eSTACs Entering STAC-1 for Center Based and Center Based Related Services

## Erie County Timeline

#### \* July 1, 2022:

\* School districts will enter all 22/23 STAC-5's into eSTACs, this includes any 21/22 school year entries and/or amendments.

#### Between July 1 and September 1, 2022:

 School districts will continue to enroll and amend all children per the current Erie County procedure (paper STAC-1) - no matter the school year 21/22 OR 22/23.

#### \* August 15, 2022:

 The County will no longer accept any enrollments or amendments after this date. You will hold onto any paperwork and enter into eSTACs on or after 9/1/22.

#### \* August 16 through August 31:

Erie County will enter all previous paper STACs into their Preschool system. Once completed, McGuinness will migrate
 ALL students that are currently in Erie County Preschool database into eSTACs.

#### \* September 1, 2022:

\* School districts will enter 22/23 STAC-1 services into eSTACs, this includes 21/22 school year entries and/or amendments.



### **Student Search**

eSTACs@CPSEPortal.com

#### eSTACs Student

#### \* Go to eSTACs -> Student Search





#### \* Search for student using first and last name of student & click Retrieve

Home	Activities	IEP 🔻	eSTACs	Attendance	Billing	Lookup	Documents	Reports	Maintenance	Medicai
Filters _										
ant		bar		DOB	S	TACID	CIN		Student Number	
County	ROCKLAND	~		-						
District	CLARKSTOWN	CSD	~							
									Clear Filters R	etrieve

### View Student Details

\* Click on Details to get to the student details page with evaluations, services, documents and forms.

Home	Activities	- IEP -	eSTACs	Atter	ndance	Billi	ng	Lookup	Docun	nents	Repo	orts	Maintenance		Medicaid
_Filters ant County	ROCKLAND	bar			В		STA	CID		CIN			Student Num	ber	
District	CLARKSTO	WN CSD	~										Clear Filters	Re	trieve
Add Net	w Student									1					
Distrie	ot Name	Last Name	First Name	DOB	Gender	CIN	STACID	Student N	umber						
CLARKS	TOWN CSD	Ants	Barbara	08/17/18	F					Edit Detail	s				



## **Adding New Center Based Placements**

## Adding a new CB Placement STAC-1

Go to the IEPPlacementstab

*	Click Add CB
	Placement

Home	Activities -	IEP eS	STACs A	Attendance	Billing	Lookup	Documents	Reports
CPSE: 5	00101060000 CL	ARKSTOWN CS	D					
Last Nar STACID	me: Ants F : J99999 0	irst Name: Bar NN:	bara DOB: Student	8/1 Number: 9	7/2018 Eligibi 000099999	lity: 7/1/2021 - 8	/ <b>31/2023</b> Edit	SED Summary
STAC	-5s Evaluatio	on Components	IEP Plac	ements	IEP Mandates	Documents	Forms	
Schoo	I Year Session 2	021 - 2022 Wint	er 🗸					
Sch	ool Year Sessior	Placement	Description	Status	Submitted By	Submitted Da	te	
No Pl	acements	1		· · ·				
Add	d CB Placement	Add SEIT/	RS Placement	1				

# **Entering Program Information**

- Check this box if the child has multiple
   STACs for the same time period (CB + SEIT/RS, CB morning + CB afternoon)
- 2. Specify school year / session
- 3. Indicate if the child is placed in foster care
- 4. Choose the Provider
- **5.** Indicate whether the Provider is the same provider that performed the most recent evaluation
- **6.** Select the specific program the child will attend
- **7.** This populates with the dates and hours the selected program runs
- **8.** Enter the dates and hours that this student will attend this program, and click *Save*

STACID:	DelFuego First Nam CIN:	e: Anthony DOB: 3/12/20	16 Eligibility: 1/1/2019 - 8/31 Edit	//2021
Program	Aide / Nurse / Int	erpreter Related Servi	ces Transportation	
Click if t	his is a multiple servic	e STAC (two or more concu	rrent STACs)	
School Vez	r Session 2019 201	0 Summer T		
	2019-202	o summer v		
Is this stud	ent placed in Foster C	are? 🔍 Yes 🖲 No		
4	HEBREW ACADEMY	FOR SPEC CHLDRN	¥	
<ul> <li>Provider</li> </ul>				
Provider	Same as Evaluation P	rovider? 🔍 Yes 🖲 No		
• Provider 5 5 6 Program	Same as Evaluation P 9101(C) 07/08/19 - 0	rovider?	PECIAL CLASS OVER 2.5 N	ASSAU COUNTY WOODMERE •
Provider 5 6 <sup>Program</sup>	Same as Evaluation P 9101(C) 07/08/19 - 0 Start Date	rovider? OYes No 8/14/19 J/A-PRESCHOOL S End Date	PECIAL CLASS OVER 2.5 N Hours Per Day	ASSAU COUNTY WOODMERE 🔻 Days per Week
Provider 5 6 <sup>Program</sup> 7 Program	Same as Evaluation P 9101(C) 07/08/19 - 08 Start Date 07/08/2019	rovider? Ves No 8/14/19 J/A-PRESCHOOL S End Date 08/14/2019	PECIAL CLASS OVER 2.5 N Hours Per Day 5.00	ASSAU COUNTY WOODMERE V Days per Week 5

## Adding Aides / Nurse / Interpreter

- \* To add an aide / nurse or Interpreter
  - 1. Select the type (Aide, LPN, RN, or Interpreter)
  - 2. Select whether this service is shared with another student
  - 3. Indicate the hours per day this service is provided
  - 4. Indicate the days per week this service is provided
  - 5. Click Add



# Adding Related Services INCLUDED in Tuition

Program	Alde / Nurse / In	erpreter	Relate	d Services	Transporta	tion										
3	Service		Start D	ate	End D	ate	IND/GF	RP	Frequency		Minutes	Period	Location			
Occupation	al Therapy	07/0	8/2019		08/14/2019		L		2	30		WEEKLY	Therapy Room	Edi	t Delete	e Amend
Physical Th	erapy Group	07/0	8/2019		08/14/2019		G		3	45		WEEKLY	Gym	Edi	Delete	Amend
Speech The	erapy <b>1</b>	07/0	8/2019	2	08/14/2019	3	1 4	4	3 <mark>5</mark>	30	6	WEEKLY7	Classroom 8	Edi	t Delete	e Amend

- **1.** The type of service
- 2. The start date of this particular service
- 3. The end date for this particular service
- 4. Whether the service is Individual (I)

or Group (G)

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- 5. The number of sessions per period
- 6. The number of minutes for each session
- **7.** The period of time for this service
- **8.** Location where service will be performed

### When IEP has no Related Services

- \* If the IEP does not specify any related services, check the box at the top of the related services tab that says
  - "There are no recommended related services for this student on this Placement / IEP"

	Program	Aide / Nurse / Interpre	eter Relat	ted Services	Transporta	tion								
Ľ	There are	e no recommended related Service	d services for Start Date	this student on End Date	this Placement	/IEP	Frequency	Minutes	Period	Location	Submitted Date	Status		
		~	07/12/2022	08/20/2022	~				<b>``</b>	~			Add	

# Adding Transportation

Related Services

Aide / Nurse / Interpreter

Program

 A list of types of transportations indicated in IEP (Bus or Parent reimbursement).

2. If transportation is needed, Erie County would like you to choose **both** the bus and the parent.

No transportation
 documents will need to be
 uploaded.

Service	Provider	Start Date	End Date	Submitted Date	Status			
Bus	STUDENT BUS CO	07/12/2022	08/20/2022		Not Submitted	Edit	Delete	
Parent	Rockland Parent Transportation	07/12/2022	08/20/2022		Not Submitted	Edit	Delete	
<b>v</b>	•	07/12/2022	08/20/2022			Add		
Document Type:	e chosen	✓ Effective Date:	Comment:					
Upload								

Transportation

### When IEP has no Transportation

If the student will not be bussed, and the parent will not be submitting for mileage reimbursement, check the box at the top of the transportation tab that says
 "The IEP does not authorize reimbursement for transportation"

Program Aide / Nurse / Inte	rpreter Related Service	s Transportation				
The IEP does not authorize reir	nbursement for transportation	/ No parent reimbursement w	ill be sought			_
Service Provider	Start Date	End Date	Submitted Date	Status		
<b>~</b>	07/12/2022	08/20/2022			Add	
Upload Transportation Documen	t	·	·			_
Document Type:	~	Effective Date:	Comment:			
Choose File No file chosen						
Transportation Files						
Uploaded DocumentType	Comments Effective D	ate				



## **Uploading Documents**

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### **Documents Required**

- \* Erie County is requiring the following documents to be uploaded, before you can sign and submit your STAC-1:
  - \* The IEP Summary page or complete IEP

# Uploading a Document

- Select Documents tab on Student Details screen.
- This will also show any Missing Documents that need to be uploaded.
- Click "Upload" button at bottom of screen or "Upload" at the end of the missing document line.

CPSE: 50040206	60000	-									
Student Informat	ion										
Last Name:	First	Name:	DOB:	3/9	/ <b>2017</b> Eli	gibility:	1/1/2020 - 8/31	/2022			
STACID:	CIN:		Student	Number: 50	00038460			Edit	SED Summ	nary	Resync
STAC-5s	Evaluatio	n Componen	ts IEP PI	acements	IEP Manda	ates	Documents	Forms			
Uploaded	d Docu	ments								-	
Docume	ent Type	Uploaded D	ate Applie	d To Sub	nitted Date	Subr	mittedUser C	Comments			
No Document	S										
Missing I	Docum	ents									
Category	-	Туре	Document	Description		Applie	s To				
CHILD	MEDICAI	D CONSENT	Medicaid Par	ental Conser	t			Show Docu	iment List U	lpload	
PLACEMENT	IEP		Copy of IEP f	or Placemen	t 09/10/2021	-06/24/	2022 RS (ST(I))	Show Docu	iment List U	pload	
Upload	Upload	Multiple Doc	uments								
opioud	oproud										

# Uploading a Document

- \* Click "Choose File" button.
- \* Browse to the file location and select the file.
- \* Click the "Open" button on the file dialog
- \* The filename will appear next to "Choose File" button.
- \* Click "Upload".

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Child Informa	tion	
Last Name:	Rizzo First Name: Franl	k DOB: 12/18/2016 Eligibility: 7/1/2019 - 8/31/2022
STACID:	CIN:	Edit

T 🚺 / IN	is PC 7 Excerbisk (cl) 7 EstiAcs 7 DE	neoocuments > Patricia sim	cox.	V 0 5	earch Patricia Simcox	
Organize - New folde	tr				100 <b>v</b>	
eSTACsDemoDo ^	Name	Date modified	Туре	Size		
Patricia Simcox	🔁 Birth Certificate	3/18/2019 1:43 PM	Adobe Acrobat D	93 KB		
SandyOlsson	🔁 Consent	3/18/2019 2:10 PM	Adobe Acrobat D	58 KB		
Webinars	🔁 EvalVerification	3/18/2019 2:02 PM	Adobe Acrobat D	466 KB		
a OneDrive	🔁 TRF Englsih refised 08-2018	3/19/2019 5:41 PM	Adobe Acrobat D	78 KB		
This PC						
3D Objects						
Desktop						
Documents						
Downloads						
Music						
E Pictures						
Videos						
Local Disk (C:)						
New Volume (D:						
TimsBackup (E:)						
T						

Child Information	00 RYDELL CSD			
Last Name: Rizzo STACID:	First Name: Frank CIN:	DOB: 12/18/201	16 Eligibility: Edit	7/1/2019 - 8/31/2022
Choose File Conse	nt.pdf		Upload	

# Uploading a Document

- Right had side shows the \* document being uploaded.
- \* If uploading the entire IEP, then check box "Enter **Details for Entire** Document".
- \* Choose document type.
- \* Choose correct school year and placement.

Enter Details for E Page 1 to 1	intire Document 🗹	≡ eSTACsFil	eHandler.ashx		1 / 11   - 100% +   1	: \$	
Document Type School Year Placement 07/05/2021-08/13	Serv : IEP				Blind Brook-Rye Union Free Scho 390 North Ridge Street Rye Brook, NY 10573-110	ol District 5	
Comments TEP	Medicaid : Medicaid Parental Consent Medicaid : Parent Refused Medicaid Consent Medicaid : Failed to obtain Medicaid Consent Medicaid : Parent Revoked Consent Foster Care : LDSS2999 Eval : Evaluation Justification Letter Eval : Justification For Eval Outside Eligibility Dates Trans : TAF Trans : Parent Acknowledgement Form Serv : Aide		Student: Address: Contacts: School Year: 2021-2022 Special Alerts:		Date of Birth: 12/22/2017 Age as of meeting date: 3:4 Native County: Westchester Interpreter Home/Mobile #: H: (914) 539-5147 M: (914) 420-6713 Home/Mobile #: H: (914) 539-5147 M: (914) 539-5147 Placement: Approved Preschool Special Education Program	Gender: Male Language: English Required: No Work #: Work #: School: Preschool Itinerant Services Only	ID #: 112201514 Email: Email: Grade: Preschool
	Serv : Nurse Serv : IEP		IEP INFORMATION		SUMMARY-SPECIAL EDUCATION PROGRAMS A	ND RELATED SERVICES	
OK Cance	Serv : Interpreter Serv : Summer Regression Justification Serv : Explanation for not having a STAC-5		Projected IEP Start Date: Projected IEP End Date: Projected Date of Annual Review: Projected Date for Reevaluation: Extended School Year: Behavior Intervention Plan: Supplementary Aids and Services: Assistive Technology: Supports for School Personnel: Testing Accommodations: Participate State/District Assessments: Soecial Transportation:	07/05/2021 06/25/2022 06/24/2022 03/18/2024 Yes No No No No No No No No No No No No No	Special Class in an Integrated Setting: 6:1+1 Speech/Language Therapy: Individual Occupational Therapy: Individual Physical Therapy: Individual Special Class in an Integrated Setting: 6:1+1 Speech/Language Therapy: Individual Occupational Therapy: Individual Physical Therapy: Individual	09/01/2021 - 06/24/2022 2 x 09/01/2021 - 06/24/2022 2 x 09/01/2021 - 06/24/2022 2 x 09/01/2021 - 06/24/2022 2 x 07/05/2021 - 06/13/2021 5 x 07/05/2021 - 08/13/2021 2 x 07/05/2021 - 08/13/2021 2 x	Weekly, 5hr. School Weekly, 30min. School Weekly, 30min. School Weekly, 30min. School Weekly, 5hr. School Weekly, 30min. School Weekly, 30min. School

## Documents for Aide / Nurse / Interpreter

- \* There are occasions when you will need to upload the Request For Reimbursement For Partial Aide/Nurse/Interpreter form.
- eSTACs will inform you when this form is needed when completing the Sign and Submit process.
- \* Go to the Aide/Nurse/Interpreter tab and click Print.
- \* Have form signed and upload form to eSTACs.

		<u> </u>											
CPSE: 112	806060000	RYDELL CSD											
Student Inf	ormation												
Last Name	Balmudo	First Name: Leo	DOB:		3/19/2017	Eligibility: 1/1/2	2020 - 8/31/202	2					
STACID:		CIN:	Student	Number:	500003971	8		Edit					
Placement	Information												
Session: Fr	om Date: 09	0/08/2021 To Date:	06/22/202	22									
Hrs/Day: 5.	00 Days/Wk	: 5 Aide/RN/LPN:											
Provider: F	RED S KEL	LER SCHOOL Pro	gram: 910	00									
	-		_		-								
Program	Aide /	Nurse / Interprete	er Re	lated Sei	rvices	Transportation							
•													
Туре		Sharing	Sta	art Date	End Date	Hours P	er Day	Days Per We	ek Submitted Date	Status			
Aide	Shared wi	th 3 other students	09/	08/2021	06/22/2022	2 5.0	0 5	j		Not Submitted	Edit	Delete	Print
~	ור		✓ 09/	08/2021	06/22/2022	2 5.00		5 🗸			Add		
	, I.C.												

### Comparison eSTAC to Paper Form

Program	Aide / Nurse / Interpreter	Related Ser	vices Ti	Transportation						
Туре	Sharing	Start Date	End Date	Hours Per Day	Days Per Week	Submitted Date	Status			
Aide 1	Shared with 3 other students 2	09/08/2021	06/22/2022	2 5.00 3	5 4		Not Submitted	Edit	Delete	Print
~	~	09/08/2021	06/22/2022	5.00	5 🗸			Add		

	REQUES Partial 1:1 AL	AC AND SPECIA T FOR REIME DE, 1:1 NURS	L AIDS UNIT BURSEMENT FOR E, 1:1 INTERPRETI	ER
	**FOR	PRESCHOO	L USE ONLY**	
STAC ID#	(if l	known)		
Student Name:	Balmudo, Le	eo .	Date of Birth:	03/19/17
Preschool Provider Name	FRI	ED S KELLER S	CHOOL	
Preschool Program Type/	Name:	9100		
Type of 1:1: Partial 1:1 A (check one)	Aide X 1:1	Nurse RN	1:1 Nurse LPN	1:1 Interpreter
Is this 1:1 Aide/Nurse	e/Interpreter Share	d? NO	YES X	
		If YES	, Number of Students Sha	ring the 1:1:3
1:1 AIDE/NURSE/INTE	RPRETERFO	R PRESCHOOL	EDUCATION:	
Start Date of 1:1 Aide/Nu	rse/Interpreter:	9 / 8 / 21	Projected End Date:	6 / 22 / 22
Hours Per Day Program F	Runs:	5.00		
Hours Per Day Student in	Program:	5.00	Days Per Week Studer	nt in Prog: 5
1:1 Aide/Nurse/Interprete	r Hrs/Day Reques	ted: 3 5.00	1.1 Days/Week Request	ted: 4 5

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## Signing and Submitting STAC-1

# Signing and Submitting

\* Once all information is entered from the IEP, you will now need to Sign and Submit the CB Placement.

CPSE: 6	61100010000 NEW	ROCHELLE						7				
Last Na STACID	Last Name:First Name:DOB:6/23/2016Eligibility:1/1/2019 - 8/31/2021STACID:CIN:Student Number:Edit SED Summary											
STAC	-5s Evaluation	Components	IEP Placements	IEP Mandates	Docume	ents Forms						
Schoo	ol Year Session All	Sessions	~									
Sch	ool Year Session	Placement	Descript	ion	Status	Submitted By	Submitted Date					
2020	- 2021 Summer	СВ	07/06/2020-08/14/2020	-9100(A)	Submitted	import	8/18/2020	Amend	Rescind	Print		Submission History
2020	- 2021 Winter	СВ	09/08/2020-06/25/2021	-9100(I)	Submitted	RS	12/21/2020	Amend	Rescind	Print		Submission History
2021	- 2022 Summer	СВ	07/05/2021-08/13/2021	-9100(A)	Amended			Amend	Rescind	Print	Sign and Submit	Submission History
2021	- 2022 Summer	SEITRS	07/05/2021-08/13/2021	RS (OT(I))	Submitted	RS	8/4/2021	Amend	Rescind	Print		Submission History
						ß						

### **Compare CB Placement to IEP**

\* Compare ALL of your entries on left side to IEP on right side. Do not sign & submit if not correct.

Student Name DOB 6/23/2016 STAC ID Student #			CPS	E District NEW ROCHELL County WESTCHESTER	E			é		≡	1 / 14	-	+	:	¢	Ŧ	ē	:
School Year: 2021 - 2022 Sumn	ner Placem	nent Type: CB	Provide	er:														
Show Rescinded				Print STAC-1														
Placements to Submit																		
Provider		From Date	To Date	Servic	е Туре	Frequency	Location											
1 Th 10		7/5/2021	8/13/2021	9100-A J/A-PRESCHOOL S	PECIAL CLASS OVER 2.	5 hrs/day	Classroom											
A 10 A		7/5/2021	8/13/2021	Occupational Therapy Indiv	2	2x30	Preschool		Γ	SUMMARY-SPECIAL EDUCATIO	N PROGRAMS AND	RELATED	SERVICES					
A (1) A(		7/5/2021	8/13/2021	Physical Therapy Indiv	3	1x30	Preschool			Special Class: 8:1+2		0	7/05/2021 - 08	/13/2021 5 x	Weekly 5hr	Special C	lass	
A 10 A		7/5/2021	8/13/2021	Speech Therapy Group	4	1x30	Preschool		2	Cocupational Therapy: Individual		0	7/05/2021 - 08	30i /13/2021 2 x	min. Weekly, 30min.	School		
a		7/5/2021	8/13/2021	Speech Therapy Indiv	5	2x30	Preschool		3	Physical Therapy: Individual	4	0	7/05/2021 - 08	/13/2021 1 x	Weekly, 30min.	School		
ALC: ALC: NO. 1		7/5/2021	8/13/2021	Transportation : Parent					4	Speech/Language Therapy: Small G	oup	Ő	7/05/2021 - 08	13/2021 1 x	Weekly, 30min.	School		
STACTION CPSEPortal.com	1																	



### **Amendments and/or Corrections**

eSTACs@CPSEPortal.com

## **CB** Amendments

CPSE determines	What to do			
An AIDE/RN/LPN should be added to the IEP				
An AIDE/RN/LPN should be removed from the IEP	End Placement and Create new placement with all			
The student should be in a different program (different provider, SC vs SCIS, half day vs full day etc.)	necessary details			
The student no longer needs a particular related service The student will no longer receive a type of transportation	End Placement detail by amending end date of detail			
The student needs an additional related service	-			
The student will get a new type of transportation service (No transportation -> bus, bus->Bus + Parent, Bus-> Bus + AIDE)	Add additional placement details as necessary			
There should be a change to a related service (change in frequency, change from individual to group, change location)	End Placement detail by amending end date of detail, then			
The child will change transportation (Bus->Parent, Parent->Bus)	-add new placement detail			

### **Corrections** Actions Needed to Correct Data in eSTACs by Field

Placement	Service	Requires Rescinding	Requires Rescinding					
Туре	Category	entire placement	single detail	Can correct data via amending				
	СВ	School Year Session Foster County Provider		Program (SC vs SCIS, half day vs full day) Start Date / End Date Hours Per Day / Days Per Week				
CP	AIDE		Type (AIDE/LPN/RN) Sharing	Hours Per Day Days Per Week				
CB	Related Service		Service Individual vs Group Frequency, Duration & Period	Start Date End Date				
	Transportation		Service (Bus, Parent, LPN, etc.) Provider	Start Date End Date				

### Corrections

#### Actions Needed to Correct Data in eSTACs by Field

		Cente	er Based (CB)		SEIT and/or F	Related Services
	CB	AIDE/RN/LPN	Related Service	Transportation	SEIT	Related Services
School Year	<b>Rescind Entire</b>				Rescind Entire	
Session	Placement				Placement	<b>Rescind Entire Placement</b>
Foster Care	<b>Rescind Entire</b>				Rescind Entire	
County	Placement				Placement	<b>Rescind Entire Placement</b>
	<b>Rescind Entire</b>				Rescind Entire	
Provider	Placement				Placement	Rescind single detail
					Rescind Entire	
Program	Amend				Placement	
Sharing (AIDE)		Rescind single detail				
Service		Rescind single detail	Rescind single detail	Rescind single detail		Rescind single detail
		Resente single detail	Resenta single actai	Resente single detail		Reserved Single detail
Start Date	Amend		Amend	Amend	Amend	Amend
End Date	Amend		Amend	Amend	Amend	Amend
Hours Per Day	Amend	Amend				
Days Per Week	Amend	Amend				
Ind. Vs Group			Rescind single detail		Rescind single detail	Rescind single detail
Frequency			Rescind single detail		Rescind single detail	Rescind single detail
Duration			Rescind single detail		Rescind single detail	Rescind single detail
Period			Rescind single detail		Rescind single detail	Rescind single detail
Location			Amend		Amend	Amend



## Closing

## Erie County Timeline

#### \* July 1, 2022:

\* School districts will enter all 22/23 STAC-5's into eSTACs, this includes any 21/22 school year entries and/or amendments.

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 ALL students that are currently in Erie County Preschool database into eSTACs.

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## **Upcoming Webinars**

#### eSTACs Entering STAC-1 Center Based & Center Based Related Services:

- Tuesday, July 12th @ 10:00AM
   https://attendee.gotowebinar.com/register/8584417665478512909
- Tuesday, July 19th @ 10:00AM
   https://attendee.gotowebinar.com/register/3179885906889969935
- Wednesday, July 20th @ 2:00PM
   https://attendee.gotowebinar.com/register/1138429264668073228
- Tuesday, September 7th @ 2:00PM Refresher
   https://attendee.gotowebinar.com/register/5429665917715199504

## **Upcoming Webinars**

#### eSTACs Entering STAC-1 SEIT and Related Services:

- Tuesday, July 26th @ 10:00AM
   https://attendee.gotowebinar.com/register/8161132077064528912
- Tuesday, August 2nd @ 10:00AM https://attendee.gotowebinar.com/register/4635198397903171854
- Thursday, August 4th @ 2:00PM https://attendee.gotowebinar.com/register/26849397266125836
- Thursday, September 8th @ 10:00AM Refresher https://attendee.gotowebinar.com/register/7889253637841194765

# Upcoming Webinars

#### eSTACs Amending versus Rescinding:

- Tuesday, September 20th @ 10:00AM
   https://attendee.gotowebinar.com/register/4180764744585408784
- Wednesday, September 21st @ 2:00PM

https://attendee.gotowebinar.com/register/4525007541590938896

## Getting Support

- \* If you need help you can contact Kelly Knowles at Kknowles@jmcguinness.com
- \* After you are familiar with the Portal, and you need help, send an email to eSTACs@CPSEPortal.com.
- \* Please include your district name, which County you work with and a description of your issue.
- \* If you would like to speak on the phone, please state so in your email along with your phone number and best times to reach you.