Out-of-State Nonpublic School Placement Notice

In accordance with California *Education Code* 56365(f), within 15 days of an out-of-state placement decision, the placing Local Educational Agency is required to submit this completed form to the California Department of Education at the following address:

California Department of Education Nonpublic Schools Unit 1430 N Street, Suite 2401 Sacramento, CA 95814 Phone: 916-327-0141

> Fax: 916-327-0843 Email: <u>NPS@cde.ca.gov</u>

Placing Local Educational Agency (LEA) Information

Name of Placing LEA:							
Address:					T		
City:				Stat	e:	ZII	P:
LEA Contact Name:				Pho	ne:		
LEA Contact Email:							
Signature:							
Student Information							
Student's California Issued Student Identifier (SSID Nur		vide					
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Student's Date of Birth:	rmatio	n					
	ormatio	on					
Nonpublic School (NPS) Info	ormatio	on			State:		ZIP:
Nonpublic School (NPS) Info NPS Name: Address:	Yes	on	No		State:		ZIP:
Nonpublic School (NPS) Info NPS Name: Address: City:		on	No		State:		ZIP:
Nonpublic School (NPS) Info NPS Name: Address: City: Is NPS CDE-Certified?		on	No		State:		ZIP:
Nonpublic School (NPS) Info NPS Name: Address: City: Is NPS CDE-Certified? NPS Contact Name:		on	No		State:		ZIP:
Nonpublic School (NPS) Info NPS Name: Address: City: Is NPS CDE-Certified? NPS Contact Name: NPS Contact Telephone:		on	No		State:		ZIP:

Describe the special education and related services provided by the out-of-state program placement.
List and identify the costs of the special education and related services provided. Use additional sheets, if necessary.
Describe the efforts made by the placing agency to locate an appropriate public school, NPS, or a combination thereof, within the State of California. List all steps taken and all schools contacted. Use additional sheets, if necessary.