

Surrogate Parent Checklist

Student's Name (last, first)	ID Number	Date of Birth	Case Manager
------------------------------	-----------	---------------	--------------

- ☐ Yes ☐ No 1. Are the whereabouts of the parent(s) known?
If **Yes, STOP**. Work through the parent(s).
If No, continue through checklist.
- ☐ Yes ☐ No 2. Is the student living with a person “acting as a parent” (relative, guardian, etc.) who is willing to be involved in the student’s education?
If **Yes, STOP**. Work through the person acting in the capacity of the parent.
If No, continue through checklist.
- ☐ Yes ☐ No 3. Is the student a ward of the state?
If **No, STOP**. Work through the parent(s), person(s) acting in the capacity of a parent.
If Yes, continue through checklist.
- ☐ Yes ☐ No 4. Have the parental rights been terminated? (School must verify through DCF)
If **No, STOP**. Work through the parent(s).
If Yes, continue through checklist.
- ☐ Yes ☐ No 5. Is the student currently in a foster home and has the student been there at least three months?
If Yes, continue to #6.
If No, continue to #7.
- ☐ Yes ☐ No 6. Is the foster parent willing to act as the parent regarding educational placement?
If **Yes, STOP**. Work through the foster parent.
If No, continue through checklist.
- ☐ Yes ☐ No 7. Is the student currently living in a group home run by a community agency?
If **No, STOP**. Work through the parent(s), person(s) acting in the capacity of a parent, or foster parent (see #5).
If Yes, continue through checklist.

If you have reached this point and have not had to “STOP”, follow these procedures:

- Fill out *the Surrogate Parent Request* form
- Fax completed Surrogate Parent Request form and the Surrogate Parent.
- Questions: Contact Special Education Program Manager.
Please complete before forms before faxing them.