



**Office of Educational Services
Level I
Internal Management Procedures**

**Internal Management
Procedure #
SUP.003.REC.703**

Page 1 of 3

Internal Management Procedure Title:

**Student Records:
Discharge and
Receipt of Records**

Effective Date:

May 10, 2021

New:

Authority :

NJ DOC Policy SUP.003.000,
SUP.003.006, and SUP.003.007

Promulgating Office:

Office of Educational Services
Division of Programs and Community Services

**Professional Association
Standard cited:**

Applicability: This Policy Statement applies to all New Jersey Department of Corrections Organizational Unit Education Departments

Supersedes:

Review Schedule:

This document is scheduled for annual review on or about April 1, 2022

Reviewed and approved by: **Jecrois Jean-Baptiste, Director
Office of Educational Services**

(Signature)

5/19/2021

(Date)

Reviewed and approved by: **D. Patterson Sessomes, Assistant Commissioner
Division of Programs and Community Services**

(Signature)

5/24/21

(Date)

Documentation of the reviews/approvals are maintained by the Office of Policy & Planning, APPM Unit.

I. PURPOSE

To ensure that the Department of Corrections Office of Educational Services (OES) and the educational programs is in compliance with the requirements of State and federal law relative to the compilation, maintenance, accessing, and disclosing information to the Local Education Agency (LEA) or correctional facility.

<p>Internal Management Procedure Title:</p> <p>Student Records: Communication and Documentation release to School Districts or Correctional Facilities</p>	<p>Effective Date</p> <p>August 1, 2018</p>	<p>Internal Management Procedure #</p> <p>SUP.003.REC.703</p> <p>Page 2 of 3</p>
--	--	---

II. DEFINITIONS

The following words and terms, when used in this policy, shall have the following meanings, unless the context clearly indicates otherwise:

Assistant Supervisor of Education (ASOE) means OES employee serving as the designated secondary supervisor to the Supervisor of Education, and acts as the primary supervisor in the absence of the SOE.

Division of Programs and Community Services means the division responsible for correctional facility and community-based program opportunities for offenders, which includes the offices of Community Programs, Educational services, Transitional and Social Services, Chaplaincy, County Services, Victim Services, and Volunteer Services, PACE Unit, and the Gender Responsive Programming Unit.

LEA means a Local Education Agency limited to school districts.

New Jersey Department of Corrections (NJDOC) means that agency of the Executive Branch of the New Jersey State Government whose functions are to protect the public and provide for the custody, care, discipline, training and treatment of persons committed to the State correctional facilities.

Office of Educational Services (OES) means the office within the Department of Correction, Division of Programs and Community Services, that has been established to ensure inmates are provided with academic, vocational, and life skills programming that meet their demonstrated needs, within a framework that is consistent with the department's overall mission and in concert with all appropriate federal and State education statutes, codes, and regulations.

SFEA student-inmate means an inmate who is eligible to receive educational services as defined by the State Facilities Education Act (SFEA).

Supervisor of Education (SOE) means under the direction of a supervisory official in a state department, institution, or agency, organizes, administers, and supervises the total educational program in institutions or agencies; does related work as required.

III. POLICY

It is the policy of the New Jersey Department of Corrections Office of Educational Services, to ensure whenever possible, the proper transmittal of student records to the school district or correctional facility, and/or post-release educational plans to appropriate LEA responsible for the student.

Educational records for all students released from a New Jersey Department of Corrections facility shall be transferred within 10 business days to the responsible school district in order to ensure credit is given for completed work. All educational records shall be kept locked in a secure area in the Education Office designated by the Supervisor of Education.

Internal Management Procedure Title: Student Records: Communication and Documentation release to School Districts or Correctional Facilities	Effective Date August 1, 2018	Internal Management Procedure # SUP.003.REC.703 Page 3 of 3
---	---	--

IV. PROCEDURES

Discharged Students

1. Upon release of an SFEA student, the Supervisor and/or Assistant Supervisor of Education shall ensure Form: SFEA.DIS.LTR.18 - Student Records Discharge Request Letter and Form: SFEA.DS.SRR.18 Discharged Student Record Receipt is completed by the Supervisor and/or Assistant Supervisor of Education no later than ten (10) days after release.
2. Depending on the preferred method of communication with the LEA or Correctional Facility, the Supervisor and/or Assistant Supervisor shall ensure all confirmation of receipt and phone log are kept in the student's educational folder.
3. The Supervisor and/or Assistant Supervisor of Educational shall ensure a copy of the student's academic records are kept in a secured location for a minimum of five (5) years.

V. Cross Reference Documents and Policies

Document/ Policy Number	Title	Effective/ Revision Date
SUP.003.000	Office of Educational Services: Mission, Goals and Objectives	Revised August 1, 2018
SUP.003.006	Student Records: Compilation, Maintenance, Access and Confidentiality	Revised August 1, 2018
SUP.003.007	Student Records: Transmittal of Student Records to Responsible School Districts or Correctional Facilities	Revised August 1, 2018

VI. Applicable Forms

Form Number	Form Title	Effective/ Revision Date
SFEA.DS.SRR.18	Discharged Student School Record Receipt	August 1, 2018
SFEA.DIS.LTR.18	Discharge Letter	August 1, 2018



State of New Jersey
DEPARTMENT OF CORRECTIONS
PO Box 863 | TRENTON NJ 08625-0863

PHILIP D. MURPHY
Governor

SHEILA Y. OLIVER
Lt. Governor

MARCUS O. HICKS, ESQ.
Commissioner

[Date]

[LEA name]

[LEA address]

Attn: [LEA administrator name]

Re: [Student Name] Discharge and Academic Records

Dear School Administrator,

The above-named student was recently discharged from [facility] and has identified your school district as his/her district of residence. Enclosed please find the student's most recent academic records.

As mandated by NJSA 18A:7B-8 & 9 and NJAC 6A:8-5.1(a)1-6, this student's school district of residence must grant academic credit based on appropriate documentation provided by the New Jersey Department of Corrections' Office of Educational Services.

Please sign and return the enclosed form to indicate you have received this student's records. Your prompt attention to this matter is anticipated and appreciated.

Sincerely,

[NJDOC Staff Name], [NJDOC Staff Title]

[Facility Name]

[Facility mailing address]

[staff phone number]

[staff email address]

Enc: Student records, School Records Receipt form

New Jersey Department of Corrections Office of Educational Services

NJDOC Staff Instructions: Please complete the areas highlighted in YELLOW and promptly forward to LEA.

LEA Staff Instructions: Please complete the areas highlighted in GREEN and promptly return to NJDOC.

Discharged Student - School Records Receipt			
Student Name		SBI#	NJSMART #
SS#	Discharge Date	Discharging NJDOC Facility	Local Education Agency (District)
Sender (NJDOC Staff name)		Initials	Date Sent
Intended Recipient (LEA Staff Name and/or Title)		Initials	Date Received

Enclosed Documents (check all enclosed)																																	
The following records belonging to the above-named student who was recently discharged from a New Jersey Department of Corrections facility have been forwarded to the above-named LEA.																																	
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td><input type="checkbox"/></td><td>Individualized Education Plan (IEP)</td></tr> <tr><td><input type="checkbox"/></td><td>Learning Evaluation</td></tr> <tr><td><input type="checkbox"/></td><td>Social History Evaluation</td></tr> <tr><td><input type="checkbox"/></td><td>Psychological Evaluation</td></tr> <tr><td><input type="checkbox"/></td><td>Neurological Evaluation</td></tr> <tr><td><input type="checkbox"/></td><td>Psychiatric Evaluation</td></tr> <tr><td><input type="checkbox"/></td><td>Speech and Language Evaluation</td></tr> <tr><td><input type="checkbox"/></td><td>CST Referral Form</td></tr> </table>	<input type="checkbox"/>	Individualized Education Plan (IEP)	<input type="checkbox"/>	Learning Evaluation	<input type="checkbox"/>	Social History Evaluation	<input type="checkbox"/>	Psychological Evaluation	<input type="checkbox"/>	Neurological Evaluation	<input type="checkbox"/>	Psychiatric Evaluation	<input type="checkbox"/>	Speech and Language Evaluation	<input type="checkbox"/>	CST Referral Form	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td><input type="checkbox"/></td><td>Individual Program Plan (IPP)</td></tr> <tr><td><input type="checkbox"/></td><td>Transcripts</td></tr> <tr><td><input type="checkbox"/></td><td>Report Cards</td></tr> <tr><td><input type="checkbox"/></td><td>NJSLA Documentation</td></tr> <tr><td><input type="checkbox"/></td><td>Other State Testing documents</td></tr> <tr><td><input type="checkbox"/></td><td>NJDOC Student Enrollment Form</td></tr> <tr><td><input type="checkbox"/></td><td>Transition Plan Form IS THIS NEEDED STILL?</td></tr> <tr><td><input type="checkbox"/></td><td>Other (specify below)</td></tr> </table>	<input type="checkbox"/>	Individual Program Plan (IPP)	<input type="checkbox"/>	Transcripts	<input type="checkbox"/>	Report Cards	<input type="checkbox"/>	NJSLA Documentation	<input type="checkbox"/>	Other State Testing documents	<input type="checkbox"/>	NJDOC Student Enrollment Form	<input type="checkbox"/>	Transition Plan Form IS THIS NEEDED STILL?	<input type="checkbox"/>	Other (specify below)
<input type="checkbox"/>	Individualized Education Plan (IEP)																																
<input type="checkbox"/>	Learning Evaluation																																
<input type="checkbox"/>	Social History Evaluation																																
<input type="checkbox"/>	Psychological Evaluation																																
<input type="checkbox"/>	Neurological Evaluation																																
<input type="checkbox"/>	Psychiatric Evaluation																																
<input type="checkbox"/>	Speech and Language Evaluation																																
<input type="checkbox"/>	CST Referral Form																																
<input type="checkbox"/>	Individual Program Plan (IPP)																																
<input type="checkbox"/>	Transcripts																																
<input type="checkbox"/>	Report Cards																																
<input type="checkbox"/>	NJSLA Documentation																																
<input type="checkbox"/>	Other State Testing documents																																
<input type="checkbox"/>	NJDOC Student Enrollment Form																																
<input type="checkbox"/>	Transition Plan Form IS THIS NEEDED STILL?																																
<input type="checkbox"/>	Other (specify below)																																
Other Miscellaneous Documents Enclosed																																	

Records Receipt Confirmation		
Recipient name (please print)	Title	Phone and/or Email
<p>As an authorized representative of the Local Education Agency named above, I have received the student documents listed on this form and I have reviewed the accompanying discharge letter which provided information about NJSA 18A:7B-8 & 9 and NJAC 6A:8-5.1(a)1-6 as they apply to the education of a discharged student.</p>		
_____ Signature		_____ Date

Please return completed form to [Facility Name] [Facility Mailing Address] Attn: [NJDOC Staff Name/Title]. If you require additional information or clarification, please contact [NJDOC Staff name] [NJDOC Staff phone] [NJDOC Staff email].