## Kentucky Department of Education Division of IDEA Monitoring and Results NOTICE OF SHORTENED SCHOOL DAY and/or WEEK

Academic Year 25/26 Date of Request: 10/2/2025 **GRREC** Special Education Cooperative 535 District Number: Simpson County District: Phone Number: 270-586-8877 Director of Special Education: Kelly Baker Franklin Simpson Middle School School: Principal: Jaxon Grover Student Information **Autism** Disability: **Full Name:** SSID: 12 Age: **Teacher Information** 6 through 8 Grade Taught: Alex Barnes Full Name: Classroom Type: Resource **Special Education Code:** 6062 Type of Request (Check all that apply): **Shortened Week** Shortened Day Shortened School Week (SSW): What are the days of attendance for this student according to current IEP? 1a. Describe the reason(s) why this student requires a Shortened School Week: 1b. Provide the typical beginning and ending time for students in this school? 1c. **ENDING TIME: BEGINNING TIME:** Provide the beginning and ending times for this student according to current IEP?

**ENDING TIME:** 

1d.

**BEGINNING TIME:** 

## Shortened School Day (SSD): Describe the reason(s) why this student requires a Shortened School Day: The student is transitioning back into the public school setting from a long term care facility. Parent is concerned about his history of violence and his ability to tolerate the school setting. The ARC considered the parent concerns and medical recommendation to begin transition to school gradually due to a long history of destructive behavior. 2b. Provide the typical beginning and ending time for students in this school? BEGINNING TIME: 8:00 ENDING TIME: 3:00 Provide the beginning and ending times for this student according to current IEP? 2c. BEGINNING TIME: 8:00 ENDING TIME: 11:00 3. Is this student returning to school after being in a Home/Hospital Instruction Program? No Yes If yes, describe circumstances:

4. Identify steps the ARC will take to promote full attendance for this student in the future?

5. Has a shortened school day been requested for this student in previous school years?

This plan is being temporarily implemented to establish academic success, as well as build ability to appropriately engage in positive interactions during the school day. will be provided support through a highly structured behavior program. This is provide with with explicit social skills instruction, role-play and modeling opportunities positive feedback, breaks, and self control strategies. As Carl demonstrates tolerance for the school environment through progress monitoring, the ARC will reconvene to increase his day.

Yes If yes, list the previous school year(s):	~	No	·		

## **IMPORTANT**

The district must maintain the following documentation for all Shortened School Days approved by the Local Board of Education:

- Approval by the Local Board of Education (STUDENT CONFIDENTIALITY procedures MUST be followed when listing student information in the Local Board Minutes.);
- Minutes of the ARC meeting documenting the ARC decision that a shortened school day is needed and;
- A copy of the student's IEP documenting the shortened school day.

FOR LOCAL USE ONLY							
LOCAL BOE APPROVED:	Yes No	DATE:					
FOR KDE USE ONLY							
WAIVER NO.:		DATE:					
RECEIVED AT KDE:	(Reviewer's Initials)	DATE:					