NYC EARLY INTERVENTION PROGRAM REASON FOR DELAY OF EVALUATION COMPLETION/ MDE SUBMISSION FORM

Child's Name:	DOB:
EI Number:	Date of Referral to EI: / /
<u>Section I:</u> Filled out by the Initial Service Coordinator (if needed) and submitted to the Evaluation Agency with the other required paperwork as outlined in the Initial Service Coordination Responsibilities Policy	
Parents chose:(Evaluation Site Name)	
(Evaluation Site Name) (Provider #) which was/will be unable to complete the child's evaluation within thirty (30) days of the date of referral to the NYC Early Intervention Program due to the following reason (s):	
1. Waiting List 2. Evaluator backlog/delay 3. Other reason (s):	
The child is now scheduled for an evaluation on (date):	// at
(Evaluation Site Name)	(Provider #)
Initial Service Coordinator Signature:	
Date: / Agency: <i>Parent Ackn</i>	Phone number:
	Date: / /
Section II: Filled out by the Evaluation Agency (if needed) and submitted the Regional Office and Service Coordinator with the Evaluation Packet Name of Evaluation Agency(ies)	
Please Indicate the Reason(s) for Delayed Submission of MDE: A. 1. Child ill 2. Parent ill 3. Delay Signing Consent for Evaluation 4. Child not eligible at first evaluation 5. Family missed evaluation appointment 6. Parental scheduling delay 7. Other family reasons:	
reasons: B. 1. Delayed referral from SC to Evaluation Agency 2. Other provider reasons/Comments:	
Signature of Evaluation Representative: Signature of Parent:	Date: / / Date: / /

Parents must never be asked to sign this form before any delays occur.