

POST SCHOOL OUTCOMES EXIT SURVEY

*This page must be completed for all students, 16 years or older, with an IEP and exiting secondary school.
This form must be kept in the central administrative file for follow-up one year after exit.*

Student Name: _____ Date of Birth: _____
State Student Identification Number: (SASID) _____ Date Student Exited School: _____

Exit Reason: (Check each option that applies)
 Graduated with a Diploma (6) Certificate of Completion , Modified Diploma (7)
 Reached Maximum Age (8) Completed a GED
 Dropped Out of School (5) Moved-Not Known to be Continuing (4)

1. Is/Was a postsecondary transition(s) goal(s) included on the student’s IEP in the final year of high school?
NO

YES If Yes indicate goal(s): (Check each option that applies)
 Employment Postsecondary Education/Training
 Independent Living Information is Not Available/Don’t Know
 Other (please specify): _____

2. Prior to exiting public school, does/did the student participate in any of the following? (Check each option that applies.)
 Volunteer Work Experience/Work Study/Internship
 Paid/Competitive Employment Information is Not Available/Don’t Know

3. Prior to exiting public school, is/was the student referred to any of the following? (Check each option that applies)
 Vocational Rehabilitation or SWAP (School to Work Alliance Program)
 Mental Health Services
 Social Security Administration for Benefits
 Community Centered Board (CCB) (Developmental Disabilities Services)
 Other (please specify): _____
 Information is Not Available/Don’t Know

CONTACT INFORMATION AFTER LEAVING HIGH SCHOOL

Please indicate most permanent or reliable information.

Student Name: _____
Permanent Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone: _____ Cell Phone: _____ E-Mail: _____

Family Member Name: _____
Permanent Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone: _____ Cell Phone: _____ E-Mail: _____

Additional Contact: _____
Permanent Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone: _____ Cell Phone: _____ E-Mail: _____

Optional Signature Section

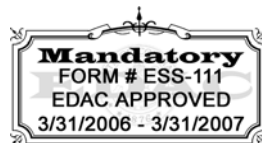
I have been notified that I may be contacted one year after exiting from secondary school for follow-up. I understand that my signature is recognition of notification and does not obligate me to participate in the follow-up data collection.

Student Signature

Date

Parent Signature

Date



POST SCHOOL OUTCOMES EXIT SURVEY DIRECTIONS

The Post School Outcomes Exit Survey is designed to gather contact information from students 16 years of age or older with IEPs who are exiting secondary education. This information will be used to contact a random sample of students one year after exiting to gather information on their post school activities. This collection is a federal requirement under IDEA 04. More importantly, this data will help school districts and the Colorado Department of Education answer the “so what” question regarding secondary education, special education and transition services. It is important to understand the relationships between services and outcomes to help the education community continue to improve services for all students.

Please carefully complete the following survey. The contact information is critical for the one year follow-up data collection effort. Gather the contact information from the student and his/her parent/guardian with an emphasis on attaining the most permanent contact information and explain that a follow-up survey will be conducted one year from exiting the secondary education system. Included is a signature section which is optional, but best practice is to have both the student and parent sign the form. It is important to note that the signatures indicate notification of this process and does not obligate either the student or parent to participate in the follow-up. Please assure students and parents/guardians that completion of the follow-up survey is important and meaningful to education in Colorado.

The Colorado Department of Education suggests that this exit survey be completed with the Summary of Performance process. For students who exit by means other than the attainment of a diploma or aging out, the exit survey will need to be completed without the Summary of Performance process. This form will be used beginning the 2005-06 school year and continued each year. For students who exit the education system during the school year, it is recommended that this form be completed within 30 days after the student leaves.

