
Note: As required by law, each District is responsible for administering a pre- and post-assessment for each student assigned to the District's disciplinary alternative education program (DAEP) for a period of 90 school days or longer. Released state assessments for reading and mathematics for the appropriate grade may be used. A District may [contact TEA](#)¹ to obtain accommodated versions of particular assessments.

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¹ TEA Accommodation Resources: <https://tea.texas.gov/student-assessment/testing/student-assessment-overview/accommodation-resources>

Exhibit A—Transition Services While Student Is In Disciplinary Alternative Education Program (DAEP)

Note: Transition procedures for a student exiting a DAEP and returning to a locally assigned campus, including an established timeline for transition and required communication from DAEP staff during the assignment, must be established and updated annually as needed. [See FOCA(LEGAL)]

Student's name: _____

Grade: _____ Original length of DAEP placement: _____

_____ (*student's name*) may begin transitioning back to the locally assigned campus on _____ (*date*) if the following criteria have been met and continue to be met throughout the period of transition:

1. Academic Criteria:
 - a. Regularly complete all assignments given to the student within the time frame required by the assignment.
2. Behavioral Criteria:
 - a. Adhere to all DAEP rules as set out in the SFDR CISD Code of Conduct and DAEP Contract.
 - b. List specific goals for the student in accordance with the student's offense.
 - c. Receive the recommendation of the DAEP principal for positive behavior.
 - (1) Counseling
 - (2) Arise Program
 - (3) Other _____

3. Attendance Criteria:

Be in attendance and on time every assigned day of DAEP placement or present a signed document for an excused absence on the day the student returns to school.

During the student's assignment to the DAEP, the DAEP staff will provide timely written and oral communication to the locally assigned campus regarding this plan, including information regarding the student's educational performance and tasks completed. A conference log noting all oral communications and copies of written communications should be included with this plan, as available.

PLACEMENT IN A DISCIPLINARY ALTERNATIVE EDUCATION SETTING
DISCIPLINARY ALTERNATIVE EDUCATION PROGRAM OPERATIONS

FOCA
(EXHIBIT)

Date of scheduled return to the regular educational setting: _____
Written notice of the student's release date from DAEP was provided to:

- The student's parent or guardian on _____ (*date*); and
- The administrator at the student's regular campus on _____ (*date*).

Name of Campus Administrator: _____

Signature of Campus Administrator: _____

Exhibit B—Personalized Transition Plan Following Student’s Release from Disciplinary Alternative Education Program (DAEP)

Note to administrator: Transition plans are personalized documents meant to assist a student in his or her transition back into the regular classroom from an alternative education program. The transition plan should be based on the student’s specific needs. The regular campus administrator must coordinate the student’s transition back to the regular classroom not later than five instructional days after the date of a student’s release from an alternative education program. Such coordination must include the assistance of and recommendations from certain individuals. [See FOCA(LLEGAL)]

Student’s name: _____

Grade: _____ Original length of DAEP placement: _____

Date of scheduled return to the regular classroom: _____

In developing this personalized transition plan, the following documentation provided by the DAEP coordinator was considered:

- An assessment of the student’s academic growth while attending the DAEP; and
- The results of any assessment instruments administered to the student.

The following individuals provided assistance and recommendations for the development of the student’s personalized transition plan (*check all that apply*):

- The campus behavior coordinator;
- The student’s classroom teachers who are or may be involved in implementing this plan:

Classroom teacher	Subject

- School counselor;
- District peace officer(s);
- Student Services Coordinator; and
- Other appropriate District personnel, including Special Ed./504 representatives.

[The student’s personalized transition plan must include recommendations for the best educational placement of the student.]

PLACEMENT IN A DISCIPLINARY ALTERNATIVE EDUCATION SETTING
DISCIPLINARY ALTERNATIVE EDUCATION PROGRAM OPERATIONS

FOCA
(EXHIBIT)

Based on the assistance and recommendations of the transition team, the best educational placement for this student has been determined to be:

- Regular education setting
- Special Ed./504 setting or accommodations (IEP included)
- ESL setting

[The student's personalized transition plan may include the following recommendations. Participation in certain services will require parental consent.]

Transition activities following the student's return to the regular classroom include *(check all that apply)*:

[Insert details as applicable regarding the topics listed below.]

- Counseling
- Behavioral management
- Academic assistance (concentrated on the student's academic or career goals)
- Mental health services provided by:
 - Local counseling entity _____
 - Other private or public entity _____
 - TCHAT _____
- Providing parents with information about requesting a full individual and initial evaluation for special education services
- Regular review dates of the student's progress toward the student's academic or career goals

To coordinate the student's transition, the regular campus administrator or designee *(choose one below)*:

- Met with the student's parent or person standing in parental relation to the student to coordinate plans for the transition on: _____ *(date met with parent)*
- Attempted but was unable to meet with the parent or person standing in parental relation to the student to coordinate plans for the transition.

Name of campus administrator: _____

Signature of campus administrator: _____

Date: _____