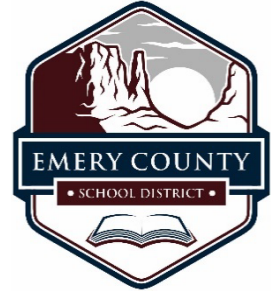


Emery County School District



Policy: FDH—~~Kindergarten~~ Student Toilet Training

Date Adopted: 11 December 2024

Current Review / Revision: **First Reading December 10, 2025**

Definition of “Toilet Trained”—

“Toilet trained” means that a child can:

1. Communicate the need to use the bathroom to an adult;
2. Sit down on a toilet;
3. Use the toilet without assistance;
4. Undress and dress as necessary; and
5. Tend to personal hygienic needs after toileting.

If an accident occurs, a toilet trained child can independently tend to hygienic needs and change clothes. A child is not toilet trained if the child **does not meet these standards or** has accidents with sufficient frequency to impact the educational experience of the child or the child’s peers, as determined by the District.

[Utah Code § 53G-7-203\(6\) \(2025\)](#)

[Utah Admin. Rules R277-631-2 \(J2025\)](#)

Toilet Training Requirement for ~~Kindergarten~~ **School** Enrollment—

A student may not be enrolled in ~~kindergarten~~ **school** unless the student is toilet trained. **However, the student shall be enrolled if** the student’s lack of toilet training results from a condition **that is subject to federal child find requirements or is** addressed by an Individualized Education Program (IEP) or Section 504 Plan **that includes toilet training as a component**. Prior to enrollment, the parent of each student to be enrolled shall provide assurance to the District that the student is toilet trained using the Confirmation of Toilet Training form contained in this Policy.

[Utah Code § 53G-7-203\(6\)\(a\), \(d\) \(2025\)](#)

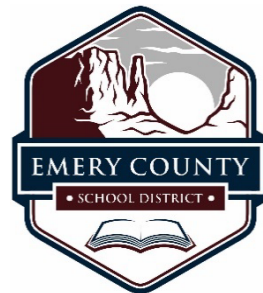
[Utah Admin. Rules R277-631-3\(1\), \(2\) \(2025\)](#)

Addressing the Needs of Students Who are Not Toilet Trained—

When a ~~kindergarten~~ student is determined to not be toilet trained, the District shall:

1. consider whether the student’s delay in toileting capability may be a sign of a disability that could impact the student’s education and if appropriate shall conduct an initial evaluation under IDEA;
2. Refer the student and the student’s parent to a school social worker or counselor:
 - a. To provide additional family supports and resources; and
 - b. To create an individualized plan to address the student’s needs;
3. Establish the circumstances, if appropriate, under which a parent or a parent’s adult designee may aid in toilet training; and
4. Coordinate with appropriate District personnel and parents to reintegrate the student, as appropriate, once the student has become toilet trained.

Previous Revision: 4 February 1998



ECSD KINDERGARTEN CONFIRMATION OF TOILET TRAINING

I am the parent of _____ (name of prospective kindergarten student). I understand that toilet training (as defined below) is a precondition for my child to be enrolled in kindergarten school unless my child's delay in toileting is a result of a condition **that is a disability or** is addressed in an Individualized Education Program (IEP) or a Section 504 Plan **that includes toilet training as a component.**

"Toilet trained" means that a child can do all of the following:

1. Communicate the need to use the bathroom to an adult;
2. Sit down on a toilet;
3. Use the toilet without assistance;
4. Undress and dress as necessary;
5. Tend to personal hygienic needs after toileting; and
6. If an accident occurs, independently tend to hygienic needs and change clothes.

Select one of the following:

___ I confirm that my child is toilet trained, as that is defined above.

___ I confirm that my child is not toilet trained, as that is defined above, but this is because of a condition that is addressed in an existing IEP or Section 504 Plan for my child.

___ I confirm that my child is not toilet trained, as that is defined above, but I believe this is or may be because of a disability of some kind and I would like the District to evaluate whether an IEP or Section 504 Plan may be appropriate.

I declare under criminal penalty under the law of Utah that the foregoing is true and correct.

Signed on the ___ day of _____, ___ at _____
(Day) (Month) (Year) (City or other location and state or country)

Printed Name _____

Signature _____

