

Notification Of A Child Success Team Meeting

(Hot Sheet)

CF/D-7 Revised 10/16

(Optional)

The purpose of this form is to notify parents and appropriate personnel of a Child Success Team Meetings that are scheduled well in advance of meeting and to serve as invite for special education personnel.

1. After submitting a Child Success Team Request form (CF/D-6) to the Child Development Specialist and/or Grantee Disabilities Supervisor/Designee (RHS/EHS and MSHS/Direct op) or Education Manager, Delegate Disabilities Coordinator (MSHS), the person submitting the form calls to arrange a date and time for the meeting that is convenient for the parent/guardian and staff.
2. This notification form is completed by person who submitted the Child Success Request form and scheduled the meeting. Appropriate boxes for staff team members who need to be in attendance are checked and names are filled in by titles.
3. Copies of this completed form, with meeting date, time and place will be sent to the appropriate staff as indicated on form. The original white copy is given to the parent (photocopy to designated participants); yellow copy is placed in the Child file; pink copy is sent to Grantee Disabilities Supervisor (RHS/EHS and MSHS/Direct Op) or Delegate Disabilities Coordinator (MSHS) .