

**Hancock County Schools  
Extended School Year Determination Plan**

Student Name: \_\_\_\_\_

School: \_\_\_\_\_

Current Grade: \_\_\_\_\_

Age: \_\_\_\_\_

Teacher: \_\_\_\_\_

Critical Skill:

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Assessment Tool: \_\_\_\_\_

Date of Assessment: \_\_\_\_\_

Results of Assessment:

Intervention Plan and Documentation:

Post Assessment Tool: \_\_\_\_\_

Date of Post Assessment: \_\_\_\_\_

Results of Post Assessment:

Qualifies for ESY: \_\_\_\_\_ yes

\_\_\_\_\_ no

**Extended Summer Program**

Please check all that apply:

**Core Area:**

\_\_\_\_ Reading

\_\_\_\_ Math

\_\_\_\_ Functional Skills

\_\_\_\_ Other: \_\_\_\_\_

**Level:**

\_\_\_\_ Preschool

\_\_\_\_ Elementary

\_\_\_\_ Middle

\_\_\_\_ High School