

## Postsecondary Career Center Course Substitution Report, Form CSR-02

Please list the number of students who received course and/or instructional standard substitution as well as the required course(s), substitution(s) provided, and CTE program (ie. Welding, Drafting) by disability type beginning with the fall semester of the preceding academic year. Please include the prefix, course number, and course name (e.g., ). Add rows if necessary. Please indicate "0" for the number of students if no substitutions were granted.

Disability	Number of Students	Required Course(s) (prefix, number, and title)	Substituted Course(s) (prefix, number, and title)	Instructional Standard(s) Requiring Modification or Substitution*	Associated CTE Program Title and Program Number:
Deaf/Hard of Hearing					
Visual Impairment					
Specific Learning Disability					
Orthopedic Impairment					
Speech/Language Impairment					
Emotional or Behavioral Disability					
Autism Spectrum Disorder					
Traumatic Brain Injury					

Intellectual Disability					
Other Health Impairment					

\* In instances where substitutions were limited to instructional standards in a required course, please identify the standards in the curriculum framework that were either modified or substituted entirely for a locally determined student learning outcome to accommodate the student’s disability or other health impairment.

How many requests for course substitutions were made, and how many substitutions were granted during the preceding academic year? (Please list the number of requests per semester starting with the fall semester.) Please indicate “0” if no substitutions were requested or granted.

Semester	Number of Substitutions Requested	Number of Substitutions Granted
Fall		
Spring		
Summer		
Total		

How many requests for instructional standards substitutions were made, and how many substitutions were granted during the preceding academic year? (Please list the number of requests per semester starting with the fall semester.) Please indicate “0” if no substitutions were requested or granted.

Semester	Number of Substitutions Requested	Number of Substitutions Granted
Fall		
Spring		
Summer		
Total		

Rule 6A-10.041, F.A.C. Effective August 2022. Each career center under section 1001.44, F.S., and charter technical career center under section 1002.34, F.S., shall report such information to the Department of Education, Division of Career and Adult Education once a year by July 1.