

GRANBURY INDEPENDENT SCHOOL DISTRICT

PREGNANCY RELATED SERVICES CHECKLIST

Student Name: _____

Student PEIMS ID#: _____

- PRS Checklist (PRS-15)
- Data Entry Form (PRS-6)
- Campus PRS Goals (PRS-16)
- Medical Release Form (PRS-3)
- Individualized PRS Plan (PRS-2)
- Intake Form (PRS-5)
- Doctor's Confirmation Report (PRS-4)
- Counselor's Log (PRS-7)
- Delivery Verification (PRS-9)
- Prenatal CEHI Recommendation Form (PRS-10)
- Postpartum CEHI Recommendation Form (PRS-11)
- CEHI Extension Recommendation (PRS-14) (Documentation from a licensed Physician that the student was anticipated to be confined for an additional period of less than four weeks if the student remained in PRS beyond the normal six weeks)
- CEHI Statement to Parents (PRS-8)
- CEHI Exit Form (PRS-13)
- Copy of CEHI Log(s) (PRS-12)
- Copy of ARD/IEP for each special education student receiving CEHI (if applicable)
- PRS Demographic Report
- Copy of current School Calendar