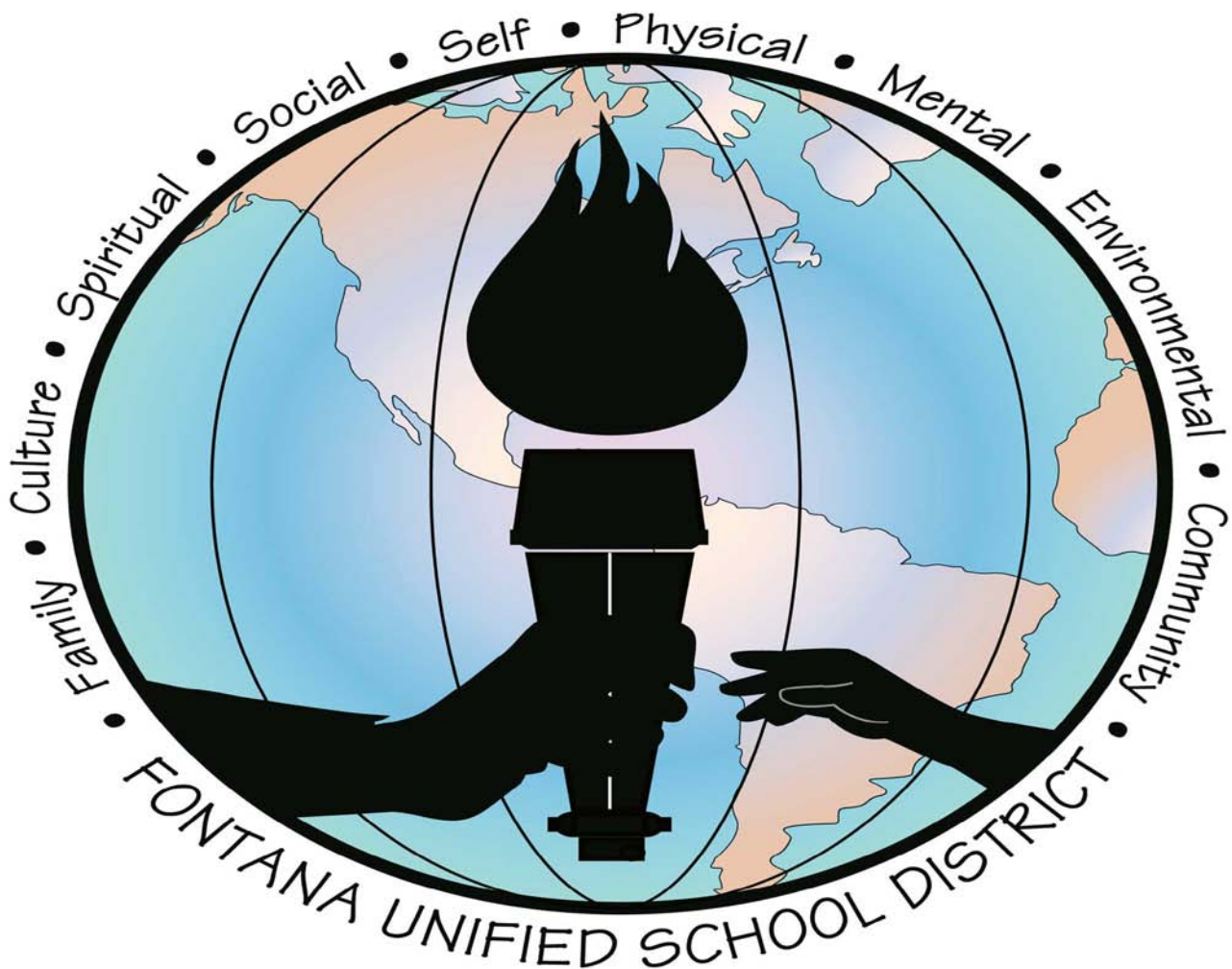


# FONTANA UNIFIED SCHOOL DISTRICT (SELPA)

## IEP MANUAL WRITING IEPs FOR EDUCATIONAL BENEFIT



August 2009

## **Introduction**

The Fontana Unified School District (SELPA) developed this IEP Manual: Writing IEPs for Educational Benefit as a resource to special education teachers and site administrators. The development of an individualized education program (IEP) is a team process that follows a series of steps for success. Although the forms are standardized, the completion of these forms is individualized to each student. Following the procedures outlined in this IEP Manual guides IEP Team members to decisions regarding the provision of a free and appropriate public education (FAPE) for each student with a disability in the least restrictive environment (LRE). The completed IEP forms are also used to track compliance and collect other data required for CASEMIS reporting. For these reasons, it is vital that procedures be carefully adhered to throughout all levels of the reporting and data collection processes.

The Fontana Unified School District (SELPA) documents used to complete the IEP process were developed to meet the legal requirements of the Individuals with Disabilities Education Improvement Act (IDEA). The IEP Manual contains step-by-step directions to help complete new IEP forms and ensure compliance with federal and state regulations. As IDEA periodically goes through reauthorization, revisions of these forms may take place to incorporate the new laws. The IEP forms will also be periodically evaluated and changed in response to demands from the California Department of Education.

Because the special education procedures are a **legal process**, it is important to understand (1) Notice of Procedural Safeguards, (2) when IEP Team meetings are required, and (3) special education timelines.

### **IMPORTANT – NOTICE OF PROCEDURAL SAFEGUARDS**

All special education staff members and administrators should be familiar with the content of the **NOTICE OF PROCEDURAL SAFEGUARDS**. Prior to beginning an IEP meeting, give parents a copy and an explanation (if needed). The notice should have been sent with the Notice of Meeting or the Assessment Plan. Use an IEP TEAM MEETING PAGE to document that you reviewed the “Rights” at the meeting.

### **IEP TEAM MEETINGS NEED TO BE SCHEDULED WHEN:**

- Initial formal assessment
- 30-Day placement of student with an active IEP from another district
- Any reevaluation of a student (including Triennial Review) is conducted
- Student does not demonstrate anticipated progress his/her annual goals and/or in the general curriculum
- The annual review is due to discuss student progress, present levels, transition planning (when appropriate), new goals, special factors, and the student’s educational placement/services for the upcoming year
- A parent or teacher requests a meeting to develop, review, or revise the IEP
- New information is received or other matters related to the IEP arise

## Tips for Writing IEPs

When considering how to write compliant IEPs, case carriers should pay particular attention to the following so that they can

### ***“Hit the Target – Every Time!”***

- Provide parents with a copy of the Notice of Procedural Safeguards.
- Provide the **CONFERENCE NOTICE** to the parents early enough to ensure opportunity to participate.
- Document all attempts to notify the parents of the IEP meeting. If the parent does not participate in the IEP meeting after the third attempt to invite, the IEP meeting may be held and the **MEETING HELD WITHOUT FORM** will be sent home with the completed IEP. You must follow up to ensure parental response is received.
- Convene the IEP team meeting within legal timelines to allow for timely development of the IEP. Better yet, convene the meeting early to avoid missing the timeline if a team member is unable to attend at the time you schedule. The timeline requirements are:
  - within 60 days of the receipt of the parent’s consent to an Assessment Plan
  - within 30 days of an interim placement
  - within 365 days of the last annual review
- Include **ALL** appropriate staff and other personnel in the IEP Team meeting.
- Develop the IEP based on a proper evaluation.
- Utilize an IEP agenda to ensure **ALL** elements of the IEP are discussed during the IEP meeting.
- State how the student’s identified disability affects involvement and progress in general curriculum or, for preschoolers, how the disability affects the student’s participation in appropriate activities.
- Document the student’s present levels of academic achievement and functional performance.
- Include transition services for student’s age 16 and older, focusing on the student’s post secondary goals and interagency responsibilities.
- Explain to the student and parents that rights transfer to the student at the age of majority (18) on or before the student’s 17<sup>th</sup> birthday.
- Write measurable annual goals based on state standards for students using the core curriculum.

- Write measurable annual goals and short-term objectives for students using an alternative curriculum.
- Notify the parents how the student's progress toward annual goals will be measured and how the parents will be regularly informed of such progress. The reports on progress should be at least as often as parents of non-disabled students. This is especially important to help keep parents informed on how their child is doing in regards to meeting the graduation requirements.
- Consider and document special factors such as need for assistive technology devices and services; low incidence disabilities (visual impairment, deafness, orthopedic impairment, deaf/blindness, hard of hearing) services, equipment, or materials; English learner status; and/or behavioral supports.
- Describe how the student will be involved in state and district wide assessment, including any accommodations/modifications to be provided in the administration of the tests.
- Consider least restrictive environment (LRE), including an explanation why the student **will not participate** in the general education classroom with non-disabled peers if removal from the general education setting is recommended.
- Determine the supplementary aids, services, program accommodations/modifications, and/or supports to be provided for the student or school personnel; include the start/end date, frequency, duration, and location.
- Identify all special education and related services required to provide FAPE, as determined by the IEP Team. The services must include the start/end date, provider, anticipated frequency, duration and location.
- Identify need for special education and related services during extended school year (ESY).
- Provide a clear offer of **FAPE** only after considering the student's present levels, goals, and special factors. Document services, provider, setting, involvement of other agencies, activities to support transition, and graduation plan.
- Address **EVERY space or blank on the IEP forms** that fully enumerate all of the required components of the IEP.
- Be sure that all participants print name and parents sign the IEP.
- Communicate the agreed upon IEP to everyone involved in its implementation.
- Implement all services included in the IEP in accordance with timelines.

# **Strategies for Conducting Successful IEP Meetings**

## **ORGANIZATION OF THE IEP**

*The IEP meeting, while allowing time for presentation of assessment data, should concentrate on development of the educational plan. Organization, advance planning, and effective meeting management can assist the team to stay focused on this goal and keep the time required to complete the meeting at a minimum.*

The case manager is responsible for much of the IEP organization. This includes activities such as scheduling the meeting; notifying all team members of the scheduled meeting, including the general education teacher; arranging to hold the meeting in a comfortable location; and collecting work samples, completed reports and other required IEP documents from team members prior to the meeting.

The case manager is responsible for facilitating the meeting. This includes introducing everyone, establishing rapport, explaining the purpose of the meeting, setting the agenda, and organizing the presentation of data. The information included herein on selecting an IEP Meeting Agenda, tips for writing successful IEPs, and strategies for conducting IEP meetings are useful references.

*Whenever the team anticipates that an IEP meeting will be particularly difficult, the special education director or special education coordinator should be notified.*

## **CONDUCTING AN IEP MEETING**

*A few minutes of preparation can increase the effectiveness of the IEP meeting. Prior contact with the parent greatly reduces parental anxiety (and your own). Preparation includes the following:*

- Establishing the objectives of the meeting
- Reviewing cumulative data on the student
- Preparing graphically-presented data
- Discussing/reviewing case with assessment team members
- Preparing draft IEP papers
- Recording available assessment data, preparing draft goals and objectives

## **INTRODUCTIONS/OVERVIEW**

*Introductions and an overview are important to provide the working framework*

- The meeting should have a clear starting point beginning with a statement of the purpose of the meeting and desired outcomes.
- The approximate length of the meeting should be reviewed and any time constraints mentioned.
- Team members introduce themselves, tell their role and describe the degree of contact they have had with the student.
- The case carrier briefly reviews the format of the meeting.
- The case carrier provides background on the student.
- The parents are reminded that their input is essential.

## **ORGANIZATION**

- The case carrier needs to facilitate the meeting.
- The case carrier is the overseer of the meeting, preventing personal attacks, keeping the group focused on the task at hand, watching the time, stopping filibusters, reading body language, etc.

## **SHARING INFORMATION**

- Approach the parents in a non-threatening manner
- Show your interest in the student.
- Solicit input from the parents.
- Start with the student's strengths.
- Show respect for the parent's opinion.
- Avoid being an authoritarian.
- Speak in a "lay person's" vocabulary.
- Avoid the use of educational jargon.
- Remember the purpose of interacting with parents.
- Avoid using exact grade equivalents in reporting test scores; percentile scores, if properly explained, are often the least misinterpreted.
- Be prepared to discuss concrete expectations in all academic areas.
- Be positive!
- Be alert to non-verbal body language.

## **CONCLUSION**

- Eligibility and impact of disability.
- Present levels of performance.
- Transition plan.
- Annual goals.
- Special factors (assistive technology, transportation, low incidence, etc.)
- Services.
- Educational setting
- Review IEP team meeting comments.
- Obtain signatures and parental consent.
- Distribute copies of the IEP to parents and all service providers at end of meeting.
- Thank everyone for their participation.

## Completing the IEP Forms

NOTE: How to complete the following IEP forms follows:

- Form 1: Individual Education Program
- Form 2: Eligibility Criteria
- Form 3: Present Levels of Academic Achievement & Functional Performance
- Form 4: Special Factors
- Form 5: Statewide Assessments
- Form 6: Annual Goals and Objectives
- Form 7: Accommodations & Modifications
- Form 7a: Accommodations & Modifications (Cont)
- Form 8: Offer of FAPE - Services
- Form 9: Individual Transition Plan
- Form 10: IEP Team Meeting Notes
- Form 11: Signature and Parent Consent

***NOTE: At the top of the first page on the cascading forms, you MUST unlock the form so you can type the Last Name, First Name, Birthdate, ID #, and IEP Date. After you have done that, RE-LOCK the form to continue. If you use the single pages, you will have to put the heading on every page.***

# Individual Education Program – Form 1

**SPECIAL EDUCATION PLAN:** Make selection from drop down box.

## **TIMELINE INFORMATION:**

**1<sup>ST</sup> Entered Special Education:** Enter date student **first** started to receive special education services.

**Next Annual:** Enter the next IEP date that will be one year from the present date.

**Next Triennial:** Enter date when the next triennial evaluation is due; three years from last triennial.

## **PURPOSE OF MEETING:**

**Initial** means the first IEP meeting to determine if a student meets eligibility requirements.

**30-Day Review** means if the child has an IEP and transfers into a district from another district.

**Annual** means a yearly meeting that is held for a student in order to review the student's program and progress and to write a new IEP for the upcoming year; this meeting **MUST** be held within 365 days from the last IEP meeting.

**Triennial** means a meeting to review the results of the three-year assessment and develop a new IEP.

**Transition** means transition from infant to preschool, preschool to kindergarten, elementary to middle, middle to high school, high school to transition placements, from public school setting to NPS.

**Pre-Expulsion** means an IEP meeting that is being held as part of or following a manifestation determination.

**AB 2726** means an IEP is being held to discuss counseling services and/or referral for the student.

**Parent Request** means that parents have asked for an IEP meeting to discuss a variety of issues.

**Behavior Support** means an IEP is being held to discuss behavior issues and interventions to help support the student.

**Manifestation Determination** means an IEP meeting that is being held as part of the discipline procedures when a student reaches 10 or more days of suspension and/or is being considered for the expulsion process.

**Change of Placement** means an IEP meeting in which the IEP Team will discuss possibly changing the location, type, or the amount of special education services the student receives.

**Exited from Special Education:** Make selection from drop down box.

**Exit from LSH only** means that speech or language services have terminated.

### **STUDENT INFORMATION & STUDENT RESIDENCY:**

**Grade:** Enter the appropriate grade designation for the student at the time of the IEP meeting.

**Gender:** Enter selection from drop down box. (Male or Female)

**Residential Status:** Indicate the student's residential status (who the student lives with). Make selection from drop down box.

**Educational Rights:** Identify the person who is able to make educational decisions and provide consent to the IEP on behalf of the student. Make selection from drop down box.

**Ethnicity/Race:** Check either *Hispanic or Latino* or *Not Hispanic or Latino*. If you checked *Hispanic or Latino*, do not check the race(s) box. If you checked *Not Hispanic or Latino*, than check one or more of the races. **NOTE:** This should be the ethnicity designated by the parent on the student enrollment form at the school site.

### **PARENT/GUARDIAN:**

Enter the contact information for the parent/guardian. If the student has reached the age of majority (18), use the drop down box and select, "Student has reached the age of majority." Put adult student's Home Address and contact numbers.

### **ENGLISH LANGUAGE LEARNERS:**

**Native Language:** Make selection from drop down box. Identify the student's home language or birth language.

**Language Proficiency:** Check if the student is an English Learner or has been redesignated.

**Migrant:** For district's purpose, always check NO.

### **DISTRICT & SCHOOL SETTING:**

**District of Residence:** Enter the student's district of residence. Make selection from drop down box.

**School of Residence/Home School:** Enter the student's neighborhood school (Home School). Make selection from drop down box.

**School of Placement:** Identify the school where the student will receive recommended services. Make selection from drop down box.

**School Type:** Make selection from drop down box.

**Federal Preschool Setting (ages 3-5):** Indicate the type of school setting the student attends. If the student turns 6 years old after December 2 of the current year, this category is completed. *If the student is dually or concurrently enrolled in general education and a special education program for an equal amount of time, consider the student as being in a regular early childhood or kindergarten program.* Make selection from drop down box.

**Federal Setting (ages 6-22):** Indicate the type of school setting the student attends. If the student turns 6 years old on or before December 2<sup>nd</sup> of the current school year, this category is completed. Make selection from drop down box.

### **TRANSPORTATION:**

Check for Special Education. Specify the type (door to door, curb to curb, wheelchair bus, etc.). Make selection from drop down box.

### **GRADUATION PLAN (grade 8 and above):**

This needs to be done for students in grade 8 and higher. NOTE: The IEP Team must use caution when determining if the student will be working towards a diploma or a certificate of completion. Students must have the opportunity to work toward a diploma if he/she has the ability to do so. This must be considered on an annual basis.

### **PERCENT OF TIME IN GENERAL EDUCATION:**

Document the percentage of time the student is IN the regular education environment. Consider the full day including lunch, recess, passing periods, etc.

### **INTERPRETER:**

Check if an interpreter is needed at the IEP meeting.

### **WRITTEN TRANSLATION REQUIRED:**

Check if this IEP needs to be translated per parent(s) request.

### **REGULAR EDUCATION DIPLOMA STATEMENT:**

Make sure you inform parent(s) about the CAHSEE.

## Eligibility Criteria – Form 2

### PRIMARY & SECONDARY DISABILITIES:

**Disability:** Make selection from drop down box. Indicate primary disability and any secondary disabilities. The primary disability should be the one that has the most significant impact on the student's ability to access the general education environment. **Note: For funding purposes, low incidence disabilities marked as secondary will generate low incidence funding.** (HH Hard of Hearing, DEAF Deafness, VI Visual Impairment, OI Orthopedic Impairment, DB Deaf-Blindness)

**NOTE:** If disability is Multiple Disabilities, list what those disabilities are.

**Severe or Non-Severe:** 56030.5. "Severely disabled" means individuals with exceptional needs who require intensive instruction and training in programs serving pupils with the following profound disabilities: autism, blindness, deafness, severe orthopedic impairments, serious emotional disturbances, severe mental retardation, and those individuals who would have been eligible for enrollment in a development center for handicapped pupils under Chapter 6 (commencing with Section 56800) of this part, as it read on January 1, 1980.

### FOR INITIAL PLACEMENTS ONLY

**NOTE: Review Results of Evaluation to Determine Eligibility for Special Education Services, if this is an initial or triennial meeting. Consider evaluation results in all areas of suspected disability.**

1. **Has the Student Received Pre-Referral Early Intervening Service in the Past Two Years:** Pre-Referral Early Intervening Services are coordinated interventions for students not currently identified as requiring special education who needs additional academic and behavior support to succeed in a general education environment. They include educational and behavioral evaluations, services and supports including scientifically based literacy instruction. If the student received pre-referral early intervening services during the past two years, check YES, otherwise, check NO.

### ***MUST HAVE THIS INFORMATION***

2. **Date of Initial Referral for Special Education Services:** Enter the date of the initial referral to assess and determine eligibility for special education services (3-22).

3. **Person Initialing the Referral:** Identify the person initialing the referral (Parent, Teacher, SST, Other School/District Personnel, Other).
4. **Date District Received Parent Consent:** Enter the date the district received signed parental consent for initial evaluation.
5. **Date of Initial Meeting to Determine Eligibility:** Enter the date of IEP Team meeting to review initial evaluation and determine eligibility for special education.

**BASIS FOR DETERMINATION OF ELIGIBILITY (This information will carry over every year in the IEP)**

Check box if multiple measures were used for basis of determination.

**Relevant behavior related to academic functioning:** Document the relevant behaviors observed that are related to academic functioning herein and/or check that they are within the psychoeducational report. These behaviors must be observed by someone other than the classroom teacher (e.g. school psychologist)

**Educationally relevant medical findings:** Document any relevant medical findings that the family shares or is determined through the assessment process.

**The student has a Specific Learning Disability:** Check YES or NO to whether the student has a specific learning disability.

**SPECIFIC LEARNING DISABILITY**

**NOTE: If team determines student has a specific learning disability, complete the SPECIFIC LEARNING DISABILITY portion.**

**Eligibility:** Using the results of the assessment, the IEP Team determines if the student has a severe discrepancy between their intellectual ability and achievement. If the student does, this will be documented by checking the appropriate boxes.

**Processing Disorder:** If a processing disorder was identified through the assessment, check the appropriate boxes to indicate in which area(s) the processing deficit exists.

**Eligibility Criteria:** Check the appropriate boxes.

**Describe how the student's disability affects involvement and progress in the general curriculum:** Write a statement which describes the disability and its impact, i.e. "auditory processing deficits adversely impact the student's ability to complete activities within the general education curriculum without support", "significant speech and language deficits interfere with the student's ability to interact with other students in the preschool setting", etc.

## **Present Levels of Academic Achievement & Functional Performance – Form 3**

**Strengths/Preferences/Interests:** Identify student's strengths, preferences/interests.

**Parent(s) Concerns related to Educational Progress:** This information **MUST** be discussed and written **AT THE IEP MEETING**. Also, ask parent the question **AT THE IEP MEETING**.

### **ACADEMIC & FUNCTIONAL SKILLS:**

- 1. Reading/Writing/Math:** In the areas of Reading, Writing, and Math, summarize the development, academic and/or functional skills, including the student's performance in the classroom, levels of mastery of the California content standards, progress in the curriculum, etc.
- 2. Health:** Describe pertinent medical information that relates to the student's educational progress including medications and diagnosis. Also, include hearing and vision information. If none, indicate "no concerns at this time."
- 3. Communication Development:** For the student with identified areas of need in communication. Describe the student's articulation, voice, fluency, and/or language needs. If none, indicate "no concerns noted at this time."
- 4. Gross/Fine Motor Development:** For a student, who has been identified with motor development concerns. Describe his or her specific skills and/or needs. If none, indicate "no concerns at this time."
- 5. Vocational:** Include strengths, interests, and needs related to pre-vocational/vocational skills. Address traits, such as work habits, initiative, and completion of classroom or school site jobs.
- 6. Adaptive/Daily Living Skills:** For the student with needs in self-help, specify skills such as dressing, toileting, feeding, etc. If no concerns are noted indicate "age appropriate."
- 7. Social Emotional/Behavior:** Describe the student's social/emotional/behavioral strengths and/or needs. Do not leave blank.

### **STATEWIDE ASSESSMENTS RESULTS:**

Scores reflecting the student's performance on state and district assessments may be gathered prior to the meeting. Review results of the most recent assessments with the parents.

- California Standards Test (CST)
- California Modified Assessment (CMA)
- California Alternate Performance Assessment (CAPA)
- CELDT
- CAHSEE
- District Assessment Data. Examples BSC on Language Arts or FFB on Algebra, etc.

**California High School Exit Exam:** Enter the most recent date and score on the ELA and Math section of the CAHSEE and indicate if the student passed or failed. If the student is not eligible to take the CAHSEE due to age or program enrolled in, check “Not Taken.”

## **Special Factors – Form 4**

**Low Incidence:** This applies only to the students with the following eligibility categories: **DB, VI, OI, HH, and Deaf**. Low incidence equipment is indicated only if it is required to meet specific educational needs. If YES, specify the type of services, equipment, and/or materials needed. If no, select “N/A” from drop down box.

**Assistive Technology:** Identify if the student requires assistive technology devices and/or services to meet educational goals and objectives by marking Yes or No and explain your rationale. If Yes, specify the type of devices, services, equipment, and/or materials needed. If no, select “N/A” from drop down box.

**Blind or Visually Impaired:** Indicate whether instruction in Braille will be provided, and if not, why not. If the student will not be using Braille, indicate if he/she will use large print text or other modified input. If the student does not have a blind or visual impairment, select “N/A” from drop down box.

**Deaf or Hard of Hearing:** If the student is Deaf or Hard of Hearing, consider the student’s language and communication needs, opportunities for direct communications with peers and professional personnel in the student’s language and communication mode, academic level, and full range of needs including opportunities for direct instruction in the student’s language and communication mode. If the student is not deaf or hard of hearing, select “N/A” from drop down box.

**English Language Learner:** Specify how student’s level of English proficiency, related to the IEP, will be addressed including instructional strategies that will be used to support the student’s acquisition of English. If the student is not an English Language Learner, select “N/A” from the drop down box.

**Student Will Not Participate in the Regular Education Environment:** Document the regular education environments where the student will not participate with typically developing peers: Provide rationale for non-participation.

### **BEHAVIOR INFORMATION:**

Check yes or no to indicate if the student's behavior impedes learning of self or others. Also, check if IEP goal is included in the IEP.

Indicate if a Manifestation Determination has been completed and date. Indicate number of attendance entries, behavior entries, and suspension days.

Check Yes or No if a Behavior Support Plan or Positive Intervention Plan is attached to the IEP.

### **PHYSICAL EDUCATION:**

Indicate the appropriate amount of minutes. Remember, per Education Code, student in Grade 1 through 6 must receive 100 minutes per week and Grade 7 through 12 must receive 200 minutes per week.

**Regular PE:** Movement activities taught by a general education teacher and may include accommodations, adaptations, or modifications which are made by the general education PE teacher.

**Adapted PE:** Movement activities taught by an adapted PE teacher to a certain population.

**Specialty Designed PE:** Physical education programming for a special education class that requires minimal or limited adaptations, accommodations, or modifications, and is taught by the person, general or special educator, who normally teaches a physical education for this population.

### **ACTIVITIES TO SUPPORT OTHER TRANSITION:**

If the student is going through a transition (e.g., preschool to kindergarten, special education to general education, home to school, etc.), document the activities that will be completed to support a smooth transition.

### **OUTSIDE AGENCIES:**

Check which agencies the student receives services. If student is a Behavioral Health client, you MUST invite a therapist.

## **Statewide Assessments – Form 5**

**Participation in State-Wide Assessment Program (STAR):** Indicate how the student will participate in STAR.

**NOTE: THE IEP TEAM MAY NOT WAIVE STATE ASSESSMENTS.**

**The State Testing and Reporting (STAR) include the California Standards Test (CST), California Modified Assessment (CMA), and the California Alternate Performance Based Assessment (CAPA). The IEP Team must determine which test will be the most appropriate for the student to take. If the student is taking CMA or CAPA, the IEP Team must have reviewed the criteria for taking the alternate assessment.**

**Specify any accommodations or modifications the student may need to participate in statewide and district wide assessments, including writing proficiencies, physical fitness tests, etc.**

**NOTE: Do not put parent exemption on the IEP form as a reason that the student will not participate in statewide assessments. The IEP Team must address how the student would participate even if there is a parent exemption. The parent must file the exemption with the school site according to the district procedures for all students.**

**Outside of testing range:** Check this box to indicate that the student is below grade 2 or above grade 11 and therefore is exempt from the STAR.

**California Alternate Performance Assessment (CAPA):** If the student has a significant cognitive impairment, indicate the CAPA Level that is most appropriate to measure student progress. If the student is taking the CAPA, document why the student cannot participate in the CST/CMA. Also, state why participation in the CAPA is appropriate.

**Desired Results Developmental Profile (DRDP):** For children age 3, 4 & 5 not yet in kindergarten. If the child is at the developmental level of 3 years or below, the IEP Team should recommend the DRDP Access.

## Annual Goals and Objectives – Form 6

### NOTE:

- Annual goals and objectives must be measurable, and at least one annual goal must be written for each area of identified need.
- If English Language Learner, goals must address English language development.

**Area of Need:** Indicate the area of need for each goal developed. These areas of need should match the “areas of need” on the Present Levels Page. (i.e., math, reading, writing, vocational, attendance, behavior etc.).

**Baseline:** Specify the student’s baseline performance. The baseline should describe the child’s current performance on the skills identified in the goal. Use a brief statement. The baseline should be a quantifiable description of classroom performance in the specified area (i.e.; reads 20 sight words, writes a simple paragraph of 2-4 sentences, etc.).

**Measurable Annual Goals:** Enter the number of the annual goal. Annual goals must be measurable and relate to the baseline data.

Goals MUST include:

- |                           |  |
|---------------------------|--|
| * Who                     | student  |
| * Does What               | observable behavior (will add single digit numbers)      |
| * When                    | by reporting date  |
| * Given What              | conditions (when given a paragraph to read)              |
| * How Much                | mastery, criteria (90% accuracy, 3 consecutive days)     |
| * How Will It Be Measured | performance criteria (as measured by teacher assessment) |

**Enables Student to be Involved and Progress in the General Curriculum:** Select if the goal the student is working on is written to standards. Document the number that corresponds with the state standard being addressed. First consider standards at the student's chronological grade level. Also, consider pre-requisite skills, levels of the cognitive domain, accommodations, modifications, and assistive technology.

**Linguistically Appropriate (LEP 1 & 2 only):** Select if the goal supports English Language Development for English Language Learners.

**Person(s) Responsible:** List the title of the person(s) responsible for assisting the student to meet this goal.

**Short-Term Objectives:** Objectives should be written in the same format as the annual goal. Each objective should break down task and/or skills leading to meeting the goal.

**NOTE:** *Listing parent is not an appropriate option as Person(s) Responsible for implementing an academic goal.*

**Progress Report:** Document the date and comments of the progress. Comments should be brief regarding the student's progress towards this goal (i.e.; homework needs to be turned in; attendance is poor; behavior concerns, student progressing towards goal, etc.)

## Accommodations/Modifications – Form 7 & 7a

**ALL**: All students may be provided these test variations: (If student is receiving one or more of these test variations, you do not have to include this form in the IEP.

1. Test administration directions that are simplified or clarified (does not apply to test questions)
2. Student marks in test booklet (other than responses) including highlighting
3. Test students in a small group setting
4. Extra time on a test within a testing day

### **TEST VARIATION (1):**

Students may have these testing variations if regularly used in the classroom.

### **ACCOMMODATION (2):**

Eligible students shall be permitted to take the examination/test with **accommodations** if specified in the eligible student's IEP or Section 504 Plan and used regularly in the classroom.

### **MODIFICATION (3):**

For the **STAR** Program and **CELDT**, eligible students shall be permitted to take the tests with **modifications** if specified in the eligible student's IEP or Section 504 Plan and used regularly in the classroom. Students who use a modification on any STAR examination **shall not** be included in the participation calculation for Adequate Yearly Progress (AYP) and shall receive a score of 200 and a ranking of Far Below Basic for the purpose of calculating the Academic Performance Index (API). Eligible students shall be permitted to take the **CAHSEE** with **modifications** if specified in the eligible student's IEP or Section 504 Plan and used regularly in

the classroom. Appropriate state documentation must be completed and submitted to the SELPA Director and submitted to Board of Education for approval. **Accommodations** do not fundamentally alter or lower expectations or standards in instructional level, content, or performance criteria. **Modifications** fundamentally alter or lower expectations on assignment.

## **Offer of FAPE (Services) – Form 8**

*NOTE: Special education and related services are determined at the IEP meeting only after goals (and if appropriate, objectives have been finalized. Decisions regarding placement/services must be made in conformity with the least restrictive environment (LRE) provisions. These provisions direct that to the maximum extent appropriate, students with disabilities be educated with typically developing peers, and that special classes, separate schooling or other removal of students from the general educational environment occurs only if the nature or severity of the disability is such that education in general education classes with the use of supplementary aids and services cannot be achieved satisfactorily. The placement must be made in the school that the student would attend if the student did not have a disability unless unique circumstances prevent this placement. Special education and related services and supplementary aids and services, should be based on peer-reviewed research to the extent practicable.*

**Service Delivery Options Considered:** Discuss and document service delivery options considered. The team must first consider placement in the general education classroom with supports prior to recommending a more restrictive setting all or part of the day. This must be discussed and written at the IEP meeting.

Follow the continuum of services below as a guide to determining LRE:

- General Education Class
- General Education Class with Consult or Collaboration from Special Education Teacher
- Resource Specialist Program (RSP)
- Special Day Class (SDC)
- Severely Handicapped Class (SH)
- Functional Skills Class
- Non-Public School
- Residential School

- Home Instruction
- Independent Study
- Others

### **SPECIAL EDUCATION & RELATED SERVICES:**

The IEP Team needs to determine the special education and related services that would provide educational benefit and facilitate progress on the goals for the student. Make selection from drop down box. See CASEMIS codes below:

#### *Special Instruction*

<b>330 Specialized academic instruction</b>	<b>Adapting, as appropriate to the needs of the student with a disability the content, methodology, or delivery of instruction to ensure access of the child to the general curriculum, so that he/she can meet the educational standards within the jurisdiction of the public agency that apply to all children. (e.g., RSP-school based, RSP-pull out, SDC-inclusion services, SDC-public integrated, SDC-public segregated, SDC-non public school.</b>
<b>340 Intensive individual instruction</b>	<b>IEP Team determination that student requires additional support for all or part of the day to meet his/her IEP goals (e.g., 1-1 instructional assistant.</b>
<b>350 Individual &amp; small group instruction</b>	<b>Instruction delivered one-to-one or in a small group as specified in an IEP enabling the individual(s) to participate effectively in the total school program. (FOR PRESCHOOL ONLY)</b>

#### *Related Services*

<b>415 Language and Speech</b>	<b>Includes receptive and expressive language, articulation, voice and fluency.</b>
<b>425 Adapted physical education</b>	<b>Direct physical education services provided by an Adapted Physical Education (APE) specialist.</b>
<b>435 Health &amp; nursing – specialized</b>	<b>Specialized physical health care services (SPHCS) means those health services prescribed by the child’s licensed physician and/or surgeon requiring medically related training of the individual who performs the services and which are necessary during the school day to enable the child to attend school. SPHCS include but are not limited to suctioning, oxygen administration, cauterization, nebulizer treatments, insulin administration and glucose testing.</b>
<b>436 Health &amp; nursing – other services</b>	<b>This includes services that are provided to students by qualified personnel pursuant to an IEP when a student has health problems which require nursing intervention</b>

	beyond basic school services. Services include managing the health problem, consulting with staff, group & individual counseling, making appropriate referrals and maintaining communication with agencies and health care providers.
445 Assistance technology services	Any specialized training or technical support for the incorporation of assistive devices, adapted computer technology or specialized media within the educational programs to improve access for students.
450 Occupational therapy	OT includes services to improve student's educational performance, postural stability, self-help abilities, sensory processing and organization, environmental adaptation and use of assistive devices, motor planning and coordination, visual perception and integration, social play abilities, and/or fine motor skills.
460 Physical therapy	Services provided by a register PT pursuant to an IEP when assessment shows discrepancy between gross motor performance and other educational skills.
<i>Behavior Services</i>	
510 Individual counseling	One-on-one counseling, provided by a qualified individual pursuant to an IEP.
515 Counseling & guidance	Counseling in a group setting, provided by a qualified individual pursuant to an IEP.
520 Parent counseling	Individual or group counseling provided by a qualified individual pursuant to an IEP to assist the parent(s) of special education students in better understanding and meeting their child's needs.
525 Social work services	Includes services provided pursuant to an IEP by a qualified individual.
530 Psychological services	Services provided by a credentialed or licensed psychologist pursuant to an IEP.
535 Behavior intervention services	A systematic implementation of procedures designed to promote lasting, positive changes in the student's behavior resulting in greater access to a variety of community settings, social contacts, public events, and placement in the LRE.
540 Day treatment services	Structured education, training and support services to address the student's mental health needs.
545 Residential treatment services	A 24 hour out-of-home placement that provides intensive therapeutic services to support the educational program.

*Low Incidence Services*

<b>610 Specialized services for low incidence disabilities</b>	Low incidence services are defined as those provided to the student population of orthopedic impairment (OI), visual impairment (VI), deaf, hard of hearing (HH), or deaf-blindness (DB). Typically, services are provided in education settings by an itinerant teacher or the itinerant teacher/specialist. Consultation is provided to the teacher, staff and parents as needed.
<b>710 Specialized deaf and hard of hearing services</b>	These services include speech therapy, speech reading, auditory training and/or instruction in the student's mode of communication. Rehabilitative and educational services; adapting curricula, methods, and the learning environment; and special consultation to students, parents, teachers, and other school personnel may also be included.
<b>715 Interpreter services</b>	Sign language interpretation of spoken language to individuals, whose communication is normally sign language, by a qualified sign language interpreter.
<b>720 Audiological services</b>	These services include measurements of acuity, monitoring amplification, and Frequency Modulation system use.
<b>725 Specialized vision services</b>	This a broad category of services provided to students with visual impairments. It includes assessment of functional vision; curriculum modifications necessary to meet the student's educational needs—including Braille, large type, aural media; instruction in areas of need' concept development and academic skills; communication skills (including alternative modes of reading and writing); social, emotional, career, vocational, and independent living skills. It may include coordination of other personnel providing services to the students (such as transcribers, readers, counselors, orientation and mobility specialists, career/vocational staff, and others) and collaboration with the student's classroom teacher.
<b>730 Orientation and mobility</b>	Students with identified visual impairments are trained in body awareness and to understand how to move. Students are trained to develop skills to enable them to travel safely and independently around the school and in the community. It may include consultation services to parents regarding their children requiring such services according to an IEP.
<b>735 Braille transcription</b>	Any transcription services to convert materials from print to Braille. It may include textbooks, tests, worksheets, or anything necessary for instruction. The transcriber should be qualified in English Braille as well as Nemeth Code (mathematics) and be certified by appropriate agency.

<b>740 Specialized orthopedic services</b>	<b>Specially designed instruction related to the unique needs of students with orthopedic disabilities, including specialized materials and equipment.</b>
<b>745 Reading services</b>	
<b>750 Note taking services</b>	<b>Any specialized assistance given to the student for the purpose of taking notes when the student is unable to do so independently. This may include, but is not limited to, copies of notes taken by another student, transcription of tape-recorded information from a class, or aide designated to take notes.</b>
<b>755 Transcription services</b>	<b>Any transcription service to convert materials from print to a mode of communication suitable for the student. This may also include dictation services as it may pertain to textbooks, tests, worksheets, or anything necessary for instruction.</b>
<b>760 Recreation services</b>	<b>Therapeutic recreation and specialized instructional programs designed to assist pupils to become as independent as possible in leisure activities, and when possible and appropriate, facilitate the pupil's integration into general education programs.</b>

### *Transition Services*

<b>820 College awareness</b>	
<b>830 Vocational Assessment, Counseling, Guidance, and Career Assessment</b>	<b>Organized educational programs that are directly related to the preparation of individuals for paid or unpaid employment and may include provision for work experience, job coaching, development and/or placement, and situational assessment. This includes career counseling to assist student in assessing his/her aptitudes, abilities, and interests in order to make realistic career decisions.</b>
<b>840 Career awareness</b>	<b>Transition services include a provision for in self-advocacy, career planning, and career guidance.</b>
<b>850 Work experience education</b>	<b>Work experience education means organized educational programs that are directly related to the preparation of individuals for paid or unpaid employment, or for additional preparation for a career requiring other than a baccalaureate or advanced degree.</b>
<b>855 Job coaching</b>	<b>Job coaching is a service that provides assistance and guidance to an employee who may be experiencing difficulty with one or more aspects of the daily job tasks</b>

	and functions. The service is provided by a job coach who is highly successful, skilled and trained on the job that can determine how the employee that is experiencing difficulty learns best and formulate a training plan to improve job performance.
860 Mentoring	Mentoring is a sustained coaching relationship between a student and teacher through on-going involvement and offers support, guidance, encouragement and assistance as the learner encounters challenges with respect to a particular area such as acquisition of job skills. Mentoring can be either formal as in planned, structured instruction or informal that occurs naturally through friendship, counseling and collegiality in a casual, unplanned way.
865 Agency linkages	Service coordination and case management that facilitates the linkage of individual education programs.
870 Travel training	
890 Other transition services	These services may include program coordination, case management and meetings, and crafting linkages between schools and between schools and post-secondary agencies.
900 Other special education/related services	Any other specialized service required for a student with a disability to receive educational benefit.

**Service Provider:** Make selection from drop down box. The title of the service.

**Location:** Make selection from drop down box. Location of where the service is provided

**Start and End Date:** Indicate the start/end dates for when the service(s) will begin and end.

**Duration:** Indicate number of minutes per day (i.e., 60 minutes, 90 minutes, etc.)

**Frequency:** Make selection from drop down box. The frequency of the service being provided.

**EXTENDED SCHOOL YEAR (ESY):**

Discuss if student needs ESY to receive FAPE. Check "YES" or "NO".

**NOTE: ESY shall be provided to a student with a disability who the IEP Team deems requires special education and related services in excess of the regular academic year. Such students shall have disabilities which are likely to continue indefinitely or for a prolonged period of time, and interruption of the student's educational programming may cause regression, when coupled with limited recoupment capacity, rendering it impossible or unlikely that the student will attain the level of self-sufficiency and independence that would otherwise be expected in view of his/her disability (5 CCR 3043)**

## **Individual Transition Plan (ITP) – Form 9**

**NOTE:** This form **MUST** be completed in time to be in effect when the student reaches 16 years of age (i.e., at the annual review). The IEP Team may determine that consideration is appropriate for younger students.

**Describe how the student participated in the process:** Check the appropriate box on how the student participated in the process, including how the student's interests were determined.

**Results of Age-Appropriate Transition Assessments:** Record the transition assessment information/results used to identify the student's preferences and interests for transition planning as they relate to his/her postsecondary goals. These are what the student plans on doing upon graduation/completing high school.

### **STUDENT'S MEASURABLE POST-SECONDARY & ANNUAL GOALS:**

**NOTE:** Document what the student plans on doing after graduation/completing high school in the areas of education, training, employment and; if needed, independent living. The postsecondary goals will be based on the results of age-appropriate transition assessments and the student's "I" statement. Identify the specific areas of need to be addressed within the next year to assist the student in meeting his/her postsecondary goals. Use the Transition Activities to identify strategies that will be employed to help the student achieve his/her postsecondary goals. These Transition Activities should directly relate to the Transition Service Codes entered on Form 8 (Service Page).

**Employment:** Indicate student's postsecondary employment goal upon exit from school. If the student does not know what their career/employment goals are, the annual goals and transition services should be designed to assist the student identify their interests, preferences, strengths and a career that matches their interests and abilities. In that case, an honest statement for the postsecondary employment goal might be: ***I do not have a career interest or goal at this time.***

**Education/Training:** Indicate student's postsecondary education or training goal upon exit from school. An education **OR** training goal is required, not both. If the student does not know what their education/training goal is, write an annual goal to help them to make that decision.

**Independent Living Skills:** When appropriate: indicate the student's goals for postsecondary independent living skills, such as, supported living, living with family, etc. If the student and family needs help making the decisions and plans, the annual goals and transition services should assist the student and family make postsecondary living arrangements as well as help connecting with adult service providers.

**Annual goals to support the postsecondary goals:** Measurable annual goals should support the student's postsecondary goals in the areas of employment, education/training and/or independent living skills. The **annual goals** are the instruction and activities that will **occur within a school year** and are updated annually. Indicate the annual goal(s), which will be responsible for the successful completion and a timeline.

**Transition Activities:** Use Transition Activities (immediately below) to identify strategies that will be employed to help the student achieve their desired outcomes/services.

**Goal Review:** Enter date the goal was reviewed. Also check Yes or No if goal was met.

**Person(s) Responsible:** Enter people responsible for assisting the student to achieve the goal.

**Graduation Requirements:** Enter credits the student has earned and still needs completed to graduate.

**Transcript:** Attach transcript to the IEP. Discuss requirements with Parent(s).

***These transition activities directly relate to the transition service codes and student's postsecondary goal.***

Assist student in writing a summary about the career pathways that were identified through self-awareness

Arrange for student to listen to guest speakers and conduct job interviews

Assist student to explore careers through electronic and text media

Assist student in communicating wants and needs verbally or through picture icons

Assist student in writing about his/her interests, preferences, and strengths

Assist student to attend college fair at vocational/technical school

Assist student to attend transition fair

Assist student to attend college visitation sessions in guidance office

Assist student to attend post-secondary options workshop

Assist student to determine a major or program of study  
Assist student to take ASVAB  
Assist student to arrange to meet with military recruiters  
Assist student to prepare/study for SAT  
Assist student to register for SAT with accommodations  
Assist student to register for college prep classes  
Assist student to complete application for admission to program of choice  
Assist student to complete financial aid forms  
Assist student to participate in (two) job shadow experiences  
Review job shadow experience(s) after completion with student  
Assist student to arrange a visit/tour (two) job sites  
Assist student to arrange an interview with an employer in chosen field  
Arrange student participation in community based training program  
Develop the student's job search skills  
Develop student's ability to use classified ads to locate jobs of interest  
Assist student to develop their resume  
Develop the student's completion of job applications  
Provide opportunities for mock job interviews  
Assist student to develop work-related behaviors  
Assist student to develop work-related social skills  
Assist student to develop work awareness skills  
Assist student's examination of own strengths and interests related to employment  
Assist student to develop basic computer skills needed for employment  
Assist student to arrange visit to sheltered workshop  
Arrange participation in two) non-paid job try-outs  
Assist student to meet with guidance counselor to discuss career goals  
Assist student to apply for housing at college of choice  
Develop conflict resolution skills  
Instruct student to review a sample lease  
Assist student to apply for supported housing through Inland Regional Center  
Assist student to develop basic home maintenance skills  
Assist student to develop basic housekeeping skills  
Arrange student visit to supervised apartment  
Arrange student visit to supported apartment  
Assist student in obtaining drivers license  
Assist student to utilize public transportation  
Assist student to find a family doctor, dentist, etc  
Assist student to identify opportunities for volunteer activities  
Assist student to become eligible for SSI/SSDI  
Arrange a visit to a bank  
Assist student to open a checking account  
Assist student to develop a personal budget  
Teach student how to pay bills  
Teach student to shop for purchases  
Teach student to use telephone and telephone book  
Teach student to apply for a library card  
Arrange for student to visit local library  
Arrange visit to courtroom to observe jury process  
Assist student to identify (three) local recreation opportunities  
Assist student to call local YMCA to inquire about programs and costs

Assist student to participate in Special Olympics  
Assist student to join youth group  
Assist student to select and participate in a school club  
Assist student to call peer to arrange social activity  
Assist student to participate in a CPR course

## **IEP Team Meeting Notes – Form 10**

NOTE: This form...

- Is a required component of the IEP.
- Should be a summary of what happened during the meeting.
- Should be read to the team to check for accuracy.
- MUST be legible.

## **Signature and Parent Consent – Form 11**

**IEP Meeting Participants:** Have ALL meeting participants sign and print their name that they were in attendance. Make sure to indicate title if not already identified.

**Informed Consent:** Have the parent initial all appropriate areas.

**Transfer of Rights:** On or before the student's 17<sup>th</sup> birthday, explain that he or she will assume all special education rights and protection upon turning 18 (unless a conservator has been appointed by the court). Have the student sign that section and have parent initial.

**Medi-Cal Statement:** *The State requires this information.* Have the parent initial to give permission for the district to be reimbursed by Medi-Cal for service provided. Inform the parents that this is done confidentially through a third party and the district never knows which students are eligible. If the parent is charged co-pay when their insurance is billed, the district is not eligible to collect the reimbursement.

**Signature:** Have parent(s), guardian, surrogate or adult student sign and date.

**\*Note: *Parents are to receive a copy of IEP prior to leaving meeting. NO EXCEPTIONS!***