



# Intake Request

To be considered for enrollment, school districts can make a referral by emailing a copy of the initial report of the child's diagnosis with a brief cover letter describing the child (including date of birth, parent name(s), address, and phone number, and a summary of services the child is currently receiving) to EPIC.

Candidate's Name\*: \_\_\_\_\_

Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

### Parent/ Guardian Information:

Parent Name: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home:( ) \_\_\_\_\_ Cell:( ) \_\_\_\_\_ Fax:( ) \_\_\_\_\_

Email: \_\_\_\_\_

### Sending District Information:

Case Manager/Director: \_\_\_\_\_

Title: \_\_\_\_\_

Sending District: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

-----TO BE COMPLETED BY EPIC ADMINISTRATION ONLY-----

Diagnosis/Eligibility Criteria: \_\_\_\_\_ Source/Date: \_\_\_\_\_

Records included from: Parent / Family \_\_\_\_\_ School District \_\_\_\_\_

Completed on: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Updated on: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Return this form to:  
EDUCATIONAL PARTNERSHIP FOR INSTRUCTING CHILDREN  
238 Farview Avenue | Paramus, NJ 07652  
Tel: 201-576-0600 | Fax: 201-576-0699  
EMAIL: [epic@epicschool.org](mailto:epic@epicschool.org) | Web: [www.epicschool.org](http://www.epicschool.org)



## Prospective Student Information

\*To be completed by district personnel\*

### Behavioral Information

Please respond yes or no as to whether the student engages in the following responses and provide any notes or comments regarding those responses (e.g. this student is aggressive when he hears loud noises and/or how often the challenging behavior occurs).

Response	Yes	No	Comments/Notes
Mouthing Objects			
Elopement			
Yelling			
Self- Injurious Behavior			
Aggression towards adults			
Aggression towards peers			
Tantrums			
Property Destruction			
Throwing Items			
Pica (ingests inedible objects)			
Independent Toileting			
Independent Eating			

Why are you seeking an OOD placement?

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Does the student have a medical condition that impacts independent classroom functioning (e.g., mobility deficits, severe allergies)?

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## **Policies and Procedures for EPIC Admissions**

Interested child study team members should call the school to discuss possible placement with the administration. An intake request form should be completed and returned to EPIC.

If interested in pursuing placement, a file should be submitted to the Principal's attention and must include:

- the most current IEP
- any active behavior intervention plans including current data
- relevant diagnostic and evaluation reports
- a brief cover letter describing the child, including parent/guardian contact information

The clinical team will review and assess the file based on:

- Confirmed diagnosis of autism or PDD-NOS ASD?
- Age of the prospective student
- Skill level of the prospective student
- Student's potential benefit from EPIC Services
- Match with potential peers already at EPIC

The sending district will be contacted via email or phone within 30 days with a determination to move forward with an intake or with a rationale for declining. It is up to the sending district to contact the student's parent or guardian to schedule the intake.

Once an intake is scheduled, an EPIC administrator will forward the parent/guardian a parent application that will be completed and returned prior to the interview.

At the intake meeting, the clinical team will assess the candidate. The parents/guardians and district representative will interview with the administrative team. The primary goal of the parent interview is to get to know the family. Parent interviews are private and confidential.

Once a decision has been made, the district representative will be notified of the intake status. At this time, the clinical team may request to see the student in their current educational placement. EPIC will not be in communication with the parents after the intake assessment.

Please note, intake decisions are at the sole discretion of the EPIC Executive Team. The EPIC Board of Trustees will be notified if a placement has been offered to a student.

Parents and district representatives understand that EPIC is dedicated to providing the highest quality education using ABA (applied behavior analysis) to those with autism spectrum disorder. We use ABA instruction to target a variety of instructional domains including academic, adaptive behavior, communication and fine and gross motor competencies. EPIC does not provide "related services", including but not limited to speech, OT, PT, etc. as part of its instructional program.