

Plan eSignature Editors (Delaware)

Last Modified on 12/14/2025 8:45 pm CST

[Signatures](#) | [Medicaid](#) | [Prior Written Notice](#)

Tool Search: Special Ed Documents

The Delaware Elementary Individual Education Plan, Preschool Individual Education Plan, and Secondary Individual Education Plan can be sent to parents/guardians to sign (eSign) on the Campus Parent Portal electronically.

See the core [Special Ed eSignature Process](#) article for information on the overall process and setup for eSignature documents.

Complete the plan creation process and fill out the plan in Campus. Three editors, Signatures, Medicaid, and Prior Written Notice, require parent/guardian eSignatures, which are indicated with an eSign label on the Editor Home. To send the plan to the student's parent/guardian, these editors must be placed in the status **Complete Pending eSignature** or **Not Needed**. All other editors must be in a **Complete** status.

See the below articles for the most updated print formats:

- [Elementary Individual Education Plan](#)
- [Preschool Individual Education Plan](#)
- [Secondary Individual Education Plan](#)

All examples below reference the Elementary Individual Education Plan.

Editor Home - DE Elementary IEP ?

| NAME | STATUS | MODIFIED BY | COMPLETED BY |
|---|-------------|---|--------------|
| Plan Header | IN PROGRESS | System Administrator 5/22/24 1:38 PM | > |
| Enrollment Information | NOT STARTED | | > |
| Student Information | IN PROGRESS | System Administrator 5/22/24 1:38 PM | > |
| Parent/Guardian Information | IN PROGRESS | System Administrator 5/22/24 1:38 PM | > |
| Meeting Participants | NOT STARTED | | > |
| Data Considerations | NOT STARTED | | > |
| Other Factors to Consider | NOT STARTED | | > |
| Unique Needs/Present Levels/Annual Goals and Benchmarks | IN PROGRESS | System Administrator 5/22/24 1:47 PM | > |
| Specially Designed Instruction | NOT STARTED | | > |
| Supplementary Aids and Services | NOT STARTED | | > |

Delaware Elementary Individual Education Plan Editor Home

Signatures

Signatures
NOT STARTED
ESIGN
Editor 20 of 22

I acknowledge that I have received a copy of the Procedural Safeguards. My due process rights under these Procedural Safeguards have been explained to me

I agree with the program described in this document

I agree with the placement decision as noted above and discussed at this meeting

At least one year before the age of majority (18), the student has been informed that rights will transfer to him/her unless a legal guardian has been appointed

If Parent Does Not Attend

Staff Member below is responsible for forwarding a copy of the IEP and Procedural Safeguards and explaining content, if necessary, to the Parent/Guardian/Surrogate

| Name | Position | Method of Contact |
|------|----------|-------------------|
| | | Specify Other |

Signatures Editor

1. Navigate to the **Signatures** editor. Fill out the editor, then click **Save & Stay**.
2. Click the down arrow next to the **Complete** button in the action bar, then click **Complete Pending eSignature**. The editor is now in the correct status to send to the parent/guardian for eSignature.

Not Needed
Complete Pending eSignature
Complete

Complete Pending eSignature Button

Medicaid

Medicaid
NOT STARTED
ESIGN

Editor 21 of 22

I hereby authorize this school Arthur Elementary to release this student's records and information to Medicaid for the purpose of billing for special education and related services that may be provided to this student under 34 CFR part 300.

By checking YES and signing this authorization document, I understand and agree that

- My signature on this form permits the above-mentioned school and/or school district/charter school to use this student's and/or my public benefits or insurance information to pay for services under 34 CFR part 300, which outlines special education and related services under the Individuals With Disabilities Education Act
- My signature is voluntary and services are not dependent on my authorization
- My signature is valid until such a time that it is revoked
- I can revoke my approval at any time by writing to the originating agency, which revocation will be valid upon receipt, but which will not affect actions taken prior to receipt of such revocation
- I have a right to request and receive from the school district or charter school a copy of the records that have been given to Medicaid
- I have a right to receive a copy of this consent form
- Requesting the use of these funds DOES NOT affect this student's rights/your rights to a fair, appropriate public education nor does it cost you or your family money. There will be no co-pays, no loss of Medicaid eligibility and no impact on lifetime Medicaid benefits as a result of this consent

By checking NO and signing this document, I am refusing the use of these funds

- I understand that I have the right to refuse the permission to use these funds to pay for services under 34 CFR part 300, which are special education and related services under the Individuals with Disabilities Education Act

YES, I give the school permission to share this student's education and health-related information with Medicaid, including billing information

☐

NO, I do not give the school permission to share this student's education and health-related information with Medicaid

☐

Signed by
check only one

☐ Student (if over 18 years of age)

Medicaid Editor

1. Navigate to the **Medicaid** editor. This editor can be placed in a Not Needed or Complete Pending eSignature status depending on whether or not the student qualifies for Medicaid assistance. Mark the appropriate checkbox, either **Yes** or **No**, as well as the **Signed by** checkbox.
2. Click **Save & Stay**.
3. Click the down arrow next to the **Complete** button in the action bar, then click **Complete Pending eSignature** OR **Not Needed**. The editor is now in the correct status to send to the parent/guardian for eSignature.

Not Needed
Complete Pending eSignature

Complete
▼

Not Needed or Complete Pending eSignature Button

Prior Written Notice

Prior Written Notice

☐ Print Student PWN

The Individuals With Disabilities Education Act ("the IDEA") and Delaware Department of Education regulations require the school district to provide you with written notice no less than ten (10) school days before the school district proposes to (or refuses to) initiate or change your identification, evaluation, or educational placement, or the provision of a free appropriate public education. In cases involving a change of placement for a disciplinary removal, this notice must be provided no less than five (5) school days before the school district proposes to change your placement. You have rights available to you under Part B of the IDEA and Department of Education regulations. A copy of the Procedural Safeguards Notice issued by the Delaware Department of Education is attached and describes your rights. This notice concerns the following

1. Description of the Action the School District Proposes or Refuses to Take *

Example action

2. Explanation of Why the School District is Proposing or Refusing to Take the Action *

Example explanation

3. Description of Each Evaluation Procedure, Assessment, Record, or Report the School District Used in Deciding to Propose or Refuse the Action *

Example procedure

Prior Written Notice Detail Screen

1. Optional: Navigate to the **Prior Written Notice** editor.
2. Click the down arrow next to the **Complete** button in the action bar, then click **Complete Pending eSignature OR Not Needed**. The editor is now in the correct status to send to the parent/guardian for eSignature.
3. Work through all other editors and make sure they are all in a **Complete** status. Once all editors are in the correct status, the plan is ready to send to the parent/guardian for eSignature.