

Table of Contents

[Exhibit A—Student in Foster Care Educational Best-Interest Factors](#)

[Exhibit B—Individual Transportation Plan Template for Student in Foster Care](#)

Note: An exhibit listing the designated employee who serves as the District’s liaison for homeless students can be found in the District’s local policy manual at this code.

Relevant [resources regarding students in foster care](#),¹ *Information Sharing Between Child Welfare and Schools: Maintaining Privacy and Promoting Educational Success*, a guide developed by the Texas Education Agency, Texas Department of Family and Protective Services, and Texas Supreme Court Children’s Commission, can be found at the TEA website.

¹ Resources regarding students in foster care: <http://tea.texas.gov/FosterCareStudentSuccess/Resources/>

Exhibit A—Student in Foster Care Educational Best-Interest Factors

A student in foster care may remain at his or her school of origin unless it is not in the child's best interest. "School of origin" is defined as the school that the student is attending at the time of the student's placement in foster care or during any subsequent change in placement. This form provides information that will help the Department of Family and Protective Services (DFPS) to determine whether it is in the best interest of a student in foster care to remain in the school of origin when there is an initial placement in foster care or a change in residential placement. DFPS should collaborate with the District to evaluate what is best for the student's education.

When the school becomes aware that a student is placed in foster care, this form should be completed by representatives from the student's school of origin who are knowledgeable about the student and are able to provide feedback on how changing schools would impact the student's academic, social, and emotional well-being; significant relationships that the student may have formed with staff and peers; and other factors. These individuals could include the student's teacher, counselor, coach, foster care liaison, or other meaningful person in the student's life. Each District representative should complete a separate form. The timeline for completion may vary based on individual circumstances, including the type of foster care placement and the nature of the emergency.

Completed forms should be provided to the District foster care liaison, who will share the form with the student's education decision-maker and caseworker and help facilitate further collaboration.

Student's name: _____

Student's grade level: _____

Student's school at time of placement in foster care/change of placement (*school of origin*): _____

School where the student resides, if known: _____

Name and title of person completing form: _____

Relationship to student: _____

Email: _____

Phone: _____

Student Preferences

Has the student expressed any preferences regarding which school the student will attend?
Please provide details.

Has the student expressed any feelings about safety or other relevant aspects regarding the environment at the school of origin? Please provide details.

Academic Factors

How is the student performing academically? Does the student receive academic intervention services, such as RTI (Response to Intervention)?

How has the student's academic performance changed since the student enrolled in the school of origin?

Does the student participate in any specialized instruction, such as a gifted and talented, ELL, or career and technical education (CTE) program? Please describe.

Are there appropriate or adequate services available at the school of origin to meet the student's educational, social, and emotional needs? Please describe.

In your opinion, how will remaining in the school of origin impact the student's academic performance?

Social/Emotional Factors

Describe any meaningful relationships the student has formed with District staff at the school of origin.

Describe any meaningful relationships the student has formed with other District students at the school of origin.

Describe the student's participation in any extracurricular or after-school activities.

Describe any other ties the student has to the school of origin (*siblings, mentorships, etc.*)

Describe the child's strengths and weaknesses. How does the school of origin support the child's unique needs and goals?

Are there additional factors that indicate a change of educational placement is or is not in the child's best interest?

Conclusions

In your opinion, how will remaining in the school of origin impact the student's social, emotional, or behavioral well-being?

Signature: _____

Date: _____

**Foster care liaison contact
information:**

Name: _____

Phone number: _____

Email: _____

Name of DFPS point of contact: _____

Date completed forms provided to
DFPS point of contact: _____

Notes: _____

Exhibit B—Individual Transportation Plan Template for Student in Foster Care

Note: For additional guidance, see the Texas Education Agency’s [Foster Care and Student Success website](#)¹ and the U.S. Department of Education and Health and Human Services’ [Non-Regulatory Guidance: Ensuring Educational Stability for Children in Foster Care](#).²

Based on the determination that it is in the student’s best interest to remain in the school of origin, this plan addresses how transportation to the school of origin will be provided, arranged, and funded. The goal of this plan is to allow the student to remain in the school of origin without interruption.

In developing this transportation plan, participants evaluated student safety, cost effectiveness, reliability, and time and distance of the commute. Efforts were made to avoid or mitigate any additional costs.

Student Information

Student’s name: _____

Student’s grade level: _____

Student’s foster parent or caregiver: _____

Student’s school of origin: _____

Address at which student is currently living: _____

School that the student would attend based on current address: _____

Participants in Plan Development

The following District personnel were involved in the development of this plan:

[List the names and positions as appropriate.]

District foster care liaison: _____

Title I director: _____

Transportation director: _____

McKinney-Vento homeless liaison: _____

Special education director: _____

Principal at school of origin: _____

Principal at school student would otherwise attend: _____

Other: _____

[List the names and positions of other relevant federal programs staff, personnel from assigned school if not within District boundaries, and the like.]

The following representatives of the Texas Department of Family and Protective Services (DFPS) were involved in the development of this plan:

[List the names and positions as appropriate.]

Education decision-maker: _____

Caseworker: _____

Foster parent or caregiver, if different from the education decision-maker: _____

Court-appointed special advocate (CASA): _____

Other: _____

Note: Additional costs reflect the difference between what the District would spend to transport a student to the assigned school and the cost of transporting a student in foster care to his or her school of origin. In accordance with the federal *Non-Regulatory Guidance*, if the District is able to provide transportation through an established bus route, there are no additional costs. If the District will reroute buses or provide transportation through a private vehicle or transportation company, the District may consider as additional costs the cost of rerouting buses or the difference between the special transportation costs and the usual transportation costs.

Additional Costs of Transportation

As a comparison for determining whether additional costs will be incurred in transporting the student to the school of origin, the cost of transporting the student to the school that the student would otherwise attend is estimated to be: _____.

The cost estimate of providing transportation under this plan is estimated to be: _____.

Thus, the cost of providing daily transportation for the student to the school of origin under this plan (*does/does not*) require additional costs. These additional costs will be funded in the following manner:

[Describe how the additional costs will be funded and what funding sources are available.]

Transportation

[For each situation below, describe details of the transportation method. Identify which individuals are responsible for each segment of the commute, including whether an adult will be needed to accompany younger students on any segments; sign-off procedures to ensure that the student successfully completes each segment; and the like.]

Until the daily transportation method can be fully implemented, immediate transportation to the school of origin will be provided in the following manner:

Daily transportation to the school of origin will be provided in the following manner:

If it is known in advance that the daily transportation method will not be available, transportation will be provided in the following manner:

Should the daily transportation method not be available based on an unanticipated event, the following steps will be initiated to ensure that the student is able to get to school on time:

[Describe the steps that should be taken, by whom, and by what time.]

The student participates in after-school activities on the following days that require adjustments to the daily transportation method:

[Describe the days and times of after-school activities.]

Transportation on these days will be provided in the following manner:

Review and Termination

This plan will be reviewed when any circumstances have changed that affect implementation of the plan and at the beginning of each semester.

Upon the student's exit from foster care, the student can remain in the school of origin until they complete the highest grade level offered at the school. The _____
(*title and name of the responsible DFPS staff*) will notify the District foster care liaison so that this transportation plan may be reviewed.

Foster care liaison's signature: _____

Date: _____

Superintendent's signature: _____

Date: _____

(*Or signature of other District official who has authority to approve any additional expenditures required by this plan.*)

DFPS education decision-maker's signature: _____

Date: _____

Foster parent or caregiver's signature (*if different from the education decision-maker*): _____

Date: _____

¹ Texas Education Agency's Foster Care and Student Success website: <http://tea.texas.gov/Foster-CareStudentSuccess/>

² *Non-Regulatory Guidance: Ensuring Educational Stability for Children in Foster Care*: <http://www2.ed.gov/policy/elsec/leg/essa/edhhsfostercarenonregulatorguide.pdf>