

# 13 DISABILITY CLASSIFICATIONS FOR IEPS IN NEW YORK STATE

Students who meet the eligibility criteria for one or more of these disability classifications may be considered for special education services under IDEA.

## *What qualifies a student for special education?*

For a student to be identified as a "child with a disability" and thus eligible for special education, the student's academic performance must be adversely affected by one of the 13 educational disability classifications, AND the student must need specially designed instruction or special services or programs to meet their unique needs.



## *What does "adversely affected" really mean?*

Although a student may be medically diagnosed with a condition (for example, autism, cerebral palsy, dyslexia, etc.), this does not automatically make a person eligible for special education in the school setting. The disability must impede their learning and education for them to be considered "adversely affected".



## *Can my student qualify for an IEP even if they are not failing?*

Yes. "Adversely affected" does not mean that a student has to be failing or retained to be eligible for special education. Students can be progressing from grade to grade and still be eligible for an IEP.



## *Who determines a student's disability classification?*

The disability classification is determined by the Committee for Special Education (CSE). This committee includes the CSE Chairperson, school psychologist, general education teacher, special education teacher and the parent/guardian of the student. A student's disability classification will be determined through an evaluation process.



## *Will my child be reevaluated?*

Yes. Under the IDEA, your child must be reevaluated at least every three years. The purpose of this reevaluation is to find out your child's educational needs and if your child continues to be a student with a disability.



Although school districts are required to reevaluate children with disabilities at least every three years, your child may be reevaluated more often if you or your child's teacher(s) request it.



**Date**

**(Name of CSE Chairperson)**

**(Name of School District)**

**(Address of School)**

**(City, State Zip Code)**

Dear **(Name of CSE Chairperson)**:

My child, **(Child's Name)**, date of birth **(date of birth)**, attends **(School Name)**. I request a CSE meeting for the following reasons: **(list reasons)**.

Please contact me to schedule a CSE meeting at a mutually agreeable time and place.

Thank you for your help. I look forward to hearing from you soon on this matter.

Sincerely,

***Signature***

**Parent Name**

**Address**

**City, State, Zip Code**

**Phone Number**

**E-Mail address**