

St. Lucie Public Schools
 Exceptional Student Education – Audit Checklist

Student:	Number: 56
Last, First	

Program: Speech Impaired (SI)	Program Code:	F
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General education intervention procedures:	Date Completed:
Sensory screen for hearing	
Sensory screen for vision	

Date Parent/Guardian gave written consent to conduct an evaluation	
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Evaluations required for Articulation	Date Completed:
Information gathered from the student’s parent(s) or guardian(s) and teacher(s) and when appropriate, the student, regarding the concerns and description of speech characteristics (through interview, checklist, or questionnaire)	
Documented and dated observation of the student’s speech characteristics during connected speech or conversation (conducted by a speech language pathologist)	
An examination of the oral mechanism structure and function	
One or more standardized, norm referenced instruments designed to measure speech sound production to determine the type and severity of speech sound errors and whether the errors are phonetic or phonemic in nature	
Evaluations required for Voice	
Information gathered from the student’s parent(s) or guardian(s) and teacher(s) and when appropriate, the student, regarding the concerns and description of voice characteristics (through interview, checklist, or questionnaire)	
Documented and dated observation(s) of the student’s voice characteristics during connected speech or conversation (conducted by a speech language pathologist) in one or more settings which must include the typical learning environment	
An examination of the oral mechanism structure and function	
A report of a medical examination of laryngeal structure and function by a physician licensed in Florida that includes a description of the state of the vocal mechanism and any medical implications for therapeutic intervention	
Evaluations required for Fluency	
Information gathered from the student’s parent(s) or guardian(s) and teacher(s) and when appropriate, the student, to determine the social and educational impact of the speech behaviors, the student’s attitude toward speech behaviors, and the motor aspects of speech behaviors (through interview, checklist, or questionnaire)	
A minimum of two documented and dated observations of the student’s speech and secondary behaviors conducted by a speech language pathologist in more than one setting, including the typical learning environment	
An examination of the oral mechanism structure and function	

Assessment of all of the following:	
motor aspects of speech behaviors	
student's attitude regarding speech behaviors	
social impact of the speech behaviors	
educational impact of the speech behaviors	
A speech sample of a minimum of 300-500 words to determine the frequency, duration, and type of dysfluent speech behaviors	

Date(s) of parental contact for eligibility meeting (meeting notice)		
Date of eligibility determination		
Date(s) of parental contact for initial IEP (meeting notice)		
Date of initial IEP		
Date parent signed consent for placement		
Evaluation Completion Date		Triennial Reevaluation Date

Evaluation Source:	SLC	In-State Transfer	SLC/Out-of-State Transfer
			(Florida initial eligibility criteria met)

Dismissal Date:	
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