



# Redwood Area School District #2897

Phone (507) 644-3531 Fax (507) 644-3057  
www.redwoodareaschools.com



School Mission: Challenge, Learn, Achieve

## SPECIAL EDUCATION REQUISITION FORM

This is the only form you need to complete for a requisition.

Directions: Complete this form for all special education purchases. Incomplete forms will not be accepted. Only items required for special education purposes should be listed on this requisition.

### Special Education Eligibility and Necessity Determination Questions

Please explain why the item(s) requested are necessary: \_\_\_\_\_

#### Student Instructional Materials

1. Will the materials be **used directly** by or with students with disabilities? ☐ YES ☐ NO
2. Are the materials **in addition** to those provided the same students in the mainstream?  
For example, the district provides basic textbooks, computers and other equipment and supplies for all students. Similar materials are not eligible for special education reimbursement when provided to students with disabilities regardless of setting.  
**OR** ☐ YES ☐ NO  
Does the student with a disability require materials **specially adapted** for the disability in order for the student to benefit from the special education program? For example: Braille tests would be eligible while a basic print text at a different grade level is NOT adapted text.
3. Will students with disabilities be the **primary** and **priority** users of the materials? ☐ YES ☐ NO
4. Are the materials documented in the IEP OR are they a part of the special education program? ☐ YES ☐ NO  
Enter MARSS# \_\_\_\_\_

*If you answered YES to questions 1-4, the supplies and materials are **eligible special education expenditures**.*

#### Teacher Materials

1. Will the teacher's manuals and materials be supplemental to the general education curriculum? ☐ YES ☐ NO  
*If you answered YES to this question, the supplies and materials are **eligible special education expenditures**.*
2. Are the materials specifically instructional in nature? ☐ YES ☐ NO  
*If you answered YES to question 2, the supplies and materials should be coded to object 433 (Instructional Supplies or 556 (Equipment for Instruction).  
If you answered NO to question 2, proceed to the next question.*

#### Non-Instructional Supplies and Materials

1. Are the materials used exclusively by special education personnel and are essential to the special education program? ☐ YES ☐ NO  
*If you answered YES to this question, the supplies and materials are **eligible to be coded to the special education program**. Please code to object 401 (Office supplies) or 555 (Equipment for Office Supervision/Mgmt.)*  
Is the student these materials are purchased for a non-public student? ☐ YES ☐ NO

#### Person Submitting Request:

\_\_\_\_\_  
Name of Staff Member

\_\_\_\_\_  
Title of Staff Person

Date form Submitted to Building Administrator: \_\_\_\_\_

Complete the requisition form on the reverse side and route to the building Principal.

Item Number	Qty	Unit Cost	Item Description	Vendor / Website	Disability Area *	Subtotal
<b>TOTAL:</b>						

\*401-Speech, 402-DCD Mild to Moderate, 403-DCD Moderate to Sever, 404-Physically Impaired, 405-DHOH, 406-Visually impaired, 407-SLD, 408-EBD, 409-Deaf/Blind, 410-Other Health, 411-ASD, 412-Developmentally Delay, 414-Traumatic Brain Injury, 416-Severly Multiply Imp., 420-3 or more Disabilities

Two quotes must be attached for any Item exceeding \$3,000. Quote could include a screen capture from websites or a written estimate.

I verify that this purchase meets the requirements for state and federal funding formula P.L.105-17, Section 613(a)(2)(i), Minn. Statute 125.75, subd.4

\_\_\_\_\_  
Administrator Signature

\_\_\_\_\_  
Date

Administrators: Email this completed form along with any attachments to the Business Office at [finance@redwoodareaschools.com](mailto:finance@redwoodareaschools.com)

*For Business Office Use ONLY*

Date Request Received: \_\_\_\_/\_\_\_\_/\_\_\_\_

UFARS Code: \_\_\_\_\_

Date Request Processed Ordered: \_\_\_\_/\_\_\_\_/\_\_\_\_

If Needed, date Purchase order sent to administrator & requestor: \_\_\_\_/\_\_\_\_/\_\_\_\_