

DSE Close Adult Supervision Request Form for SY25-26

- Close adult supervision is a supplementary aid and/or service identified by a student's IEP team based on existing data in order to access instruction and school activities. IEP teams at least annually identify the current level of support a student requires, including entry into the school building, each instructional class/period, transitions, lunch/recess, emergencies, and exit from the building at the end of the school day. First, the IEP team considers where during the school day that existing and natural supports promote independence and success. IEP teams also identify areas in which to fade close adult supervision to promote independence.
- Complete this request for student's whose IEP team has identified CAS as a supplementary aid and/or service AND additional supports beyond the current teacher, paraprofessional, or general staff are needed.
- Services will be provided to students who require CAS through the current resources allotted to schools, and when necessary, by adding additional resources based on student needs.
- Reference the [Steps to Requesting Close Adult Supervision](#) flowchart.

* Indicates required question


1. Email *

2. Student Name (Last Name, First Name) *

Student Information

Complete all student demographic information. All sections are required.

3. Requesting School *


 Dropdown*Mark only one oval.*

- ☐ Atholton ES
- ☐ Bellows Spring ES
- ☐ Bollman Bridge ES
- ☐ Bryan Woods ES
- ☐ Bushy Park ES
- ☐ Centennial Lane ES
- ☐ Clarksville ES
- ☐ Clemens Crossing ES
- ☐ Cradlerock ES
- ☐ Dayton Oaks ES
- ☐ Deep Run ES
- ☐ Ducketts Lane ES
- ☐ Elkridge ES
- ☐ Forest Ridge ES
- ☐ Fulton ES
- ☐ Gorman Crossing ES
- ☐ Guildford ES
- ☐ Hammond ES
- ☐ Hanover Hills ES
- ☐ Hollifield Station ES
- ☐ Ilchester Es
- ☐ Jeffers Hill ES
- ☐ Laurel Woods ES
- ☐ Lisbon ES
- ☐ Longfellow ES
- ☐ Manor Woods ES
- ☐ Northfield ES
- ☐ Phelps Luck ES
- ☐ Pointers Run ES
- ☐ Rockburn ES

- ☐ Running Brook ES
- ☐ St. Johns Lane ES
- ☐ Stevens Forest ES
- ☐ Swansfield ES
- ☐ Talbot Springs ES
- ☐ Thunder Hill ES
- ☐ Triadelphia Ridge ES
- ☐ Veterans ES
- ☐ Waterloo ES
- ☐ Waverly ES
- ☐ West Friendship ES
- ☐ Worthington ES
- ☐ Bonnie Branch MS
- ☐ Burleigh Manor MS
- ☐ Clarksville MS
- ☐ Dunloggin MS
- ☐ Elkridge Landing MS
- ☐ Ellicott Mills MS
- ☐ Folly Quarter MS
- ☐ Glenwood MS
- ☐ Hammond MS
- ☐ Harpers Choice MS
- ☐ Lake Elkhorn MS
- ☐ Lime Kiln MS
- ☐ Mayfield Woods MS
- ☐ Mount View MS
- ☐ Murray Hill MS
- ☐ Oakland Mills MS
- ☐ Patapsco MS
- ☐ Patuxent Valley MS
- ☐ Thomas Viaduct MS
- ☐ Wilde Lake MS
- ☐ Atholton HS

- ☐ Centennial HS
- ☐ Glenelg HS
- ☐ Hammond HS
- ☐ Howard HS
- ☐ Long Reach HS
- ☐ Marriotts Ridge HS
- ☐ Mount Hebron HS
- ☐ Oakland Mills HS
- ☐ Reservoir HS
- ☐ River Hill HS
- ☐ Wilde Lake HS
- ☐ Cedar Lane
- ☐ Homewood


4. Disability: Identify the disability on the student's most recently approved IEP.

*  Dropdown

Mark only one oval.

- ☐ Other Health Impairment
- ☐ Specific Learning Disability
- ☐ Deaf Blindness
- ☐ Multiple Disabilities
- ☐ Autism
- ☐ Traumatic Brain Injury
- ☐ Developmental Delay
- ☐ Emotional Disability
- ☐ Visual Impairment
- ☐ Hearing Impairment
- ☐ Deaf
- ☐ Intellectual Disability
- ☐ Orthopedic Impairment
- ☐ Speech Language Impairment


5. Age of student (as of completion of form)

 Dropdown

Mark only one oval.

☐ 3☐ 4☐ 5☐ 6☐ 7☐ 8☐ 9☐ 10☐ 11☐ 12☐ 13☐ 14☐ 15☐ 16☐ 17☐ 18☐ 19☐ 20☐ 21

6. Grade (next school year) *

 Dropdown*Mark only one oval.*

- ☐ PS (includes MINC-PS or MINC-EL)
- ☐ PreK (includes MINC-PK or MINC-EL)
- ☐ K
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10
- ☐ 11
- ☐ 12
- ☐ 12+

7. BIP *

Mark only one oval.

- ☐ Yes
- ☐ No

8. Restraint *

Mark only one oval.

☐ Yes

☐ No

CAS Rubric

[Complete the section below using the HCPSS 2023 Close Adult Supervision Rubric.](#)

9. Health Personal Care *

⌵ Dropdown

Mark only one oval.

☐ 0

☐ 1

☐ 2

☐ 3

☐ 4

10. Communication *

⌵ Dropdown

Mark only one oval.

☐ 0

☐ 1

☐ 2

☐ 3

☐ 4


11. Learning Behaviors/Behavior *

 Dropdown

Mark only one oval.

☐ 0☐ 1☐ 2☐ 3☐ 4

12. Instruction *

 Dropdown

Mark only one oval.

☐ 0☐ 1☐ 2☐ 3☐ 4

13. List the number of hours per day CAS is needed for the student. (**Example:** *
Monday = 2 hours Tuesday = 2 hours Wednesday = 2 hours Thursday=2 hours
Friday 2 hours. CAS needed for lunch/recess and related arts)

NOTE: Number of hours cannot exceed the student day

14. Date Completed *

Example: January 7, 2019

15. Person/Position Completing the form

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