

## Proportionate Share Assurance

### Fiscal Year 2019–20, Resource Code 3310

**Local Educational Agency (LEA) Name**

**Special Education Local Plan Area (SELPA) Name**

**SELPA Code**

The major provisions regarding children with disabilities enrolled by their parents in private, including religious, elementary and secondary schools are located in the statute at section 612(a)(10)(A) of the Individuals with Disabilities Education Act (IDEA) and in the regulations at *Code of Federal Regulations*, Title 34, (34 *CFR*), §§300.130 through 300.144. The IDEA requires that the local educational agency (LEA), after timely and meaningful consultation with both private school representatives and parent representatives, conduct a thorough and complete child find process to determine the number of parentally-placed children with disabilities attending private schools located in the LEA. These requirements also make clear the LEA's obligation to spend a proportionate amount of IDEA Part B funds to provide equitable services to this group of children.

The LEA's proportionate amount of IDEA Part B funds to be provided for parentally-placed private school children with disabilities in the 2019–20 fiscal year is calculated using the official December 2018 and June 2019 Pupil Count reported in the California Special Education Management Information System (CASEMIS).

In conformance with this requirement, the LEA has determined the following:

There are no private schools located in the LEA.

There were no parentally-placed children with disabilities attending the private school located in the LEA. This determination was made after a timely and meaningful consultation with both private school representatives and parent representatives of parentally placed private school children with disabilities and after conducting a thorough and complete child find process to determine the number of parentally-placed children with disabilities attending the private schools located in the LEA.

The signature of authorized agent conveys agreement with and accuracy of the information provided.

**Signature of Authorized Agent**

**Date Signed**

**Printed Name and Title of Authorized Agent**

**Contact Person's Name**

**Contact Person's Email**

**Contact Person's Telephone Number**