Surrogate Parent Determination Form

Please complete the next 4 pages and send to the Surrogate Parent Coordinator listed on the last page.

Student Name (Last, First, M.I.)			
Date of Birth	District of Residence		
School	Age		
Teacher	Grade		
Disability Category			

If any one of the following situations results in a "YES, "a surrogate parent is deemed necessary.

YES	NO	SITUATION	
		No parent, guardian, current foster parent, or relative caregiver (relative acting in place of the parents with whom the child lives) can be located (need documentation of efforts to locate).	
		Parents' right to make educational decisions for the child have been terminated by the court, and no guardian, current foster parent, or relative caregiver (relative with whom the child lives) can be located (need letter from agency or court order) and the child does not have a court-appointed education decision maker or surrogate parent.	
		The child is an unaccompanied homeless youth (a youth without a fixed residence and not under the supervision of a parent).	

Person completing this form		
Position		

Surrogate Parent Request Form

Date:				
Student Name (Last, First, M.	1.)	Date of Referral		
Date of Birth	District of Residence	Name of Caretaker or Resident Provider (foster parent, home, etc.)		
School	Age	Street Address		
Teacher	Grade	City	State	Zip
Disability Category		Telephone Number		
Special Education Assignme	ent:			
Full-Time Supplemental Itinerant District Class Out of District Pla	ncement			
Program Supervisor:		Caretaker Status:Fo	oster ParentAgen	ісу
Social Agencies (if more th	an one, list both):			
Agency		Agency		
Contact Name		Contact Name		
Phone		Phone		
Address		Address		
Recommendation(s) for po	ssible surrogate parent:			
Name		Relationship	Phone Numbe	 er
Address				

Surrogate Parent Request Form (continued)

If no conflicts of interest exist (i.e., employed by the local education agency (LEA) or agency) are you recommending the caretaker to be the surrogate parent? Circle: Yes or No

A surrogate parent cannot be appointed by the LEA when:

There is a parent, guardian, current foster parent or relative caregiver (relative with whom the child lives) who can be located and whose right to make educational decisions has not been terminated by a court, or if a court has already appointed an education decision maker or surrogate parent for that child.

Primary school contact for Surrogate Parent Coordinator (e.g., Caseworker, Home & School Visitor, Supervisor, District Coordinator)

Referred by

Signature – Program Supervisor

Return Form to: Melissa Wyllie, Surrogate Parent Coordinator

Midwestern Intermediate Unit IV

453 Maple Street Grove City, PA 16127 melissa.wyllie@miu4.org 724-458-6700 x1206 724-458-4468 (fax)

Midwestern Intermediate Unit IV 453 Maple Street Grove City, PA 16127

Application Form for Obtaining a Surrogate Parent

School District:		Date:
Studer	nt's Name:	DOB:
Address:		Telephone:
Please o	check the appropriate box:	
	Parents of the student are not known.	
	The student is a ward of the state.	
	The student is an unaccompanied homeless youth.	
Custod	lial Adult:	
Addre	ess:	
Teleph	none:	
Parent	s (if known):	
Addro	ess:	

Return form to:

Surrogate Parent Coordinator – Melissa Wyllie Midwestern Intermediate Unit IV 453 Maple Street Grove City, PA 16127-2399 724-458-4468 (fax) melissa.wyllie@miu4.org