

Weslaco Independent School District
Special Education Department

Transition Services Checklist

Student: _____ D.O.B. : _____ Age: _____

School: _____ Grade: _____ ID #: _____

ARD Date: _____

Transition – Forms will be submitted with ARD Packet

- Notice of ARD (**Check off** **development of transition services.....**)
- Receipt of Transition Brochures (**signed by parent/adult student/guardian**)
- Individual Transition Plan Meeting Brochure (**in by parent's/adult student's/guardian's language**)
- Letter to Parents (**list of agencies available**) request from Campus Diagnostician
- Consent for Disclosure of Confidential Information For Transition Service (**WISD Form**)
- Notice to Agency: Transition Planning/Services Meeting (**date sent must be after the parent's date of Consent for Disclosure**)
- Functional Vocational Evaluation – Student Interview
- Functional Vocational Evaluation – Parent Information
- Functional Vocational Evaluation – Teacher Observation
- Transition Planning (**before 14 years of age**) (**WISD Form**)
- Transition Supplement (**before 16 years of age**) (**WISD Form**)
- Notification Regarding Transfer of Rights – Age 16
- Notice of Guardianship, Alternatives to Guardianship, & Other Supports & Services (**given at 16**) – (*update Annually*)
- Supported Decision – Making Agreement – (**given at 16**) – Updated Annually
- Notice of Transfer of Parental Rights – **Age 18** -- Updated Annually