

Deafness Worksheet

Name: _____ School: _____ Meeting Date: _____
Student ID: _____ D.O.B.: _____ Age: _____ Grade: _____

In application of the Virginia Department of Education's Regulations Governing Special Education Programs for Children with Disabilities in Virginia, this worksheet may assist the eligibility group in applying criteria for students who are being considered for eligibility under the category of Deafness. A diagnosis included in a report from a medical professional is not sufficient to make an eligibility determination. After consideration of data from multiple sources, review the definition, consider the items below, and note any additional information. Attach this worksheet to the Eligibility Summary Form and include any necessary documentation.

STEP 1.

DEFINITION: "Deafness" means a hearing impairment that is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, that adversely affects the child's educational performance.

STEP 2.
 True
 False

There is documentation of Deafness.

The child has (check all that apply):

- a bilateral hearing loss (sensorineural, or mixed conductive and sensorineural),
- a fluctuating or a permanent hearing loss,
- documented auditory dyssynchrony (auditory neuropathy), and/or cortical deafness

Describe:

AND

STEP 3.
 True
 False

There is documentation of an adverse effect on educational performance due to one of more of the documented characteristics of Deafness.

List and/or describe:

AND

STEP 4.
 True
 False

Due to the identified Deafness, the student needs specially designed instruction.

List and/or describe: