral to the meeting date.

Children ages 3 – 22:

The team shall conduct an evaluation for special education purposes within a reasonable time not to exceed 30 school days from the date the district receives parental permission to conduct the evaluation unless a conciliation conference or hearing is requested.

Verndale School District conducts a full individual initial evaluation before the initial provision of special education and related services to a pupil. The initial evaluation shall consist of procedures to determine whether a child is a pupil with a disability that adversely affects the child's educational performance as defined in Minnesota Statutes, section 125A.02, who by reason thereof needs special education and related services, and to determine the educational needs of the pupil. The district proposing to conduct an initial evaluation to determine if the child qualifies as a pupil with a disability shall obtain informed consent from the parent of the child before the evaluation is conducted. Parental consent for evaluation shall not be construed as consent for placement for receiving special education and related services. The District will not override the written refusal of a parent to consent to an initial evaluation or re-evaluation.

Evaluation Procedures

Evaluations and reevaluations shall be conducted according to the following procedures:

A. Verndale School District shall provide notice to the parents of the pupil, according to Code of Federal Regulations; title 34; sections 300.500 to 300.505; that describes any evaluation procedures the district proposes to conduct.

B. In conducting the evaluation, Verndale School District shall:

(1) use a variety of evaluation tools and strategies to gather relevant functional and developmental information, including information provided by the parent, that are designed to assist in determining whether the child is a pupil with a disability and the content of the pupil's individualized education program, including information related to enabling the pupil to be involved in and progress in the general curriculum, or for preschool pupils, to participate in appropriate activities;

(2) not use any single procedure as the sole criterion for determining whether a child is a pupil with a disability or determining an appropriate education program for the pupil; and

(3) use technically sound instruments that are designed to assess the relative contribution of cognitive and behavioral factors, in addition to physical or developmental factors.

C. Verndale School District ensures that:

(1) tests and other evaluation materials used to evaluate a child under this part are selected and administered so as not to be discriminatory on a racial or cultural basis,

and are provided and administered in the pupil's native language or other mode of communication, unless it is clearly not feasible to do so;

(2) materials and procedures used to evaluate a child with limited English proficiency are selected and administered to ensure that they measure the extent to which the child has a disability and needs special education and related services, rather than measure the child's English language skills;

(3) any standardized tests that are given to the child have been validated for the specific purpose for which they are used, are administered by trained and knowledgeable personnel, and are administered in accordance with any instructions provided by the producer of such tests;

(4) the child is evaluated in all areas of suspected disability, including, if appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities;

(5) evaluation tools and strategies that provide relevant information that directly assists persons in determining the educational needs of the pupil are provided;

(6) if an evaluation is not conducted under standard conditions, a description of the extent to which it varied from standard conditions must be included in the evaluation report;

(7) tests and other evaluation materials include those tailored to evaluate specific areas of educational need and not merely those that are designed to provide a single general intelligence quotient;

(8) tests are selected and administered so as best to ensure that if a test is administered to a child with impaired sensory, manual, or speaking skills, the test results accurately reflect the child's aptitude or achievement level or whatever other factors the test purports to measure, rather than reflecting the child's impaired sensory, manual, or speaking skills, unless those skills are the factors that the test purports to measure; and

(9) in evaluating each pupil with a disability, the evaluation is sufficiently comprehensive to identify all of the pupil's special education and related service needs, whether or not commonly linked to the disability category in which the pupil has been classified.

D. Upon completion of administration of tests and other evaluation materials, the determination of whether the child is a pupil with a disability as defined in Minnesota Statutes, section 125A.02, shall be made by a team of qualified professionals and the parent of the pupil in accordance with item E, and a copy of the evaluation report and the documentation of determination of eligibility will be given to the parent.

E. In determining eligibility under item D, a child shall not be determined to be a pupil with a disability if the determining factor for such determination is lack of instruction in reading or math or limited English proficiency, and the child does not otherwise meet eligibility criteria under parts 3525.1325 to 3525.1351.

Additional requirements for evaluations and reevaluations

A. As part of an initial evaluation, if appropriate, and as part of any reevaluation under this part, or a reinstatement under part 3525.3100, the IEP team and other qualified professionals, as appropriate, shall:

(1) review existing evaluation data on the pupil including evaluations and information provided by the parents of the pupil, current classroom-based assessments and observations, and teacher and related services providers' observation; and

(2) on the basis of the review, and input from the pupil's parents, identify what additional data, if any, are needed to determine whether the pupil has a particular category of disability, as described in Minnesota Statutes, section 125A.02, or, in case of a reevaluation of a pupil, whether the pupil continues to have such a disability, the present levels of performance and educational needs of the pupil, whether the pupil needs special education and related services, or in the case of a reevaluation of a pupil, whether the pupil continues to need special education and related services, and whether any additions or modifications to the special education and related services are needed to enable the pupil to meet the measurable annual goals set out in the individualized education program of the pupil and to participate, as appropriate, in the general curriculum.

B. The district shall administer such tests and other evaluation materials as may be needed to produce the data identified by the IEP team under item A, subitem (2).

C. Each district shall obtain informed parental consent, in accordance with subpart 1, prior to conducting any reevaluation of a pupil, except that such informed parental consent need not be obtained if the district can demonstrate that it had taken reasonable measures to obtain such consent and the pupil's parent has failed to respond.

D. If the IEP team and other qualified professionals, as appropriate, determine that no additional data are needed to determine whether the pupil continues to be a pupil with a disability, the district shall notify the pupil's parents of that determination and the reasons for it, and the right of such parents to request an evaluation to determine whether the pupil continues to be a pupil with a disability, and shall not be required to conduct such an evaluation unless requested to by the pupil's parents.

E. A district shall evaluate a pupil in accordance with this part before determining that the pupil is no longer a pupil with a disability.

F. Restrictive Procedures:

The district must hold the meeting: within ten (10) calendar days after district staff use restrictive procedures on two (2) separate school days within 30 calendar days or a pattern of use emerges and the child's individualized education program or behavior intervention plan does not provide for using restrictive procedures in an emergency; or at the request of a parent or the district after restrictive procedures are used. The district must review use of restrictive

procedures at a child's annual individualized education program meeting when the child's individualized education program provides for using restrictive procedures in an emergency. A district must hold a meeting of the individualized education program team, conduct or review a functional behavioral analysis, review data, consider developing additional or revised positive behavioral interventions and supports, consider actions to reduce the use of restrictive procedures, and modify the individualized education program or behavior intervention plan as appropriate.

Procedures for determining eligibility and placement

A. In interpreting the evaluation data for the purpose of determining if a child is a pupil with a disability under parts 3525.1325 to 3525.1351 and the educational needs of the child, the school district shall:

(1) draw upon information from a variety of sources, including aptitude and achievement tests, parent input, teacher recommendations, physical condition, social or cultural background, and adaptive behavior; and

(2) ensure that the information obtained from all of the sources is documented and carefully considered.

B. If a determination is made that a child is a pupil with a disability who needs special education and related services, an IEP must be developed for the pupil according to part 3525.2810.

Evaluation report

An evaluation report must be completed and delivered to the pupil's parents within the specified evaluation timeline. At a minimum, the evaluation report must include:

A. a summary of all evaluation results;

B. documentation of whether the pupil has a particular category of disability or, in the case of a reevaluation, whether the pupil continues to have such a disability;

C. the pupil's present levels of performance and educational needs that derive from the disability;

D. whether the child needs special education and related services or, in the case of a reevaluation, whether the pupil continues to need special education and related services; and

E. whether any additions or modifications to the special education and related services are needed to enable the pupil to meet the measurable annual goals set out in the pupil's IEP and to participate, as appropriate, in the general curriculum.

C. Plan for Receiving Referrals

Verndale School District's plan for receiving referrals from parents, physicians, private and public programs, and health and human services agencies is attached as Appendix A.

II. Method of Providing the Special Education Services for the Identified Pupils

Verndale School District, in cooperation with Freshwater Special Education, provides a full range of educational service alternatives. All students with disabilities are provided the special instruction and services which are appropriate to their needs. The following is representative of Verndale School District's method of providing the special education services for the identified pupils, sites available at which service may occur, and instruction and related services are available.

Appropriate program alternatives to meet the special education needs, goals, and objectives of a pupil are determined on an individual basis. Choice of specific program alternatives are based on the pupil's current levels of performance, pupil special education needs, goals, and objectives, and must be written in the IEP. Program alternatives consist of the type of services provided, the setting in which services occur, and the amount of time and frequency in which special education services occur. A pupil may receive special education services in more than one alternative based on the IEP or IFSP.

A. Method of providing the special education services for the identified pupils:

(1) One-on-one services/instruction

(2) Special education instruction within regular education classroom

(3) Small group instruction

(4) Direct supplemental instruction

(5) indirect

(6) co-teaching

(7) push in

(8) pull out

(9) consultation

(10) inclusion with support

(11) inclusion with direct

B. Alternative sites available at which services may occur:

(1) Leaf River Academy (Level 4 Grades K – 8 with CTSS) (2222 Industrial Dr, Wadena, MN 56482)

(2) White Pine Academy (Level 4 Grades 7-11) (2222 Industrial Dr, Wadena, MN 56482)

(3) Elm Tree Academy (Level 4 Grades 2-12) (2222 Industrial Dr. Wadena, MN 56482)

(4) Home-based Early Childhood Special Education Birth to 2

(5) Early Childhood Special Education ages 3 -6 (Early Childhood Special Education Program integrated within Head Start & School Readiness Sites - Freshwater Education District Public School)

(6) Staples Alternative Learning Center (1830 Airport Rd, Suite 2, Staples, MN 56479)

(7) Wadena Alternative Learning Center (624 Jefferson St. North, Wadena, MN 56482)

(8) Perham Alternative Learning Program (800 Coney Street West, Perham, MN 56573)

(9) Home/Parochial Schools

(10) Neutral Site

(11) Developmental Activity Centers

(12) Rising Phoenix (204 Bryant Ave. SE, Wadena, MN 56482)

(13) ECSE Classroom

(14) Individual Work Sites

(15) Other Districts within FED

Alternative sites available at which services may occur: Services are also provided in student homes and/or day care placements when deemed the least restrictive environment by IEP or IFS teams. Services may also be provided throughout the District community when IEP teams have determined community-based instruction is necessary to provide FAPE.

C. Available instruction and related services:

(1) Physical Therapy

(2) Occupational Therapy

(3) Speech / Language Therapy/Instruction

(4) Psychological Services

(5) Social Work Services

(6) Adaptive Phy. Ed

(7) Autism Consultation

(8) Deaf and Hard of Hearing Consultation/Audiology – Hearing Service

(9) Vision Consultation/Service – Visually Impaired/Orientation & Mobility

(10) Physical and Other Health Impaired Consultation

(11) Birth – 3 Assessment/Home Visiting

(12) Assistive Technology (AT)

(13) Reading Instruction

(14) Writing Instruction

(15) Language Arts Instruction

(16) Math Instruction

(17) Social Skills Instruction

(18) Behavioral Skills Instruction

(19) Study Skills Instruction

(20) Adaptive/Functional Skills Instruction

(21) Gross Motor Instruction & Consultation

(22) Fine Motor Instruction & Consultation

(23) Secondary Planning Instruction

(24) Community Participation Instruction

(25) Daily Living Skills Instruction

(26) Recreation and Leisure Skills Instruction

(27) Community Work Experience

(28) Cognitive Skill Development

(29) Early Childhood Family Education

(30) Assistive Technology Instruction & Technical Support

(31) Health Services

(32) Monitoring of Development

(33) Employment Skills Instruction

(34) Blind Consultation

(35) Life Skills Instruction

(36) Interpreting Service

(37)Environmental Access and Safety Consultation

(38) Sensory/Self-Regulation Consultation

(39) Functional Mobility Consultation

(40) Positioning for Learning Consultation

(41) Functional Skills Consultation

(42) Special Transportation

III. Administration and Management Plan.

A. The following table illustrates the organization of administration and management to assure effective and efficient results of child study procedures and method of providing special education services for the identified pupils:

Staff Name and Title	Contact Information	Brief Description of Staff Responsibilities relating to Child Study procedures and method of providing special education services	Additional Information
Cari Grenier, Special Education Program Specialist	218-629-6020 cgrenier@fed.k12.mn.us	Support & consultation on Due process procedures including evaluation & identification. In addition, the program specialists train all teaching and administrative staff in the complexities of special education laws, statutes, and requirements.	The special education program specialists are employed by Freshwater Education District which Verndale is a member district.
Katie Bolland, District Principal	218-445-5184 ext. 313 kbolland@verndale.k12.mn.us	Assure staff attendance & compliance with the process	
Jeannie Mayer, District Superintendent	218-445-5184 ext. 316 jmayer@verndale.k12.mn.us	Support to Principal for assurance of staff attendance & compliance with the process	

B. Due Process assurances available to parents: Verndale School District has appropriate and proper due process procedures in place to assure effective and efficient results of child study procedures and method of providing special education services for the identified pupils, including alternative dispute resolution and due process hearings. Hispanic Interpreter/Translator hired by the district assists special education staff in parental notification, evaluation, translating materials to Spanish and interpreting for IEP Meetings. A description of these processes are as follows:

(1) Prior written notice to:

a) inform the parent that except for the initial placement of a child in special education, the school district will proceed with its proposal for the child's placement or for providing special education services unless the child's parent notifies the district of an objection within 14 days of when the district sends the prior written notice to the parent; and

b) state that a parent who objects to a proposal or refusal in the prior written notice may request a conciliation conference or another alternative dispute resolution procedure.

(2) Verndale School District will not proceed with the initial evaluation of a child, the initial placement of a child in a special education program, or the initial provision of special education services for a child without the prior written consent of the child's parent. A district may not override the written refusal of a parent to consent to an initial evaluation or reevaluation.

(3) A parent, after consulting with health care, education, or other professional providers, may agree or disagree to provide the parent's child with sympathomimetic medications unless medical,
dental, mental and other health services are necessary, in the professional's judgment, that the risk to the minor's life or health is of such a nature that treatment should be given without delay and the requirement of consent would result in delay or denial of treatment.

(4) Parties are encouraged to resolve disputes over the identification, evaluation, educational placement, manifestation determination, interim alternative educational placement, or the provision of a free appropriate public education to a child with a disability through conciliation, mediation, facilitated team meetings, or other alternative process. All dispute resolution options are voluntary on the part of the parent and must not be used to deny or delay the right to a due process hearing. All dispute resolution processes are provided at no cost to the parent.

(5) Conciliation Conference: a parent has the opportunity to meet with appropriate district staff in at least one conciliation conference if the parent objects to any proposal of which the parent receives prior written notice. Verndale School District will hold a conciliation conference within ten calendar days from the date the district receives a parent's objection to a proposal or refusal in the prior written notice. All discussions held during a conciliation conference are confidential and are not admissible in a due process hearing. Within five school days after the final conciliation conference, the district must prepare and provide to the parent a conciliation conference memorandum

that describes the district's final proposed offer of service. This memorandum is admissible in evidence in any subsequent proceeding.

(6) In addition to offering the minimum of one conciliation conference, Verndale School District informs parents of other dispute resolution processes, including at least mediation and facilitated team meetings. The fact that an alternative dispute resolution process was used is admissible in evidence at any subsequent proceeding. State-provided mediators and team meeting facilitators shall not be subpoenaed to testify at a due process hearing or civil action under special education law nor are any records of mediators or state-provided team meeting facilitators accessible to the parties.

(7) Descriptions of the mediation process, facilitated team meetings, state complaint, and impartial due process hearings may be found in Verndale School District's Procedure Safeguard Notice (MDE):

https://education.mn.gov/mdeprod/idcplg?IdcService=GET_FILE&dDocName=004389&RevisionSelectionMethod=latestReleased&Rendition=primary

IV. Operating Procedures of Interagency Committees

A. Interagency Early Intervention Committee

1. Verndale School District is part of the Region 5 Interagency Early Intervention Committee that is established in cooperation with other districts in the region, Freshwater Special Education Cooperative and in cooperation with the health and human service agencies located in the county in which the district or cooperative is located, for children with disabilities under age five and their families.

2. The Early Intervention Committee meets (quarterly) 4 times per year.

3. The Early Intervention Committee's operating procedures are attached as Appendix C, and include the following:

a) (A school district, group of districts, or special education cooperative, in cooperation with the health and human service agencies located in the county or counties in which the district or cooperative is located, must establish an Interagency Early Intervention Committee for children with disabilities under age five and their families under this section, and for children with disabilities ages three to 22 consistent with the requirements under sections 125A.023 and 125A.027. Committees must include representatives of local health, education, and county human service agencies, county boards, school boards, early childhood family education programs, Head Start, parents of young children with disabilities under age 12, child care resource and referral agencies, school readiness programs, current service providers, and may also include representatives from other private or public agencies and school nurses. The Committee must elect a chair from among its members and must meet at least

quarterly.

b) The Committee must develop and implement interagency policies and procedures concerning the following ongoing duties:

i) Develop public awareness systems designed to inform potential recipient families, especially parents with premature infants, or infants with other physical risk factors associated with learning or development complications, of available programs and services;

ii) To reduce families' need for future services, and especially parents with premature infants, or infants with other physical risk factors associated with learning or development complications, implement interagency child find systems designed to actively seek out, identify, and refer infants and young children with, or at risk of, disabilities, including a child under the age of three who: (i) is involved in a substantiated case of abuse or neglect or (ii) is identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure;

iii) Establish and evaluate the identification, referral, child and family assessment systems, procedural safeguard process, and community learning systems to recommend, where necessary, alterations and improvements;

iv) Assure the development of individualized family service plans for all eligible infants and toddlers with disabilities from birth through age two, and their families, and individual education plans and individual service plans when necessary to appropriately serve children with disabilities, age three and older, and their families and recommend assignment of financial responsibilities to the appropriate agencies;

v) Implement a process for assuring that services involve cooperating agencies at all steps leading to individualized programs;

vi) Facilitate the development of a transitional plan if a service provider is not recommended to continue to provide services;

vii) Identify the current services and funding being provided within the community for children with disabilities under age five and their families;

viii) Develop a plan for the allocation and expenditure of additional state and federal early intervention funds under United States Code, title 20, section 1471 et seq. (Part C, Public Law 108-446) and United States Code, title 20, section 631, et. seq. (Chapter I, Public Law 89-313); and

ix) Develop a policy that is consistent with section 13.05, subdivision 9, and federal law to enable a member of an interagency early intervention committee to allow another member access to data classified as not public.

c) The local Committee shall also:

i) Participate in needs assessments and program planning activities conducted by local social service, health and education agencies for young children with disabilities and their families; and

ii) Review and comment on the early intervention section of the Total Special Education System (TSES) for the district, the county social service plan, the section or sections of the community health services plan that address needs of and service activities targeted to children with special health care needs, the section on children with special needs in the county child care fund plan, sections in Head Start plans on coordinated planning and services for children with special education or school readiness, or other applicable coordinated school and community plans for early childhood programs and services, and the section of the maternal and child health special project grants that address needs of and service activities targeted to children with chronic illness and disabilities.

V. Interagency Agreements the District has Entered

Verndale School District has entered in the following interagency agreements or joint powers board agreements for eligible children, ages 3 to 21, to establish agency responsibility that assures that coordinated interagency services are coordinated, provided, and paid for, and that payment is facilitated from public and private sources:

Name of Agency	Terms of Agreement	Agreement Termination / Renewal Date
Freshwater Education District	Provide and support special education services and opportunities	Annual Agreement
Northern Pines Mental Health	Support and participation in collaborative programs	August 2027

VI. Special Education Advisory Council

In order to increase the involvement of parents of children with disabilities in district policy making and decision making, Freshwater has a special education advisory council.

A. Freshwater's Special Education Advisory Council is established in cooperation with other districts who are members of the same special education cooperative.

B. Freshwater's Special Education Advisory Council is a subgroup of the Freshwater Education District Board.

C. Freshwater's Special Education Advisory Council meets 2 times per year.

D. The operational procedures of Freshwater's Special Education Advisory Council are available on the Freshwater website: www.fed.k12.mn.us

VII. Assurances

Code of Federal Regulations, section 300.201: Consistency with State policies. Verndale School District, in providing for the education of children with disabilities within its jurisdiction, has in effect policies, procedures, and programs that are consistent with the State policies and procedures established under sections 300.101 through 300.163, and sections 300.165 through 300.174. (Authority: 20 U.S.C. § 1413(a)(1)).

Yes: Assurance given.