

**Statement of Eligibility
Hearing Impairment Category Worksheet**

Name of Student:	Grade:	DOB:	Date:
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A. Criteria for Hearing Impairment

Student meets all of the conditions below:

1. The student has a pure tone average loss of 25dbHL or greater in the better ear for frequencies of 500Hz, 1000 Hz, and 2000 Hz; or
2. The student has a pure tone average loss of 35dbHL or greater in the better ear for frequencies of 300Hz, 4000 Hz, and 6000 Hz; or
3. The student has a unilateral hearing impairment with a pure tone average loss of 50dbHL or greater in the affected ear for the frequencies of 500Hz to 4000 Hz; and
4. The loss is either sensorineural, or is a conductive loss that has been determined to be not treatable.

B. Based on above information, the child

- Meets the criteria for the 'Hearing Impairment Disability' category.
- Does not meet the criteria for the 'Hearing Impairment Disability' category.

C. Participation of Team Members:

Signature of Team Members	Title	Agree	Disagree
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

A copy of the evaluation report and the eligibility statement is given to the parent(s).