



# SCHOOL NOTIFICATION AND BEST INTEREST DETERMINATION

State Form 47412 (R9 / 6-25)  
DEPARTMENT OF CHILD SERVICES

The information contained in this record is  
**CONFIDENTIAL** per IC 31-33-18.

**INSTRUCTIONS:** Send this form within seventy-two (72) hours of a change of home placement, change of school of legal settlement decided by court, or DCS case closure to notify the Local Education Agency (LEA) Every Student Succeeds Act (ESSA) Point of Contact (POC) of the following:

1. Child's school corporation of origin,
2. School corporation of legal settlement, and
3. School corporation the child will be attending (if different from the current/legal settlement school corporation).

If a child has changed placement outside the attendance area for the child's school of origin, Section 2 of this form must be completed. See policy [8.22 School Notifications and Legal Settlement](#) for further guidance.

**NOTE:** The school should keep a copy of Section 1 upon receipt.

## SECTION 1 – SCHOOL NOTIFICATION

Name of child		Date of birth (month, day, year)
Name of parent or legal guardian		
Address of parent or legal guardian at time of child's initial removal (number and street, city, state, and ZIP code)		
Parent may pick up child from school. <input type="checkbox"/> Yes <input type="checkbox"/> No	Parent may visit child at school. <input type="checkbox"/> Yes <input type="checkbox"/> No	Parental rights remain intact. <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of new foster / resource parent or facility		Telephone number (including area code) (      )
Address of new foster / resource parent or facility (number and street, city, state, and ZIP code)		
<b>Per IC 31-34-15-4(8)(c) – School personnel are invited to provide information and participate in the case planning process for this youth in out-of-home care. Please direct any input your school wishes to share to the Family Case Manager (FCM) identified below. If your school wishes to attend a case planning meeting, please contact the FCM identified below for information on the date and time of the meeting.</b>		
Name of FCM	E-mail address of FCM	Telephone number of FCM (including area code) (      )

On \_\_\_\_\_ the \_\_\_\_\_ local DCS office  
Date of placement (month, day, year) Name of county

☐ removed the child and placed in out-of-home care ☐ closed the DCS case ☐ change in School of Legal Settlement  
☐ changed the child's placement in out-of-home care ☐ initiated trial home visit with parent or legal guardian

This child's school corporation of legal settlement, as most recently determined by the court having jurisdiction in the case,

is \_\_\_\_\_ School Corporation.  
Name of school corporation

The child most recently attended school in the \_\_\_\_\_ School Corporation  
Name of school corporation

at \_\_\_\_\_  
Name of school of origin

1. ☐ The new home placement address is within the attendance area for the child's school of origin. (Section 2 not needed.)
  - School Transportation to the new address to begin as soon as possible (within one day).
2. ☐ The new home placement address is outside the attendance area for the child's school of origin. (Complete Section 2.)
  - The child will remain in attendance at the school of origin until best interest determination has occurred, as required by the Every Student Succeeds Act (ESSA P.L. 114-95), IC 31-34-15-4(8), and [DCS Policy 8.22 School Notification and Legal Settlement](#).

**NOTICE TO SCHOOL:** If the child's DCS placement changes, please ensure information regarding any insurance for school-issued devices that is offered by the school is shared with the identified caregiver / resource parent. Any previously purchased insurance policies should be transferred to the new resource parent or remain bound to the device and/or child.

See [DCS Education Services](#) website for Education Services Team map and contact information.

Name of DCS Education Consultant	Telephone number (including area code) (      )	Date (month, day, year)
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## SECTION 2 – BEST INTEREST DETERMINATION (BID) FOR EDUCATIONAL STABILITY

DCS Education Services personnel will work collaboratively with FCM to complete this section. DCS must collaborate with the Local Education Agency (LEA) Every Student Succeeds Act (ESSA) Point of Contact (POC) for the child's school corporation of origin, to reach the BID for the child's educational stability.

See [DCS Policy 9.03 Initial Placement/Placement Changes](#) for further guidance.

**DCS Rationale for BID:** (Refer to [ESSA Non-Regulatory Guidance](#) as a guide for this paragraph.)

**Per the decision made through the collaboration of the school corporation of origin and DCS ESSA POCs:**

☐ It is in the best interest of the child to **remain** in the \_\_\_\_\_ in  
the \_\_\_\_\_ School where the child will enroll  
\_\_\_\_\_ School Corporation.  
Name of school corporation

- The School Transportation Plan for the child shall be arranged within five (5) school days of the BID.
- While School Transportation is arranged, interim transportation is to be ensured (to the extent possible) by the DCS local office so the child's attendance is not disrupted.

**OR**

☐ It is in the best interest of the child to **transfer** to \_\_\_\_\_ in  
the \_\_\_\_\_ Name of school of attendance for new home placement  
\_\_\_\_\_ School Corporation.  
Name of school corporation

- The child will be immediately enrolled in the new school, and the new school will request the child's education records the same day from the school of origin.
- The school of origin will send all relevant education records within one (1) school day.
- Special Services (e.g., special education needs, behavior plan, transportation pursuant to Individualized Education Program (IEP), etc.)  
☐ The student is currently receiving special services and will need to continue special services in the receiving school.

**Signing below indicates that a collaborative agreement has been reached per ESSA regulations and DCS Policy.**

Signature of local DCS ESSA POC

Date (month, day, year)

Signature of LEA ESSA POC

Date (month, day, year)

☐ Check this box if a collaborative agreement *cannot* be reached and the LEA ESSA POC requests an **ESSA Dispute Resolution**.