

## Emergency Model Form I-4 Services

In order to streamline processes and assist IEP teams in dealing with some of the unique challenges brought about by the pandemic, WDE is offering a modified emergency IEP services form for the 2020-21 school year for documentation of special education services, related services, and supplementary aids and services. As with all model forms offered by WDE, districts are welcome to use the emergency form, but are not required to do so.

This modified emergency form was developed to allow IEP teams to discuss potential service changes that may arise due to a pandemic-related change of educational setting. The emergency form allows for documentation of the team's decisions about in-person and virtual education services directly within each student's IEP, without requiring a separate contingency plan or IEP amendment.

While certain aspects of a student's special education, related services, or supplementary aids and services might need to be adjusted due to the practical differences between in-person and virtual education delivery techniques (i.e. frequency or duration of service), the student's educational needs, annual goals, and the service providers' expectations must not change. **There must be no negative impact on a student's receipt of educational benefit as a result of shifting from in-person to virtual education.**

Furthermore, it is important to note that this **emergency form may only be used** to plan for and document a potential change in the student's educational environment due to the COVID-19 public health emergency, and only **under one of the following conditions:**

1. The school goes into a Tier III response, and all in-person instruction moves to virtual education; or
2. Parent(s) choose to remove their child from in-person learning, in favor of virtual education; or
3. A child needs to be quarantined due to COVID-19 infection or exposure to an infected individual.

Prior Written Notice (PWN) must be issued any time there is a change in the student's educational environment. If a student with a disability moves from in-person instruction to virtual education or virtual education to in-person instruction, Prior Written Notice must be issued, and the start date of the service(s) must be noted on the appropriate IEP services page. Also, any discrepancy in the Frequency and/or Duration of a special education service or a related service between In-Person and Virtual Ed. or ESY and Virtual ESY must be explained in Prior Written Notice (PWN).

**NOTE: The terms *Virtual Ed.* and *Virtual ESY*, referenced on the emergency model form I-4 services, includes *all* WDE-defined distance learning service delivery methods, including. Remote Education, Classroom-based Virtual Education, and Virtual Education. For more information about WDE-defined distance learning delivery methods, refer to [2020-21 Distance Learning: Guidance for Wyoming School Districts](#)**

<b>Name of Student</b>	<b>Date of IEP Meeting</b>

**A. SPECIAL EDUCATION SERVICES**

A statement of the special education, related services, supplementary aids and services, based on peer-reviewed research to the extent practicable, to be provided to the student, or on behalf of the student, and a statement of the program modifications or supports for school personnel that will be provided to enable the student:

- To advance appropriately toward attaining the annual goals.
- To be involved in and make progress in the general education curriculum and to participate in extracurricular and other nonacademic activities.
- To be educated and participate with other students with disabilities and nondisabled students in extracurricular and other nonacademic activities.

**NOTE: \* Virtual Education and Virtual ESY IEP services implemented ONLY in the event of a public health emergency.**  
 Any discrepancy in Frequency and/or Duration of special education services between In-Person and Virtual Ed. or ESY and Virtual ESY must be explained in Prior Written Notice (PWN).

Special Education	Frequency	Duration	Location	Projected Start Date
Area of Specially Designed Instruction:	In-Person			
	*Virtual Ed.			
	ESY			
	*Virtual ESY			
Area of Specially Designed Instruction:	In-Person			
	*Virtual Ed.			
	ESY			
	*Virtual ESY			
Area of Specially Designed Instruction:	In-Person			
	*Virtual Ed.			
	ESY			
	*Virtual Ed. ESY			
Postsecondary Transition Services:	In-Person			
	*Virtual Ed.			
	ESY			
	*Virtual ESY			
Speech – Language Pathology: (Primary Disability Only)	In-Person			
	*Virtual Ed.			
	ESY			
	*Virtual ESY			
Physical Education:	In-Person			
	*Virtual Ed.			
	ESY			
	*Virtual ESY			
Vocational Education:	In-Person			
	*Virtual Ed.			
	ESY			
	*Virtual ESY			
Travel Training:	In-Person			
	*Virtual Ed.			
	ESY			
	*Virtual ESY			

Name of Student		Date of IEP Meeting			
<b>B. RELATED SERVICES</b> - Necessary to benefit from special education. <b>NOTE: *Virtual Education and Virtual ESY IEP services implemented ONLY in the event of a public health emergency.</b> <i>Any discrepancy in Frequency and/or Duration of related service between In-Person and Virtual Ed. or ESY and Virtual ESY must be explained in Prior Written Notice (PWN).</i>					
Related Service	<input type="checkbox"/> N/A	Frequency	Duration (Amount)	Location	Projected Start Date
Audiology	In-Person				
	*Virtual Ed				
	ESY				
	*Virtual ESY				
Counseling Services	In-Person				
	*Virtual Ed				
	ESY				
	*Virtual ESY				
Educational Interpreting Services	In-Person				
	*Virtual Ed				
	ESY				
	*Virtual ESY				
Occupational Therapy	In-Person				
	*Virtual Ed				
	ESY				
	*Virtual ESY				
Orientation and Mobility	In-Person				
	*Virtual Ed				
	ESY				
	*Virtual ESY				
Parent Counseling and Training	In-Person				
	*Virtual Ed				
	ESY				
	*Virtual ESY				
Physical Therapy	In-Person				
	*Virtual Ed				
	ESY				
	*Virtual ESY				
Psychological Services	In-Person				
	*Virtual Ed				
	ESY				
	*Virtual ESY				
Recreation	In-Person				
	*Virtual Ed				
	ESY				
	*Virtual ESY				
School Health Services	In-Person				
	*Virtual Ed				
	ESY				
	*Virtual ESY				

<b>Name of Student</b>		<b>Date of IEP Meeting</b>			
<p><b>B. RELATED SERVICES <i>continued</i></b> - Necessary to benefit from special education.</p> <p><b>NOTE: * Virtual Education and Virtual ESY IEP services implemented ONLY in the event of a public health emergency.</b>  <i>Any discrepancy in Frequency and/or Duration of related service between In-Person and Virtual Ed. or ESY and Virtual ESY must be explained in Prior Written Notice (PWN).</i></p>					
Related Service	<input type="checkbox"/> N/A	Frequency	Duration (Amount)	Location	Projected Start Date
School Nurse Services	In-person				
	*Virtual Ed.				
	ESY				
	*Virtual ESY				
Speech Language Pathology (only for students with other primary disability)	In-person				
	*Virtual Ed.				
	ESY				
	*Virtual ESY				
Transportation	In-person				
	ESY				
Other (specify)	In-person				
	*Virtual Ed.				
	ESY				
	*Virtual ESY				

<b>C. SUPPLEMENTARY AIDS AND SERVICES</b>			
<p>Accommodations, aids, services, assistive technology and other supports that are provided to avoid removing the student from regular education classes, other education-related settings and extracurricular and non-academic settings. (May include routine checking of hearing aids and external components of surgically implanted devices.)</p> <p><b>NOTE: Include accommodations that may be needed in Virtual Ed. setting.</b></p>			
Supplementary Aids & Services	Explanation of Frequency, Duration, Location	Location	Start Date
		<input type="checkbox"/> In-Person	
		<input type="checkbox"/> Virtual Ed.	
		<input type="checkbox"/> In-Person	
		<input type="checkbox"/> Virtual Ed.	
		<input type="checkbox"/> In-Person	
		<input type="checkbox"/> Virtual Ed.	
		<input type="checkbox"/> In-Person	
		<input type="checkbox"/> Virtual Ed.	
		<input type="checkbox"/> In-Person	
		<input type="checkbox"/> Virtual Ed.	
		<input type="checkbox"/> In-Person	
		<input type="checkbox"/> Virtual Ed.	