

Autism Spectrum Disorder
Montcalm Area Intermediate School District – Phone: 989-831-5261
Multidisciplinary Evaluation Team (MET) Recommendation

Student Name _____ MET Report Date _____

Birth Date _____ Grade _____ Attending District _____

PURPOSE

This form will be used by the Multidisciplinary Evaluation Team (MET) to recommend: *(Choose one)*

- Initial eligibility** for special education *(Attach a copy of all supporting data and documentation)*
- Ongoing eligibility** for special education *(Attach a copy of all supporting data and documentation)*

EVALUATION FINDINGS AND DOCUMENTATION

Attached to this MET coversheet are copies of supporting data and documentation sufficient to determine eligibility for special education as a student with autism spectrum disorder:

<u>Required Information</u>	<u>Report Title and Date (Attach report)</u>
Ability/achievement level	_____
Communication functioning	_____
Relevant behavior observations	_____
Educationally relevant medical information <i>(If none, write "None")</i>	_____
Information from parents and date(s), including development history	_____

DIAGNOSTIC ASSURANCE STATEMENTS

The Multidisciplinary Evaluation Team must consider the following assurance statements before making a recommendation regarding this student's eligibility: *(Check all that apply)*

- There is evidence of a lifelong developmental disorder that adversely affects a student's educational performance in one or more of the following areas:
_____ Academic _____ Behavioral _____ Social
- The suspected disorder, typically manifested before thirty six months of age, but may also occur after age three. This disorder is characterized by qualitative impairments in reciprocal social interactions, communication and restrictive range of interests/repetitive behavior and ALL the following:
 1. Qualitative impairments in reciprocal social interactions including at least two of the following areas:
 - _____ Marked impairment in the use of multiple nonverbal behaviors-such as eye-to-eye gaze, facial expressions, postures, and gestures to regulate social interaction.
 - _____ Failure to develop peer relationships appropriate to developmental level.
 - _____ Marked impairment in spontaneous seeking to share enjoyment, interests, or achievements with other people.
 - _____ Marked impairment in the areas of social or emotional reciprocity.
 2. Qualitative impairments in communication including at least one of the following:
 - _____ Delay in, or total lack of the development of spoken language not accompanied by an attempt to compensate through alternative modes of communication such as gesture or mime.
 - _____ Marked impairment in pragmatics or in the ability to initiate, sustain, or engage in reciprocal conversations with others.
 - _____ Stereotyped and repetitive use of language or idiosyncratic language.
 - _____ Lack of varied, spontaneous make-believe play or social imitative play appropriate to developmental level.
 3. Restricted, repetitive, and stereotyped behaviors including at least one of the following:
 - _____ Encompassing preoccupation with one or more stereotyped and restricted patterns of interest that is abnormal either in intensity or focus.
 - _____ Apparently inflexible adherence to specific, nonfunctional routines or rituals.
 - _____ Stereotyped and repetitive motor mannerisms, for example, hand or finger flapping or twisting, or complex whole-body movements.
 - _____ Persistent preoccupation with parts of objects.

EXCLUSIONARY FACTORS WORKSHEET
Autism Spectrum Disorder

ASD

Each factor must be ruled out as the PRIMARY FACTOR for the student’s inability to progress in the general education curriculum, and for obtained cognitive, achievement, language and adaptive scores	Yes	No
1. Lack of appropriate instruction in essential components of reading and math		
Does information obtained during assessment indicate lack of appropriate instruction in reading and math as the determinant factor in this student’s inability to progress in the general education curriculum?		
2. Limited English Proficiency		
<ul style="list-style-type: none"> • Is there a language other than English spoken by this student? 		
<ul style="list-style-type: none"> • Is there a language other than English spoken in the student’s home 		
<ul style="list-style-type: none"> • Are there any specific dialect or cultural influences that would affect this student’s ability to speak or understand English? 		
3. Cultural Background Differences		
Document all information gathered in assessment that would exclude environmental or cultural disadvantage as the determinant factor for this student’s inability to access general education curriculum or perform significantly below normal on measures of cognition, achievement, and adaptive behavior		
<ul style="list-style-type: none"> • Is there compelling evidence from data gathered and information generated to indicate this student is unable to learn or perform on assessments due to cultural or background difference? 		
4. Medical Conditions that Impact School Performance		
Document all information gathered through assessment that would exclude medical or health reasons for this student’s deficient performance on both assessments of cognition, achievement, and adaptive behavior.		
<ul style="list-style-type: none"> • Does the student have a medical history and/or school history of medical or health-related difficulties causing the student to have difficulty accessing the general education curriculum? 		
<ul style="list-style-type: none"> • Are there school records of illness or health-related conditions that would impact negatively on this student’s ability to progress in the general education curriculum? 		
5. Socioeconomic Status or Communication, Sensory or Motor Impairments		
Document all information gathered through assessment that would exclude sensory or motor impairments as a factor for this student’s deficient performance on assessment of cognition, achievement, and adaptive functioning.		
<ul style="list-style-type: none"> • Does the assessment data indicate that lack of opportunity to learn due to socioeconomic circumstances is the cause or primary reason for the student’s deficient scores obtained on cognitive, achievement, and adaptive skills measured? 		
If any of the questions in section 1-5 are YES, please document the reason a given exclusionary consideration is not the primary reason for the student’s deficit cognitive, achievement, and/or adaptive scores.		
6. Impairment Specific Considerations		
<ul style="list-style-type: none"> • Are the student’s measured skills markedly impaired in reciprocal social interactions? 		
<ul style="list-style-type: none"> • Are the student’s measured skills markedly impaired in communication? 		
<ul style="list-style-type: none"> • Area the student’s measured skills markedly impaired restricted, repetitive, and stereotyped behaviors? 		
<ul style="list-style-type: none"> • The student’s measured skills cannot be explained by other eligibility criteria? 		