

Transition from Early Intervention to Preschool

School District Contacts for Preschool Special Education 2014 – 2015



**Compiled by
State Support Team Region 3
6393 Oak Tree Boulevard
Independence, OH 44131**



www.esc-cc.org

**Transition from Early Intervention to Preschool Transition
School District Contacts for Preschool Special Education
2014-2015**

DISTRICT	PRIMARY CONTACT	ADDITIONAL CONTACT	REQUIRED ITEMS FOR TRANSITION
BAY VILLAGE 377 Dover Center Road Bay Village, OH 44140	Melissa Grimes School Psychologist 440-617-7327	Martha Patton Director of Special Services 377 Dover Center Road Bay Village, OH 44140 440-617-7324	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records
BEACHWOOD 24601 Fairmount Blvd. Beachwood, OH 44122	Christin Weyn School Psychologist 216-292-2344, ext. 244 mew@beachwoodschoools.org	Lauren Broderick Director of Pupil Services 216-464-2600, ext. 235	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records
BEDFORD 400 West Glendale Avenue Bedford, Ohio 44146	Iwanda Huggins** Supervisor of Special Education 440-786-3517 ihuggins@bedford.k12.oh.us	Katy Burant** School Psychologist 440-439-4227 ext. 3735 kburant@bedford.k12.oh.us	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Child's Social Security Card <input type="checkbox"/> Custody Papers <input type="checkbox"/> Residency Affidavit (form provided by LEA for parent completion) <input type="checkbox"/> Copy of Proof of Residency

**Both contacts should be informed of transition planning meeting by sending each a separate invitation.

DISTRICT	PRIMARY CONTACT	ADDITIONAL CONTACT	REQUIRED ITEMS FOR TRANSITION
BEREA 390 Fair Street Berea, Ohio 44017	Gina Andrasi ** School Psychologist-Preschool 16900 Holland Brook Park, OH 44142 216-898-8840, ext. 7675	Sue Bell ** Department Chairperson Preschool & Preschool Special Education 216-898-8840, ext. 7690	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records
BRECKSVILLE-BROADVIEW HTS. 6638 Mill Road Brecksville, Ohio 44141	Tara Dayton School Psychologist 440-740-4626	Dave Martin Preschool Supervisor (440) 740-4610	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Immunization Records <input type="checkbox"/> Affidavit of Residency <input type="checkbox"/> Proof of Residency
BROOKLYN 9200 Biddulph Brooklyn, Ohio 44144	Laura Bindernagel** Preschool Psychologist 216-485-8138	Becky Furbay** Director of Pupil Services 216-485-8136	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization records
CHAGRIN FALLS 400 E. Washington Street Chagrin Falls, Ohio 44022	Lisa Shannon Assistant Superintendent 440-247-5500		<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> Relevant speech, OT, PT, medical evaluations/reports <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Child's Social Security Card <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records <input type="checkbox"/> Preschool Request for Assistance Forms <input type="checkbox"/> Photo ID of Parent/Guardian

****Both contacts should be informed of transition planning meeting by sending each a separate invitation.**

DISTRICT	PRIMARY CONTACT	ADDITIONAL CONTACT	REQUIRED ITEMS FOR TRANSITION
CLEVELAND 1380 East 6 th Street Cleveland, Ohio 44114	Marianne Wolf Preschool Assessment Clinic 1440 Lakeside Avenue Cleveland, Ohio 44114 216-685-5107 Marianne.Wolf@clevelandmetroschools.org	Thea Schwonek Solution Specialist/ Compliance Auditor East Professional Center 1349 East 79 th Street Cleveland, Ohio 44103 216-838-1964 Thea.Schwonek@clevelandmetroschools.org	<input type="checkbox"/> Preschool Referral for Evaluation <input type="checkbox"/> Consent/Authorization for Release of Information <input type="checkbox"/> Medical Report <input type="checkbox"/> Immunization Record <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Guardianship Papers <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> Reports (Speech, OT, PT, Medical Evaluation)
CLEVELAND HEIGHTS/UNIVERSITY HEIGHTS 2155 Miramar Blvd. University Hts., Ohio 44118	Debbie Finizia School Psychologist Preschool 216-320-4514	Judy Dell'Aquila, Ph.D. Coordinator of Special Education 216-371-7435	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records
CUYAHOGA HEIGHTS 4820 E. 71 st Street Cuyahoga Hts., Ohio 44125	Juleta Newkirk School Psychologist 4880 E. 71 st Street Cuyahoga Hts., Ohio 44125 216-429-5870 216-429-5883 (Fax) jnewkirk@cuyhts.org	Wendy Jovan 216-429-5746	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records

****Both contacts should be informed of transition planning meeting by sending each a separate invitation.**



DISTRICT	PRIMARY CONTACT	ADDITIONAL CONTACT	REQUIRED ITEMS FOR TRANSITION
EAST CLEVELAND 1843 Stanwood Road East Cleveland, Ohio 44112	Susan Pennza** School Psychologist 216-268-6688 spennza@east-cleveland.k12.oh.us	Courtney Bean Jones** Administrator of Special Education 216-268-6474 cjones@east-cleveland.k12.oh.us	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records <input type="checkbox"/> Other _____
EUCLID Euclid City Schools Early Learning Center 22800 Fox Avenue Euclid, OH 44123	Samantha Krauss Intervention Specialist & Lead Teacher 216-732-2753 Skrauss@euclidschools.org	Lorraine Jenkins Secretary 216-732-2700 ljenkins@euclidschools.org	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records <input type="checkbox"/> Other
FAIRVIEW PARK 21620 Mastick Rd. Fairview Park, Ohio 44126	Megan Wellman School Psychologist 440-331-5500, ext. 2108	Constance Obrycki Director of Pupil Services 440-331-5500, ext. 1115	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records <input type="checkbox"/> Other



DISTRICT	PRIMARY CONTACT	ADDITIONAL CONTACT	REQUIRED ITEMS FOR TRANSITION
GARFIELD HEIGHTS 5640 Briarcliff Drive Garfield Hts., Ohio 44125	Jennifer Matas William Foster Elementary 12801 Bangor Avenue Garfield Heights, OH 44125 216-475-8123, ext. 56110 jmatas@ghbulldogs.org	Brooke Pillets Special Education Director 216-475-8100, ext. 51015 bpillets@ghbulldogs.org	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records <input type="checkbox"/> Background Information Form
INDEPENDENCE 7733 Stone Road Independence, Ohio 44131	Sandra McCullough Coordinator of Special Education 216-642-5877		<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference
LAKWOOD 1470 Warren Road Lakewood, Ohio 44107	Gordana Dimacchia Coordinator of Special Services 216-529-4149 Gordana.dimacchia@lakewood.k12.oh.us	Kristen Beeler School Psychologist 216-227-5130	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Progress Reports <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records

**Both contacts should be informed of transition planning meeting by sending each a separate invitation.

DISTRICT	PRIMARY CONTACT	ADDITIONAL CONTACT	REQUIRED ITEMS FOR TRANSITION
<p>MAPLE HEIGHTS Special Pupil Services 5740 Lawn Avenue Maple Hts., OH 44137 216-587-6100</p>	<p>Thomas Rode** School Psychologist Abraham Lincoln Elementary 6009 Dunham Road Maple Heights, OH 44137 216-438-6030, ext. 5035 thomas.rote@mapleschools.com</p>	<p>Judith Buxton Preschool Supervisor JFK Elementary 5933 Dunham Rd. Maple Heights., OH 44137 Judith.buxton@mapleschools.com</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records
<p>MAYFIELD 1101 SOM Center Road Mayfield Hts., Ohio 44124</p>	<p>Darcy Edelman School Psychologist 950 Millridge Highland Hts., Ohio 44143 440-995-7447 440-995-7305 (Fax)</p> <p>Elizabeth Scully Principal 950 Millridge Highland Hts., Ohio 44143 440-995-7447</p>	<p>Peggy Jones 440-995-7240</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records
<p>NORTH OLMSTED 27425 Butternut Ridge Road North Olmsted, Ohio 44070</p>	<p>Jill Zawada** School Psychologist 440-779-3564 Fax: 440-779-3591</p>	<p>Lisa Ryan Curtin** Director of Pupil Services 440-779-3563</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records

**Both contacts should be informed of transition planning meeting by sending each a separate invitation.



DISTRICT	PRIMARY CONTACT	ADDITIONAL CONTACT	REQUIRED ITEMS FOR TRANSITION
NORTH ROYALTON 6579 Royalton Road North Royalton, Ohio 44133	Laura Becker School Psychologist Lil' Bears Preschool 9543 Broadview Rd., Bldg. 18 Broadview Heights, Ohio 44147 440-582-9140, ext. 3807 laura.becker@northroyaltonsd.org	Cristina Zukowski Coordinator, Special Education 440-582-9141	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Copy of Social Security Card <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records
OLMSTED FALLS 26937 Bagley Road Olmsted Falls, Ohio 44138-2395	James Tatman Director Student Services Olmsted Falls City Schools 26937 Bagley Road Olmsted Falls, Ohio 44138 440-427-6140	Melinda Brunner Director, Olmsted Falls Early Childhood Center 440-427-6361	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference
ORANGE 32000 Chagrin Blvd. Pepper Pike, Ohio 44124	Lori Wotowiec Special Education Coordinator 216-831-8600 ext. 5630 lwotowiec@orangecsd.org	Audrey Cercelle Preschool Psychologist 216-831-8600, ext. 4614 acercelle@orange.k12.oh.us	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records <input type="checkbox"/> Consent for Permission to Review <input type="checkbox"/> Request for Assistance Form <input type="checkbox"/> Immunization Records
PARMA 7700 Malibu Drive Parma, OH 44130	Dana Massimino Early Childhood Coordinator 440-885-8665 massiminod@parmacityschools.org	Kristy Koestner Director of Special Education 440-885-8308	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records

****Both contacts should be informed of transition planning meeting by sending each a separate invitation.**



DISTRICT	PRIMARY CONTACT	ADDITIONAL CONTACT	REQUIRED ITEMS FOR TRANSITION
RICHMOND HEIGHTS 447 Richmond Road Richmond Hts., Ohio 44143	Danielle Westbrook** School Psychologist 216-692-0099, ext. 571250	Odessa Johnson** Special Education Supervisor 216-692-0086, ext. 571227	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records
ROCKY RIVER 1101 Morewood Parkway Rocky River, Ohio 44116	Jennifer Norman Executive Director of Pupil Services 1101 Morewood Parkway Rocky River, Ohio 44116 440-356-6006	Tara Grabowski LRS Coordinator 1101 Morewood Parkway Rocky River, OH 44116 440-356-6006	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records
SHAKER HEIGHTS 15600 Parkland Drive Shaker Hts., Ohio 44120	Noreen Smyth-Morrow School Psychologist Onaway ES 345 Woodbury Road Shaker Hts., Ohio 44120 216-295-4090	Tim Gesing Coordinator of Preschool Program Woodbury Elem. School 5400 South Woodland Road Shaker Hts., Ohio 44120 216-295-4168 Gesing.t@shaker.org	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records

**Both contacts should be informed of transition planning meeting by sending each a separate invitation.



DISTRICT	PRIMARY CONTACT	ADDITIONAL CONTACT	REQUIRED ITEMS FOR TRANSITION
SOLON 33800 Inwood Road Solon, Ohio 44139	Beth Poe School Psychologist, Arthur Road ES 33425 Arthur Road Solon, Ohio 44139 440-349-7341	Dale M. Jakab Coordinator of Pupil Services 33800 Inwood Road Solon, Ohio 44139 440-349-6258	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Request for Assistance From <input type="checkbox"/> Immunization Form
SOUTH EUCLID/LYNDHURST 5044 Mayfield Lyndhurst, Ohio 44124	Denise Kukla** School Psychologist Rowland Elementary School 4300 Bayard Road South Euclid, Ohio 44124 216-691-2203 216-691-2206 (Fax)	Jennifer Moles ** Director of Special Education 5044 Mayfield Road Lyndhurst, Ohio 44124 216-691-2020	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Preschool Request for Assistance Form
STRONGSVILLE 13200 Pearl Road Strongsville, Ohio 44136	Jeremy Ryman School Psychologist 19543 Lunn Road Strongsville, OH 44149 440-268-5348, ext. 5348 ryman@strongnet.org	Drew Kuzmickas Special Education Supervisor 19543 Lunn Road Strongsville, Ohio 44149 440-572-7046, ext. 4095 kuzmickas@strongnet.org	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records <input type="checkbox"/> Child's Social Security Card

**Both contacts should be informed of transition planning meeting by sending each a separate invitation.



DISTRICT	PRIMARY CONTACT	ADDITIONAL CONTACT	REQUIRED ITEMS FOR TRANSITION
WARRENSVILLE HEIGHTS 4285 Warrensville Center Road Warrensville Hts., Ohio 44128	Denise Dimatteo Special Education Coordinator 216-336-6591	Tiesha Purnell School Psychologist 216-336-6550 216-755-8743	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Copy of Birth Certificate <input type="checkbox"/> Custody Papers <input type="checkbox"/> Copy of Proof of Residency <input type="checkbox"/> Immunization Records
WESTLAKE 27200 Hilliard Blvd. Westlake, Ohio 44145	Lynda Appel Special Education Administrative Assistant 440-835-6309	Christie Pargas Preschool School Psychologist 440-250-1173 pargas@wlake.org	<input type="checkbox"/> Consent for Release of Records <input type="checkbox"/> IFSP, Current Evaluation Results <input type="checkbox"/> 120 day Written Notice of Transition Conference <input type="checkbox"/> Consent for permission to review

****Both contacts should be informed of transition planning meeting by sending each a separate invitation.**

If you need additional information, please contact:

Kathy Jillson
 Early Childhood Consultant
 State Support Team – Region 3
 6393 Oak Tree Boulevard
 Valley View, Ohio 44131
 (216) 524-3000, ext. 3804
kathy.jillson@esc-cc.org

or

Myrtle Mitchell
 Transition Liaison
 Help Me Grow
 8111 Quincy Avenue , Suite #344
 Cleveland, Ohio 44104
 (216) 698-5057
mmitchell@helpmegrow.org

This publication is supported in whole or in part by the U.S. Department of Education through the Ohio Department of Education. However, the opinions expressed herein do not necessarily reflect the position or policy of the U.S. Department of Education or the Ohio Department of Education, and no official endorsement by the U.S. Department of Education or the Ohio Department of Education shall be inferred.

The Educational Service Center of Cuyahoga County, fiscal agent for the State Support Team Region 3, does not discriminate on the basis of race, color, national origin, sex, region, age, or disability in employment or in the provision of services.

Updated December, 2014