

**If your school has failed to make the Educational Credits for Exceptional Children (ECENC) Program Standards as stated or Reporting Requirements by stated deadlines and has been removed or terminated from participation, please fill out this form and include corrections, attachments and/or letters to become eligible for reinstatement.**

## Request for Review

To be completed by a school administrator or program manager. Use black ink if completing by hand.

|   |  |       |
|---|--|-------|
| <b>General Information</b>  |  |       |
| 1. Person making request:   | 2. School name:  |       |
| 3. School address:  | 4. School phone number:  |       |
| <b>Change reason</b>  |  |       |
| <input type="checkbox"/> School clerical error or delay*  | <input type="checkbox"/> Other<br><i>See attached letter of justification/explanations</i> |       |
| <b>Change requested:</b>  | Requested effective date:  |       |
| <p>If School error, explain in detail:</p>  |  |       |
| <b>Certification</b>  |  |       |
| <p>*Clerical errors made by the school administrator or program manager and delays in making stated deadlines of such documents shall not invalidate the statutory responsibility of the Education Oversight Committee (EOC) to remove or terminate the school from the ECENC Program. Upon notification of any such error or delay, the school has 10 working days to make the adjustment and/or submit required documents. Terminations or removals are processed immediately, and all related entities will be notified.</p> <p><b>If this request is denied, the school administrator or project manager must notify the EOC by copy of the form of your right to ask for a review by writing to the EOC within 30 days of notice of this decision.</b></p> |  |       |
| Signature of person completing form:  | Position & Email:  | Date: |
| <input type="checkbox"/> Completed Document attached  | <input type="checkbox"/> Supporting documentation attached                                 |       |
| <b>For EOC use only</b>   |  |       |
| <input type="checkbox"/> Approved   | Effective date:  |       |
| <input type="checkbox"/> Denied   | Reason for denial:   |       |