

Non-Public School Intent to Participate Form IDEA Programs for the 2024-25 School Year

The Individuals with Disabilities Education Act (IDEA) requires local educational agencies (LEAs) to locate, identify, evaluate, and provide services to children with disabilities enrolled by their parents in non-public elementary and secondary schools. Under 34 C.F.R. § 300.131, the LEA where the non-public school is located is responsible for conducting child find for parentally placed non-public school children. The child find requirements for parentally placed children make clear that the LEA, after timely and meaningful consultation with non-public school representatives, must conduct a thorough and complete child find process to determine the number of parentally placed children with disabilities attending non-public schools located in the LEA.

Further, under 34 C.F.R. § 300.133(a), each LEA must spend a proportionate amount of IDEA, Part B funds on providing special education and related services (including direct services) to parentally placed non-public school children with disabilities. The regulations specify that the LEA makes the final decisions about the services to be provided to eligible parentally placed non-public school children with disabilities, based in part on input provided through the consultation process by appropriate non-public school representatives and representatives of parents of parentally placed non-public school children with disabilities.

This optional Intent to Participate form should be signed by the LEA and non-public official(s) and kept for the records of the LEA and non-public school.

I.	The LEA should complete this section and send this form to non-public schools within their
	boundaries that have parentally-placed students with disabilities. Information collected should
	be used in the annual non-public survey.
	Name of LEA:
	Address of LEA:
	LEA Federal Programs Contact Person:
	LEA Federal Programs Contact Title:
	Phone: Email:
II.	Each non-public school should complete this section and return this form to the LEA at the
	address listed in Section I.
	Non-Public School Name:
	Address of School:
	Name of School Administrator:
	Administrator Title: Email:
	Phone: Fax:
	School Profit Status: NON-PROFIT FOR PROFIT (<i>Note: For-profit non-public schools cannot participate.</i>)
	Non-Public School Category: □ I □ I-SP (formally VII) □ II □ III □ IV □ V
	Each non-public school should indicate the school's intention to participate in IDEA Equitable
	Services for the 2024-25 school year.
	For the 2024-25 school year: Our school elects to participate.* Our school elects not to participate.
IV.	Each participating non-public school should complete this section.
	Total school enrollment of parentally-placed non-public school children with disabilities:
	School Administrator's Signature: Date: