

#### Autism and Jon Peterson Scholarship Jacqueline Cheadle



## Purpose

To provide opportunities for children identified with a disability to attend a special education program outside of the public district.

## **Provider Participation**

Providers may be chartered nonpublic schools

**Private business** 

A district



## **Provider Participation**

- Registered and approved by ODE
- Credentialed staff with background checks
- Meet health and safety standards



## **Autism Scholarship**

Created in 2004

Currently 299 participating providers

Currently 3989 participating students



## **Jon Peterson Scholarship**

Created in 2012

Currently 445 participating providers

Currently 7188 participating students

**Ohio** | Department of Education

## **Student Eligibility**

#### Autism

Age 3 - graduation requirements met or age 22

**IEP completed to apply** 

Department of Educat<u>ion</u>

Applications period through March 30<sup>th</sup> of the current program year

#### Jon Peterson

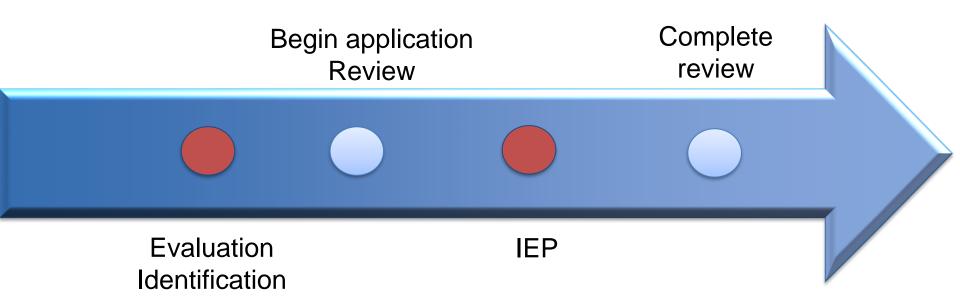
K- until graduation requirements met or age 22

**ETR completed to apply** 

IEP completed to award Application period is year round

Assessments

## **District Responsibilities**





## **Parent Responsibility**

#### Homeschool

**Complete application** 

Homeschool education notification

**Choose providers and services** 

**Parent portal** 

**Graduation requirements** 

## Chartered nonpublic

**Complete application** 

**Special Education program** 

**Parent portal** 

Ohio | Department of Education

## Application

#### Autism Open each April

#### Jon Peterson Year round



## Awards

Autism July 1-June 30 Prorated Jon Peterson July 1-June 30 Prorated

Ohio | Department of Education

## Limitations

**Scholarship Award** 

#### One scholarship program





**Quarterly progress reports** 



## **Additional Services**

 A parent can complete a service modification in collaboration with their provider to add services associated with educating their child.

## **Payment of Scholarship**

Award letter

Services invoiced monthly

Payments endorsed by the parent

Payments endorsed by the provider



#### education.ohio.gov/scholarships

#### **Contact:** autismscholarship@education.ohio.gov peterson.scholarship@education.chio.gov

#### parent liaison: jodie.brown@education.ohio.gov



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Department of Education

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## education.ohio.gov/Text

## SIGN UP FOR PARENT TEXT TIPS

Elementary Students Text "OHED EL" to 468311

Middle and High School Students Text "OHED HS" to 468311



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