APPENDIX C

SEA CLAIM & TRACKING FORM

COMPLETED BY SCHOOL	
Student's Name:	**D.O.B.:** **IEP:** ☐ **NIEP:** ☐
School:	**O.E.N. #:**
Attached Reports:	
New Equipment: ☐ **Replacement Equipment:** ☐	

Please ensure that the SEA claim submission package includes:

- ☐ a completed SEA Claim & Tracking Form;
- ☐ supporting assessment confirming diagnosis (e.g. psychological, medical);
- ☐ an assessment by a qualified professional indicating the nature of the disability and that the piece of equipment or device is essential for the student in order to benefit from instruction; and
- ☐ the student's IEP

COMPLETED AT ADMINISTRATION LEVEL

Reviewed By: _____

Date: _____

Meets Ministry Criteria: **Yes** ☐ **No** ☐

Comments: _____

Reallocation of Equipment ☐ **or Purchase of Equipment** ☐

- ☐ Labels Sent to School to affix
- ☐ Labels Applied to Equipment
- ☐ Data entered on Ministry Submission Spreadsheet
- ☐ Information added to SEA Inventory Database
- ☐ SEA Inventory Listing Completed and Forwarded to School for filing in OSR
- ☐ IEP or Non-Identified IEP reflects personal equipment

ORDERING INFORMATION			
ITEM	**P.O. #**	**COMPANY**	**RECEIVED**

Name: _____ **Date:** _____

Completed Package Submitted to District SERT or Special Education Administrator