

## Special Education Compliance File Exchange Form

I, \_\_\_\_\_ have personally handed my transferring special education students' compliance files to \_\_\_\_\_.

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\_\_\_\_\_/\_\_\_\_\_  
Current Case Manager Signature    **Date**

\_\_\_\_\_/\_\_\_\_\_  
Receiving Case Manager Signature    **Date**

**Please make a copy for your records and return the signed form to Judi Petersen at the district office. Thank you.**