

Individual Education Plan



INDIVIDUALIZED EDUCATION PROGRAM (IEP)

PURPOSE:

The individualized education program, or IEP document, is a written record of the decisions reached by the team members at the IEP meeting. According to the U.S. Department of Education, the IEP requirement under the Individuals with Disabilities Education Act (IDEA) has six distinct functions and purposes. They are:

- a. The IEP meeting serves as a communication vehicle between parents and school personnel, and enables them, as equal participants, to jointly decide what the child's needs are, what services will be provided to meet those needs, and what the anticipated outcomes may be.
- b. The IEP process provides an opportunity for resolving any differences between the parents and the agency concerning the special education needs of a child with a disability: first, through the IEP meeting, and second, if necessary, through the procedural protections that are available to the parents.
- c. The IEP sets forth in writing a commitment of resources necessary to enable a child with a disability to receive needed special education and related services.
- d. The IEP is a management tool that is used to ensure that each child with a disability is provided special education and related services appropriate to the child's special learning needs.
- e. The IEP is a compliance/monitoring document that may be used by authorized monitoring personnel from each governmental level to determine whether a child with a disability is actually receiving the Free Appropriate Public Education (FAPE) agreed to by the parents and the school.
- f. The IEP serves as an evaluation device for use in determining the extent of the child's progress toward meeting the projected outcomes.

Appendix C to 34 C.F.R. Part 300 – Notice of Interpretation (1981, Abridged)

OVERVIEW OF THE FEDERAL LAW:

§ 300.346 Development, review, and revision of IEP.

(a) Development of IEP.

- (1) **General.** In developing each child's IEP, the IEP team, shall consider –
 - (i) The strengths of the child and the concerns of the parents for enhancing the education of their child;
 - (ii) The results of the initial or most recent evaluation of the child; and
 - (iii) As appropriate, the results of the child's performance on any general, state or district-wide assessment programs.
- (2) **Consideration of special factors.**
The IEP team also shall –
 - (i) In the case of a child whose behavior impedes his or her learning or that of others, consider, if appropriate, strategies, including positive behavioral interventions, strategies, and supports to address that behavior;
 - (ii) In the case of a child with limited English proficiency, consider the language needs of the child as those needs relate to the child's IEP;

- (iii) In the case of a child who is blind or visually impaired, provide for instruction in Braille and the use of Braille unless the IEP team determines, after an evaluation of the child's reading and writing skills, needs, and appropriate reading and writing media (including an evaluation of the child's future needs for instruction in Braille or the use of Braille), that instruction in Braille or the use of Braille is not appropriate for the child;
 - (iv) Consider the communication needs of the child, and in the case of a child who is deaf or hard of hearing, consider the child's language and communication needs, opportunities for direct communications with peers and professional personnel in the child's language and communication mode, academic level, and full range of needs, including opportunities for direct instruction in the child's language and communication mode; and
 - (v) Consider whether the child requires assistive technology devices and services.
- (b) **Review and Revision of IEP.** In conducting a meeting to review, and, if appropriate, revise a child's IEP, the IEP team shall consider the factors described in paragraph (a) of this section.
- (c) **Statement in IEP.** If, in considering the special factors described in paragraphs (a) (1) and (2) of this section, the IEP team determines that a child needs a particular device or service (including an intervention, accommodation, or other program modification) in order for the child to receive FAPE, the IEP team must include a statement to that effect in the child's IEP.
- (d) **Requirement with respect to regular education teacher.** The regular education teacher of a child with a disability, as a member of the IEP team, must, to the extent appropriate, participate in the development, review, and revision of the child's IEP, including assisting in the determination of –
 - (1) Appropriate positive behavioral interventions and strategies for the child; and
 - (2) Supplementary aids and services, program modifications or supports for school personnel that will be provided for the child, consistent with § 300.347 (a) (3).
- (e) **Construction.** Nothing in this section shall be construed to require the IEP team to include information under one component of a child's IEP that is already contained under another component of the child's IEP.

(Authority: 20 U.S.C. 1414 (d) (3) and (4) (B) and (e); 34 CFR Part 300.346)

§ 300.347 Content of IEP

- (a) **General.** The IEP for each child with a disability must include –
 - (1) A statement of the child's present levels of educational performance, including –
 - (i) How the child's disability affects the child's involvement and progress in the general curriculum (i.e., the same curriculum as for non-disabled children); or
 - (ii) For preschool children, as appropriate, how the disability affects the child's participation in appropriate activities;
 - (2) A statement of measurable annual goals, including benchmarks or short-term objectives, related to –
 - (i) Meeting the child's needs that result from the child's disability to enable the child to be involved in and progress in the general curriculum (i.e., the same curriculum as for non-disabled children), or for preschool children, as appropriate, to participate in appropriate activities; and
 - (ii) Meeting each of the child's other educational needs that result from the child's disability;
 - (3) A statement of the special education and related services and supplementary aids and services to be provided to the child, or on behalf of the child, and a statement of the program modifications or supports for school personnel that will be provided for the child –
 - (i) To advance appropriately toward attaining the annual goals;

- (ii) To be involved and progress in the general curriculum in accordance with paragraph (a) (1) of this section and to participate in extracurricular and other nonacademic activities; and
 - (iii) To be educated and participate with other children with disabilities and non-disabled children in the activities described in this section;
- (4) An explanation of the extent, if any, to which the child will not participate with non-disabled children in the regular class and in the activities described in paragraph (a) (3) of this section;
- (5) (i) A statement of any individual modifications in the administration of State or district-wide assessments of student achievement that are needed in order for the child to participate in the assessment; and
 - (ii) If the IEP team determines that the child will not participate in a particular State or district-wide assessment of student achievement (or part of an assessment), a statement of –
 - (A) Why that assessment is not appropriate for the child; and
 - (B) How the child will be assessed;
- (6) The projected date for the beginning of the services and modifications described in paragraph (a) (3) of this section, and the anticipated frequency, location, and duration of those services and modifications; and
- (7) A statement of –
 - (i) How the child’s progress toward the annual goals described in paragraph (a) (2) of this section will be measured; and
 - (ii) How the child’s parents will be regularly informed (through such means as periodic report cards), at least as often as parents are informed of their non-disabled children’s progress, of –
 - (A) Their child’s progress toward the annual goals; and
 - (B) The extent to which that progress is sufficient to enable the child to achieve the goals by the end of the year.
- (b) **Transition services.** The IEP must include –
 - (1) For each student with a disability beginning at age 14 (or younger, if determined appropriate by the IEP team), and updated annually, a statement of the transition service needs of the student under the applicable components of the student’s IEP that focuses on the student’s courses of study (such as participation in advanced-placement courses or a vocational education program); and
 - (2) For each student beginning at age 16 (or younger, if determined appropriate by the IEP team), a statement of needed transition services for the student, including, if appropriate, a statement of the interagency responsibilities or any needed linkages.
- (c) **Transfer of rights.** In a State that transfers rights at the age majority, beginning at least one year before a student reaches the age majority, under State law, the student’s IEP must include a statement that the student has been informed of his or her rights under Part B of the Act, if any, that will transfer to the student on reaching the age of majority, consistent with § 300.517.
- (d) **Students with disabilities convicted as adults and incarcerated in adult prisons.** Special rules concerning the content of IEPs for students with disabilities convicted as adults and incarcerated in adult prisons are contained in § 300.311 (b) and (c).

(Authority: 20 U.S.C. 1414 (d) (1) (A) and (d) (6) (A) (ii); 34 CFR Part 300.347)

§ 300.29 Transition services

- (a) As used in this part, transition services means a coordinated set of activities for a student with a disability that –
 - (1) Is designed within an outcome-oriented process, that promotes movement from school to post-school activities, including post-secondary education, vocational

- training, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation;
- (2) Is based on the individual student's needs, taking into account the student's preferences and interests; and
 - (3) Includes –
 - (i) Instruction;
 - (ii) Related services;
 - (iii) Community experiences;
 - (iv) The development of employment and other post-school adult living objectives; and
 - (v) If appropriate, acquisition of daily living skills and functional vocational evaluation.
- (b) Transition services for students with disabilities may be special education, if provided as specially designed instruction, or related services, if required to assist a student with a disability to benefit from special education.

(Authority: 20 U.S.C. 1401 (30); 34 CFR Part 300.29)

DEVELOPMENT OF THE INDIVIDUAL EDUCATION PROGRAM:

The development of the Individual Education Program (IEP) should focus on each child's unique educational needs and how to address those needs as they relate to the total school environment. When an IEP is developed properly, it should progress from year to year. Continuity between long-term goals and expected outcomes are clearly visible from one IEP to the next. The Tennessee IEP form, along with the instructions, can be found at <http://www.state.tn.us/education/msped.htm>.

At the end of this chapter is Tennessee's IEP. For easy reference, it is numbered to correspond with each numbered section in the manual.

PAGE 1 OF THE IEP

Tennessee's Individual Education Program (IEP)

From ___/___/___ to ___/___/___
___Initial ___Annual ___Interim ___Addendum

Student: _____ Birthdate: _____
Last First Middle Mo/Day/Yr

Student Social Security/ID# : _____ Sex: ___M ___F Ethnic Group: I B A H W _____
Specify

Relationship to Student: (Circle One) Parent Guardian Surrogate

Name: _____ Home Phone: _____
Last First Middle

Address: _____ Work Phone: _____

Student's Residence (if different): _____ Home Phone: _____

Attending School: _____ Home/School (if different): _____
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POINTS TO REMEMBER:

- Set a positive tone for the meeting.
- Parents should always be encouraged to participate.
- The IEP, based on the unique needs of the child, reflects a free appropriate public education (FAPE) in the least restrictive environment(LRE).
- An IEP must be in effect at the beginning of the school year for each eligible child.
- The IEP shall be reviewed at least annually and revised as appropriate.
- If the child is to turn fourteen years of age during the time in which this IEP is in effect, he or she shall be invited to participate in the IEP meeting if the purpose of the meeting is to discuss transition services.
- The IEP process should be outcome oriented.
- The IEP Team may want to consider using an IEP agenda, appointing a scribe to take notes and/or to develop the written IEP.

1. DEMOGRAPHIC INFORMATION

DIRECTIONS:

- A. The academic year on top of the page should reflect the school year for which the IEP is written. It should be written from the beginning month, day and year to the end of the IEP. An IEP is good for only 365 days (one year) from the date the IEP Team signs their name(s) (which is the date the meeting was held).
- B. The second line should be checked to show the type of meeting(s) that has/have been convened for this student in order to develop information and/or revise the IEP.
- C. Interim IEP

Eligible students who have been receiving special education and related services may be temporarily placed in a special education program when additional information is needed to help determine the appropriate placement for the student. This placement should be made in accordance with the following:

- The IEP-Team must develop an interim individualized education program.
- The interim IEP must include all components of the regular IEP.
- The IEP-Team must recommend a temporary placement for the student consistent with state requirements.
- The interim placement must not exceed a thirty (30) calendar day period.
- Parental consent for the interim placement must be obtained.

D. The teacher and parents should complete the demographic information to ensure its accuracy.

POINTS TO REMEMBER:

- Confirm demographic data to ensure accuracy.
- When completing the IEP, DO NOT leave sections blank.

CURRENT DESCRIPTIVE INFORMATION

Current Descriptive Information:

Describe the child's strengths: _____

Describe the concerns of the parents regarding their child's education: _____

Describe how the child's disability affects involvement and progress in the general curriculum: _____

2. **CHILD'S STRENGTHS**

DIRECTIONS: Briefly describe the child's current strengths, abilities and how s/he learns.

POINTS TO REMEMBER:

- Academic/test scores are not appropriate for this section; they are discussed later in the IEP.
- This section is devoted to what a teacher needs to know about the child and how s/he learns.
- Ask parents and teachers for input regarding the child's strengths, abilities and interests.
- Consider a **variety of settings** such as in the home, school and community.

SUGGESTED QUESTIONS TO ANSWER:

- What strengths does this student exhibit which can be built upon when developing his/her IEP?
- What current abilities does this student exhibit which can be utilized when developing his/her IEP?
- What are the child's interests at home and in the community?

EXAMPLES OF STUDENT STRENGTHS:

- Lindsey is cooperative and works hard to complete assignments. She is friendly, has a sense of humor and a pleasant personality.
- Alex has good verbal reasoning skills. He enjoys Science and Social Studies and contributes to classroom discussions. He likes to sing in the school choir.

3. PARENT CONCERNS

DIRECTIONS: Briefly describe the parents' concerns regarding their child's education.

Do not leave this section blank. If the parent(s) did not attend the meeting, state that the parent(s) did not attend. If the parent(s) provided input prior to the meeting, note that in this section.

POINTS TO REMEMBER:

- Sometimes parental concerns appear to be unrelated to the educational environment. If this should occur, solicit additional information to determine the relationship to the child's educational plan.
- The IEP Team **must** consider parental concerns as they relate educationally to their child.

SUGGESTED QUESTIONS TO ANSWER:

- What are the areas the parent would like to see his/her child do more of? Less of?
- What hopes do the parents have for their child regarding his/her education and future?
- What obstacles do the parents see getting in the way?

EXAMPLES OF PARENT CONCERNS:

- Due to her physical impairment, Lindsey's parents are concerned that she cannot keep pace with written assessments.
- During the last parent teacher conference Danielle's mother was concerned that she would not be successful if placed in large groups.

4. DESCRIBE HOW THE CHILD'S DISABILITY AFFECTS INVOLVEMENT AND PROGRESS IN THE GENERAL CURRICULUM

DIRECTIONS: Briefly describe how the child's disability affects the child's involvement and progress in the general curriculum (i.e. the same curriculum as for non-disabled children). Include any adjustments, services, and accommodations the child has utilized in the past that have been successful and enabled the child to participate in the general curriculum.

For preschool children, as appropriate, describe how the characteristics of the disability affect the child's participation in appropriate activities. ("Appropriate activities" refers to age-relevant developmental abilities or milestones that typically developing children of the same age would be performing or would have achieved.)

POINTS TO REMEMBER:

- This is a current "snapshot" of the student that includes any accommodations the child is utilizing in the general curriculum setting.
- Describe unique characteristics/needs of the child and how they impact/affect progress and involvement in the general curriculum.
- Review evaluations; many address the child's needs and how these needs can be/have been met.
- Give attention to accommodations and adjustments that have been made in the past.
- Remember that this is **NOT** a justification for removal from the regular classroom.

SUGGESTED QUESTIONS TO ANSWER:

- How does this child's needs affect/impact his/her involvement and/or progress in the general curriculum?
- What is it about the disability that limits full participation in the general curriculum?
- For a preschool child, how does this child's disability affect the child's participation in appropriate activities?
- What curricular/instructional strategies have been, and/or have not been, effective with the child?
- What accommodations/modifications have been provided for the child that have enabled him/her to remain in or access the regular educational environment?

EXAMPLES OF HOW A CHILD'S DISABILITY AFFECTS HIS/HER INVOLVEMENT & PROGRESS IN THE GENERAL CURRICULUM:

- Johnny's receptive language deficits frequently lead to confusion and fear that result in his running away or lashing out at others. He has been successful in small group settings, visual schedules, structured space and limited selections/choices on tests.
- Ben has required individual and/or small group instructional support to succeed in the early childhood classroom. His program of instruction has included frequent opportunities to acquire and practice skills utilizing adaptive equipment as appropriate.
- Robert has a short attention span and difficulty attending to task. Robert has been most successful using a weekly assignment sheet, receiving immediate feedback on projects and assignments, and utilizing frequent communication between the home (parents) and school (personnel).
- Bill can master select key concepts but has trouble keeping the pace of the regular class. He needs assistance for all activities of daily living. In order for Bill to participate in the regular classroom, he requires pre-teaching of basic concepts. Some of the accommodations utilized have been tape recorders (to tape the classroom lecture & discussion), abbreviated assignments, additional time for completing class work and tests, oral testing, overheads, providing the student with copies of notes and taped materials.
- Tom's response speed is very slow. When given adequate time and prompts, he can usually master basic concepts. Previous accommodations include abbreviated assignments and shortened tests.
- Johnny's vision problem limits his ability to read assignments from the board. The accommodations and/or modifications have included large print books, sitting near the board and using a tape recorder and Braille instruction.

PAGE 2 OF THE IEP – TOP PORTION

Write "Yes" or "No" under "Exceptional" column for each area assessed. Remember "Exceptional" areas require a completed Goal Sheet.

Area Assessed	Present Levels of Performance Levels of functioning, should, when applicable, include norm-referenced and/or criterion referenced data, as well as descriptive information on the student's deficit areas.	Sources of Information	Date	Exceptional (Yes/No)
Prevocational/ Vocational				

5. AREA ASSESSED

DIRECTIONS: For an initial evaluation, list all areas that were assessed. Following the annual review, address only those areas that continue to be exceptional from the previous IEP. If additional areas have been identified during the school year, they should be included in this section. If additional pages are required in order to write statements for the “Area Assessed” and “Present Levels of Performance”, please insert an additional page into the IEP.

POINTS TO REMEMBER:

- The information in this section is a summary of areas assessed.
- These areas should include all general categories of functioning relevant to educational programming. Areas may include academic, social-emotional, communication, sensory/perceptual, self-help and prevocational/vocational skills. Academic skills would include written expression, math calculation/reasoning, reading comprehension, and basic reading, listening comprehension and oral expression skills.
- Whenever possible, use identified deficit areas, not subject areas.

SUGGESTED QUESTIONS TO ANSWER:

- What are the major areas of educational concern for this child?
- Do the areas listed provide an overall picture of this child?
- Are there other areas of concern that the IEP Team should address or assess?

For annual reviews or re-evaluations:

- After reviewing the IEP, what areas continue to be exceptional?
- Have any new areas been identified? If yes, have they been addressed in the IEP?

6. PRESENT LEVELS OF PERFORMANCE

DIRECTIONS: Complete the present levels of performance by using norm and/or criterion-referenced data as well as descriptive information for each of the child's exceptional area(s). If yearly pre- and post- achievement tests are given, the scores should be included in this section. Following the annual review, address only those areas that continue to be exceptional. If additional areas were identified during the school year, they should also be included in this section.

POINTS TO REMEMBER:

- Assessment data can be from a variety of sources within the last three years.
- If pre- and post- achievement tests are given to students on a yearly basis in order to determine progress, these scores should be used to develop the current IEP's goals.
- Present levels of performance include descriptive information, norm- and/or criterion referenced data that indicate where the child is currently functioning and is the basis for the IEP Team to determine the child's needs.

SUGGESTED QUESTIONS TO ANSWER:

- Do the statements give enough real data to provide for a baseline from which to measure progress?
- Have norm-referenced and/or criterion referenced and descriptive data been included?

7. SOURCES OF INFORMATION

DIRECTIONS: Document the data source for present levels of performance. This not only includes the names of the norm-referenced and/or criterion referenced tests (e.g. Key Math, T.O.W.L., Woodcock-Johnson, etc), but also includes teacher made tests, Cloze procedures, parent

interviews, inventories, rating scales, observations, functional behavior assessments, medical or social histories, vocational assessments, or any other valid data sources such as physicians' statements.

POINTS TO REMEMBER:

- If the child is under the age of fourteen, pre-vocational skills must be addressed.
- Beginning at age fourteen, data from a comprehensive vocational assessment must be included in the child's folder.

SUGGESTED QUESTIONS TO ANSWER:

- Do the sources of information provide a starting point from which to develop this student's program?
- Has enough data been collected?
- Is the data appropriate for developing this child's IEP?
- Is the child fourteen or older, or will s/he turn fourteen during the length of this IEP? If yes, has a comprehensive vocational assessment been completed?

8. DATE

DIRECTIONS: Write the date that each evaluation was administered.

POINT TO REMEMBER:

- This is the date that the test, scale, etc. was administered. It is **NOT** the date that it was acquired.

SUGGESTED QUESTION TO ANSWER:

- What is the date of the test, scale, observation or qualifying statement?

9. EXCEPTIONAL (YES/NO)

DIRECTIONS: All areas assessed should be addressed **and** a determination made as to whether the area is exceptional. Following the initial evaluation or reevaluation, address all areas that were assessed with a "yes" or "no". For the IEP following the annual review, address only those areas that continue to be exceptional, as well as any new areas that may have been identified during the school year.

POINT TO REMEMBER:

- Every area that is marked exceptional must be addressed within a goal sheet.

SUGGESTED QUESTION TO ANSWER:

- Is this child's performance exceptional?

10. PREVOCATIONAL/VOCATIONAL

DIRECTIONS: Depending on the child's age, information from a pre-vocational teacher observation/checklist or a vocational assessment should be included.

POINTS TO REMEMBER:

- **Pre-vocational - for children under age 14**, exceptional is determined through either a teacher observation or checklist.
- **Vocational - For children 14 years of age and older**, exceptional is determined through a *comprehensive vocational assessment* that addresses a student's *interest and aptitude* (at a minimum).

SUGGESTED QUESTIONS TO ANSWER:

- For children not yet 14 years of age, has a pre-vocational assessment been completed?
- For children 14 years of age and older, has a comprehensive vocational assessment been completed?

PAGE 2 OF THE IEP – BOTTOM PORTION

Consideration of Special Factors for IEP Development:

- Does the child have limited English proficiency? ___ Yes ___ No. If yes, what is his/her primary language? _____
- Is the child blind or visually impaired? ___ Yes ___ No. If yes, does the child need instruction in Braille? _____
- Does the child have communication needs? ___ Yes ___ No. If yes, what are they? _____
- Is the child deaf or hard of hearing? ___ Yes ___ No. If yes, did the IEP Team consider:
 - the child's language and communication needs; ___ Yes ___ No
 - opportunities for direct communications with peers and professional personnel in the child's language and communication mode; ___ Yes ___ No
 - necessary opportunities for direct instruction in the child's language and communication mode? ___ Yes ___ No
- Is assistive technology necessary in order to implement the child's IEP? ___ Yes ___ No. If yes, what is needed? _____
- Does the child's behavior impede his/her learning or that of others? ___ Yes ___ No. If yes, the IEP Team has addressed the child's behavior in the following way(s): ___ Functional Behavior Assessment, ___ Behavior Intervention Plan, ___ Accommodations, ___ Goals and Objectives, ___ Other.
- Where in this IEP is the above information located? _____

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11. CONSIDERATION OF SPECIAL FACTORS

DIRECTIONS:

If the IEP Team determines that a child needs a particular device or service, including an intervention, accommodation, or other program modification to receive FAPE, a statement to that effect must be included in the IEP.

For each area listed, write "yes" or "no". If a statement is needed, include where it can be located in the IEP.

- **Blind/Visually Impaired** - In the case of a blind or visually impaired child, instruction should be provided in Braille and/or the use of Braille **unless** the IEP Team determines that instruction in Braille or the use of Braille is not appropriate for the child. This determination is made by evaluating the child's reading and writing skills, needs, and appropriate reading and writing media (including an evaluation of the child's future needs for instruction in Braille or the use of Braille).
- **Limited English Proficiency** - In the case of the child with limited English proficiency, consider the language needs of the child as these needs relate to the child's IEP.
- **Assistive Technology Devices & Services** - The IEP Team needs to consider whether the child requires assistive technology devices and services .

- **Communication Needs of Child** - The IEP Team needs to consider the child's language and communication needs. For a child who is deaf or hard of hearing consider opportunities for direct communications with peers and professional personnel, including opportunities for direct instruction in the child's language and communication mode.
- **Behavior** - If the child's behavior impedes his/her learning or that of others, consider strategies, including positive behavior interventions and supports to address that behavior.

POINTS TO REMEMBER:

- If the IEP Team determines that certain factors could impede learning, the results must be reflected in the IEP.
- These special factors should be considered by the IEP Team when developing, reviewing and revising the IEP.
- When appropriate, consideration of these factors should include a review of evaluation data and the observed needs of the child.

SUGGESTED QUESTIONS TO ANSWER:

- Is the child visually impaired? Based upon an evaluation of the student's skills, needs, and appropriate media, what, if any, instruction does s/he need in Braille or the use of Braille?
- Is the child proficient in English? Are the language needs of the child addressed?
- Does the child require assistive technology devices or services?
- What are the child's communication or language needs? This includes children who are deaf or hard of hearing, **and** children who are nonverbal.
- Is the child's behavior impeding his/her learning or that of others? If yes, are the behavior needs of the child being addressed?

PAGE 2a OF THE IEP

TRANSITION SERVICES PLANNING

This page of the IEP should be completed for children who are **fourteen years of age or older**. It may also be completed for children younger than fourteen years **if** the IEP Team deems appropriate. **If a child reaches fourteen years of age during the year that his/her IEP is in effect**, the IEP Team shall complete this page.

Has a comprehensive vocational evaluation been administered? ___Yes ___No

Transition Services Planning (Beginning at age 14, or younger)

Desired Post School Outcomes	
Employment: _____	Post-Secondary Education/Training: _____
Independent/Supported Living: _____	Community Involvement: _____

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12. COMPREHENSIVE VOCATIONAL EVALUATION

Complete the question: Has a comprehensive vocational evaluation been administered?

A comprehensive vocational evaluation must be completed on every eligible child **by the child's fourteenth birthday**. A comprehensive vocational evaluation includes an assessment of the child's interests and aptitude. It is to be used to help highlight the child's preferences and interests and to help develop his/her transition service plan. It establishes a baseline from which to begin transition-related services.

13. DESIRED POST-SCHOOL OUTCOMES

DIRECTIONS: This section should be completed by the child's 14th birthday. If the IEP Team determines it is appropriate, it may be completed earlier. Based upon the child's preferences and interests, comprehensive vocational assessment, current information and parental input, the IEP Team should describe the anticipated educational and/or employment goal(s), the anticipated living arrangements and community involvement. These long-range outcome goals must be reflected in a variety of settings.

The intent is to ensure that the IEP Team focuses on the areas that need to be addressed for each child in order for the child to make a successful transition from secondary school to adult life.

The areas listed on the IEP are not all inclusive. Depending upon the needs of the individual child, the IEP Team may choose to address more areas than the ones included on the IEP.

POINTS TO REMEMBER:

- This section must be completed for the year in which the child turns 14 years of age, or earlier if the IEP Team so desires.
- Outcomes should promote movement from school to post-school activities including post-secondary education, vocational training, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation; and is based on the individual student's needs taking into account the student's preferences and interests. (§ 300.29)
- The *Post School Outcomes* should be realistic for the child to obtain in the future.
- The areas should be reviewed annually and updated as needed until the child graduates from high school or leaves the high school setting.
- At age fourteen, or before, and whenever transition services are being considered, the child **must** be invited to attend the meeting and sign the IEP as a member of the team.
- If the child cannot attend the meeting, his/her preferences and interests should be included in this section.
- The child should indicate his/her goals of what s/he wants to do after exiting high school.
- Transition planning should involve the student, the IEP Team members and any agency that is responsible for services and/or payment.
- For additional information concerning transition services planning, refer to the transition manual *Tennessee Connections*.

SUGGESTED QUESTIONS TO ANSWER:

- What does this child want to be/do after leaving the school setting?
- Are the outcome goals realistic?
 - Where does the student want to live?
 - How does he plan to get to work/school?
 - Who are the people he can depend on for help and guidance?
 - What community/area of town does the student want to live in?
 - What leisure activities are the student interested in pursuing?

EXAMPLES OF POST-SCHOOL OUTCOMES:

Example #1:

Jonathon's desired post school outcomes are:

Employment: field of computer electronics

Post-Secondary Education/Training: explore possible career options through classes at the community college and will continue to take technical courses at school.

Independent/Supported Living: to live in an apartment close to the community college

Community Involvement: enjoy activities with friends

Example #2:

James' desired post school outcomes are:

Employment: to work in a retail business where he has the opportunity to interact with many people throughout the day.

Post-Secondary Education/Training: research opportunities for part-time work through work based learning programs

Independent/Supported Living: to live with some of his friends prior to getting married

Community Involvement: to talk to high school students about the importance of volunteering.

14. TRANSITION SERVICE NEEDS

Transition Service Needs

Grade: 9 Course of Study: _____

Grade: 10 Course of Study: _____

Grade: 11 Course of Study: _____

Grade: 12 Course of Study: _____

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DIRECTIONS: This section should be completed by the child's 14th birthday. If the IEP Team determines it is appropriate, it may be completed earlier. It focuses on the instructional and educational experiences that a child will need that will assist him/her in obtaining his/her desired post-school outcome goals and be prepared for adult life.

Transition service needs should:

- provide identification of and planning for courses that the child will be taking in each grade that will help him/her achieve the desired post-school goal, outcome and diploma;
- relate directly to the child's goals beyond high school;
- link the child's course of study or career cluster to his/her post school outcome goals;
- be reviewed and updated annually.

This section may be completed in one of three ways. The IEP Team may:

- write a statement that focuses on the child's courses of study (such as participation in advanced-placement courses or a vocational education program);
- attach a copy of the child's four year plan of study; or
- name the courses that the child should take in order to reach his/her desired goals.

POINTS TO REMEMBER:

- This section must be completed for the year in which the child turns 14 years of age and reviewed every year thereafter.
- All four years of the child's course of study should be developed in order to reflect the courses the child will need to take in order to obtain his/her "Desired Post School Outcomes".

SUGGESTED QUESTION TO ANSWER:

- Does the course of study, four-year plan or individual school courses outlined above enable the child to attain his/her desired post-school outcomes?
- Has the student been introduced to all of the post-school services and supports that s/he will need prior to leaving the school setting?

EXAMPLES OF STATEMENT OF TRANSITION SERVICE NEEDS:

- (One of Jonathon’s post-school outcomes was for **Employment**. He wanted to go into the field of computer electronics when he graduates.)
 Grade 9: College prep courses, career exploration
 Grade 10: College prep courses, job shadowing opportunities
 Grade 11: Engineering and technology path, Cooperative Vocational Education
 Grade 12: Engineering and technology path, Cooperative Vocational Education
- (James' post-school **Employment** goal was to work at a retail store.)
 Grade 9: Vocational path, Resource English class, career exploration
 Grade 10: Vocational path, Resource English class, job shadowing opportunities
 Grade 11: Courses in math for technology, Resource English class, internship and/or job shadowing opportunities
 Grade 12: Courses in technology, Resource English class, Cooperative Vocational Education

15. TRANSITION SERVICES

Transition Services (Beginning at age 16, or younger)

Service Area	Need Yes/No	Activities/Strategies (All activities/strategies that are the responsibility of special education and are to be implemented this year must be reflected in goal sheets.)	Agency/Responsibilities
Instruction:			
Related Services:			
Community Experiences:			
Employment & Post-school Adult Living Objectives:			
Daily Living Objectives: (if appropriate)			
Functional Vocational Evaluation: (if appropriate)			

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DIRECTIONS: This section must be completed by the child's 16th birthday. If the IEP Team determines it is appropriate, it may be completed earlier. The IEP Team must review the child's preferences and interests, current information and parental input, including any vocational evaluations and any other relevant material to determine what areas should be addressed.

If any service area is marked yes, transition activities/strategies should be developed that promote movement from school to the child's post-school outcome goals. These activities should be developed between the school and any other agency to ensure that the student has a successful transition between school and adult life.

If the activity/strategy is the responsibility of the school system AND there is a need for special education services or supports, an annual goal and short-term objectives/benchmarks must be written or included in another goal sheet. However, when no special education services or supports are needed, an annual goal and short-term objectives/benchmarks do not have to be written.

The service areas include:

Instruction is the use of formal techniques to impart knowledge and is typically provided in schools (i.e. tutoring, general education classes, etc.). Other agencies could provide instructional activities such as adult basic education and post-secondary schooling.

Related Services are services that are required to assist a student with a disability in order to benefit from special education transition services, such as obtaining information and material for post-secondary school services and/or housing, employment security, MH/MR services, social security services, building advocacy networks and long-term support. The school system or other agencies could provide these services.

Community Experiences are those services that are provided outside the school building, in community settings by schools and other agencies (i.e., community-based work experiences, job-site training programs, transportation, community counseling, independent living centers, adult service providers, etc.). The school system or other agencies could provide these services.

Employment /Post-school Adult Living Objectives are services that lead to a job/career, and other important adult activities. It also includes services that are done occasionally, such as registering to vote, preparing tax forms, renting a home, accessing medical services, accessing SSI services, etc. The school system or other agencies could provide these services.

Daily Living Objectives are those activities adults do every day (i.e., preparing meals, budgeting, maintaining a home, paying bills, caring for clothes, grooming, etc.). The school system or other agencies could provide these services.

Functional Vocational Evaluation is an assessment that provides information about job/ career interests, aptitudes and skills. It may be gathered through situational assessments, observations, or formal measures and should be practical. The evaluation can be used by the IEP Team to refine the services that a child would need. The school system or other agencies could provide these services.

*Descriptions of service areas adapted from *Individuals with Disabilities Education Act: Transition Requirements - A Guide for States, Districts, Schools and Families*, J. Storms, L. DeStefano, E. O'Leary, 1996.

Some questions to ask for each *Service Area* might include:

Instruction:

- Will the student need financial support for post-secondary education? (i.e. locating and applying for grants, loans, scholarships)
- Will the student have to take college entrance exams? (i.e. registration and preparation for the exam, locating test centers, securing transportation to testing center)
- Does the student need career exploration or career awareness opportunities?
- What academic goals/courses will support the implementation of the post-school outcome transition statement? (If a specific high school course is needed to implement the post-school outcome transition statement, what are the real-world applications that should be addressed? Example: Applied Math - Would the student use a calculator for the tasks of shopping and money management?)

Related Services:

- What related services (i.e. speech, OT, PT, counseling, assistive technology, etc.) will the student need to benefit from transition services (i.e. instruction, community experiences, adult living skills, etc.)?
- Will the student require transportation services in order to receive any related services?

Community Experiences:

- Will the student participate in community league sports? (i.e. city league, church league, as a player, coach, manager, helper, or spectator)
- Will the student need a day program? (i.e. YMCA for several hours before returning home)
- Will the student be transporting him/herself in the community? (i.e. independent (car, bicycle), public transportation (bus, taxi), specialized (van, wheelchair lift))

Employment & Post-school Adult Living Objectives:

- Will the student live independently? If no, where will the student reside and what training will be needed for independence within the proposed living environment? If yes, what supports, if any will be needed?
- Will the student need to manage personal finances? (i.e. what is a paycheck and how does the system work, SSI application, food stamps, insurance, banking, family support)
- What will the student need to know for job placement? (i.e. on-the-job training, work experience, apprenticeships, resume, job site modifications)
- What are the appropriate aptitude and interest tests that the student should complete for post-secondary education or employment?

Daily Living Objectives/Functional Vocational Evaluation:

- Will the student need skill training for household management? If yes, which skills?
- Will the student need social and/or hygiene skills training?
- Will the student need safety training? If yes, which training for what setting? What specific vocational evaluation does the student need? Who will administer the evaluation? When will the evaluation be administered? (E.g. Vocational Rehabilitation Centers will evaluate students for specific job training skills or interests.)

POINTS TO REMEMBER:

- The child **must** be invited to participate in the development of his/her Individual Transition Plan (ITP). If the child does not attend the IEP meeting, the LEA must develop appropriate methods to ensure the child's preferences are considered.
- The activities/strategies listed under "Transition Services" may be reflected in goal sheets as well as other places in the IEP.
- This section focuses on how the child's educational program can be planned to help the child make a successful transition to his/her goals for life after secondary school.
- Services should be individualized to meet the particular needs of each child and should be based on each child's unique needs, preferences and interests.
- The child's transition plan should be reviewed annually in order to build on the previous year's experiences in reaching the anticipated post-school outcome goals.
- Any agency that may have responsibility for implementing an activity/strategy and paying for the service should be in attendance at this meeting.
- If an agency is unable to attend the IEP meeting, the IEP Team must provide other means of ensuring agency participation.
- If an agency fails to perform the services written into the IEP, the LEA must reconvene the IEP Team to address these objectives and/or goal.

SUGGESTED QUESTIONS TO ANSWER:

Beginning at age 16, or younger if appropriate, and every year thereafter -

- What are the activities/strategies that need to be learned in order for this child to attain his/her post-school outcomes (or long range goals)?
- What activities/strategies can the student do now as it pertains to his/her outcome goal? What activities/strategies need to be addressed in order for the student to obtain his outcome goal?
- What activities/strategies should be addressed first? Second? Etc?
- What, if any, services from other agencies are needed to meet the student's needs?
- Is the name of the person or agency responsible for the activity documented?

EXAMPLES OF NEEDED TRANSITION SERVICES:

- For *Instruction*: James will participate in the vocational training program.
- For *Related Services*: James will seek job experiences in order to obtain post-school employment through Vocational Rehabilitation Services.
- For *Community Experiences*: James will utilize public transportation to get to his job site and to return home.
- For *Employment & Post-school Adult Living Objectives*: James will participate at various job sites through the community based training program to determine his area of interest. The Vocational Rehabilitation Counselor will be used as a resource. Initially his expertise will be used to help James’ determine specific job interests, abilities and talents. He will also work with the team to schedule future visits to job sites that may meet his needs.

EXAMPLE OF A COMPLETED TRANSITION SERVICES FORMAT:

Service Area	Need Yes/No	Activities/Strategies (All activities/strategies that are the responsibility of special education and are to be implemented this year must be reflected in goal sheets.)	Agency/Responsibilities
Instruction:	Yes	<ol style="list-style-type: none"> 1. Enroll in Math for Technology I class with supports. 2. Enroll in Marketing courses with supports. 	1 & 2. School will provide and pay for support in the regular education classroom.
Related Services:	Yes	Beginning in the 11 th grade: <ol style="list-style-type: none"> 1. Obtain vocational assessments and post-school employment counseling from Vocational Rehabilitation. 2. Transportation to LEA sponsored agency visits. 	<ol style="list-style-type: none"> 1. The school and Vocational Rehabilitation will be responsible. The school participates in the state’s Vocational Rehab. Counseling program. 2. School will provide and pay.
Community Experiences:	Yes	<ol style="list-style-type: none"> 1. Obtain various bus schedules from home to mall and from school to mall. 2. Learn how to read bus schedules and how to arrive for job on time. 3. Practice riding bus from school to mall and from the mall to home. 	<ol style="list-style-type: none"> 1. Transportation to obtain bus schedules will be provided by the parents. 2. School will provide. 3. School will provide training time. Parents to provide change for fare.
Employment & Post-school Adult Living Objectives:	Yes	<ol style="list-style-type: none"> 1. Placement in job shadowing programs. (10th grade) 2. Placement in the Cooperative Work Based Learning Programs. (11th grade) 3. Placement in a Work Experience program. (12th grade) 4. Banking; checking account; money management. 	<ol style="list-style-type: none"> 1 & 2. School will provide and be responsible for the job shadowing & the cooperative work based programs. 3. Vocational Rehabilitation will provide assistance in supervision of the cooperative Work Experience Program 4. The parents will be responsible.
Daily Living Objectives: (if appropriate)	No		
Functional Vocational Evaluation: (if appropriate)	No		

16. DOCUMENTATION OF OTHER AGENCY PARTICIPATION:

Documentation of other agency participation in planning and the person responsible for contacting agency(s) if a representative did not attend: _____

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DIRECTIONS: If an invited agency chooses not to attend or cannot attend, document the name of the person who is to contact the agency to discuss their involvement in planning transition services for the student and to invite the agency to the next meeting to discuss these services.

POINT TO REMEMBER:

- If a participating agency fails to carry out the responsibilities outlined in the IEP, the LEA is responsible for reconvening the IEP Team to identify alternative strategies to meet the transition objectives for the student.

QUESTIONS TO ANSWER:

- Are agency representatives present at the table?
 - If yes, who is present and what is their responsibility, if any.
 - If no, have efforts to involve them been documented?
- Who is responsible for contacting them and making them aware of their proposed responsibilities?

EXAMPLE OF OTHER AGENCY PARTICIPATION:

Documentation of other agency participation in planning and the person responsible for contacting agency(s) if a representative did not attend: The Invitation to a Meeting was sent to all agencies involved. The Vocational Rehabilitation Counselor and the JTPA representative attended the meeting. However, the representative from the Vocational-Technical School did not attend. He will be contacted by (person responsible) to discuss the school's involvement in planning transition services.

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17. DOCUMENTATION OF STUDENT'S PREFERENCES & INTERESTS, IF NOT IN ATTENDANCE:

If the student was not in attendance, how were the student's preferences and interests considered? (Check all that apply.)
 Student interview Student survey Student portfolio Vocational Assessments
 Interest Inventory Other: _____

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DIRECTIONS: Check all materials that are available for consideration by the IEP Team.

POINT TO REMEMBER:

- All assessed areas concerning a student's preferences and interest should be included.

QUESTION TO ANSWER:

- If the student chooses not to attend the meeting, what other means were used to gather information about his/her interest, preferences or needs?

EXAMPLE OF STUDENT’S PREFERENCES AND INTERESTS, IF NOT IN ATTENDANCE

<p>If the student was not in attendance, how were the student's preferences and interests considered? (Check all that apply.)</p> <p><input checked="" type="checkbox"/> Student interview <input type="checkbox"/> Student survey <input type="checkbox"/> Student portfolio <input checked="" type="checkbox"/> Vocational Assessments</p> <p><input checked="" type="checkbox"/> Interest Inventory <input type="checkbox"/> Other: _____</p>

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Student’s Name _____ Goal _____ of _____

Area of Need: _____ Personnel/Position Responsible: _____

Annual Goal: _____

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Criteria for Mastery	Methods of Evaluation	Actual Date(s) & Results of Evaluation
1.				
2.				
3.				
4.				

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MEASURABLE ANNUAL GOALS & SHORT-TERM INSTRUCTIONAL OBJECTIVES

18. AREA OF NEED

DIRECTIONS: All exceptional areas listed under "Present Levels of Performance" on the IEP must be addressed on a goal page.

POINTS TO REMEMBER:

- It is acceptable to address more than one exceptional area on a single goal page.
- Address exceptional area(s); not subject(s)/class(es).

SUGGESTED QUESTIONS TO ANSWER:

- Does the area of need relate to the present level of performance?
- Is every exceptional area covered within a goal sheet?
- Are needed transition services addressed?

19. ANNUAL GOAL

DIRECTIONS: Develop an annual goal for each identified exceptional area.

POINTS TO REMEMBER:

- There should be a **direct** relationship between the annual goals and the child’s needs as identified in the Present Levels of Performance section of the IEP.
- Annual goals are written to address a weakness identified in the Present Levels of Performance.
- Progress toward meeting the annual goals should be measured through the short-term objectives/benchmarks that are listed on the IEP.
- The goal should describe what the student can reasonably be expected to accomplish within a twelve month period as a result of the provision of special education and related services.
- Written annual goals should generalize across programs and be written to address the **unique** needs of the student.

NOTE: There are no federal or state regulations that address how annual goals should be written. It is the feeling of the department that annual goals should not be written to address specific curriculum or course requirements in general education classes nor should they be written to address specific programs in which the child will participate. Criteria for mastery may be included in the annual goal and short-term objectives or under the short-term objectives only.

SUGGESTED QUESTIONS TO ANSWER:

- What is a reasonable expectation for the student to achieve in a year?
- Does/Do the annual goal(s) relate to the exceptional area(s)?

EXAMPLES OF AN ANNUAL GOAL, INCLUDING AREA OF NEED & PERSONNEL/POSITION RESPONSIBLE:

Annual Goal #1:

Area of Need: Behavior Personnel/Position Responsible: Resource teacher

Annual Goal: Sally will use a self-management strategy to control her anger.

Annual Goal #2:

Area of Need: Broad Reading Skills Cluster Personnel/Position Responsible: Resource teacher

Annual Goal: Kathy will read at the 4th grade level with fluency and comprehension.

Annual Goal #3:

Area of Need: Communication/Language Personnel/Position Responsible: Speech teacher

Annual Goal: When entering the classroom, Jim will use his Link Communicator and gestures to initiate greetings with peers and teachers, 9 out of 10 times.

Annual Goal #4:

Area of Need: Transition/Employment Personnel/Position Responsible: Work-based Learning Coordinator

Annual Goal: Mary will successfully perform the job duties of receptionist at a work-base site for one semester as measured by her site performance evaluations.

Annual Goal #5:

Area of Need: Organization/Behavior Personnel/Position Responsible: Resource teacher

Annual Goal: Johnny will independently prepare for each class.

20. PERSONNEL/POSITION RESPONSIBLE

DIRECTIONS: Write the person **or** his/her position that will be responsible for overseeing the implementation of the goal and short-term objectives.

POINT TO REMEMBER:

- It is not a requirement to list the responsible person's name. The position **or** name may be used or both may be written.

SUGGESTED QUESTION TO ANSWER:

- What position does the person hold?
OR
- What is the person's name who is responsible?

21. SHORT-TERM OBJECTIVES/BENCHMARKS

DIRECTIONS: Develop several short-term objectives/benchmarks that indicate progress toward achieving the annual goal.

POINTS TO REMEMBER:

- Short-term objectives are sequential, intermediate steps between a student's present levels of performance and the annual goal and serve as milestones for indicating a child's progress.
- Short-term objectives are not as detailed as a teacher's lesson plans for the child.
- Short-term objectives/benchmarks should provide an overview of what is to be taught during the length of this IEP.
- Benchmarks describe the amount of progress the child is expected to make within a specified time period during the year.
- Short-term objectives/benchmarks should be written so that another teacher, parents or anyone who is involved can read and understand what is to be achieved, in what manner it is to be done and when it is to be done.
- If a lack of progress is being shown over a period of time, the IEP Team should reconvene to determine if it is appropriate to revise the goal and/or the short-term objectives.
- Short-term objectives should generalize across programs and be written to meet the **unique** educational needs of the student.

NOTE: There are no federal or state regulations that address how short-term objectives should be written. It is the feeling of the department that short-term objectives should not be written to address specific curriculum or course requirements in general education classes nor should they be written to address specific programs in which the child will participate.

SUGGESTED QUESTIONS TO ANSWER:

- Is the objective related to the annual goal?
- Is the objective clear and concise and written in a language that everyone can understand?
- Is the statement measurable?
- Is the statement broad so different methodologies can be incorporated?
- Is it child specific?

ANNUAL GOALS WITH EXAMPLES OF SHORT-TERM OBJECTIVES:

Annual Goal #1: Sally will use a self-management strategy to control her anger.

Benchmarks/Short-Term Instructional Objectives
1. Sally will verbalize the steps to her self-management strategy.
2. Sally will initiate her anger control self-management strategies.
3. Sally will correctly use her anger control strategy with prompting.
4. Sally will correctly use her anger control strategy.

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Annual Goal #2: Kathy will read at the 4th grade level with fluency and comprehension.

Benchmarks/Short-Term Instructional Objectives
1. Kathy will follow oral and written directions given by the teacher to improve comprehension.
2. Kathy will read selected material to identify story details, main idea, cause and effect relationships, sequence events and make predictions to improve comprehension.
3. Kathy will reciprocally read selected material aloud with a peer or teacher to improve fluency.
4. Kathy will listen to stories on tape to gain fluency.

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Annual Goal #3: When entering the classroom, Jim will use his Link Communicator and gestures to initiate greetings with peers and teachers, for 9 out of 10 times.

Benchmarks/Short-Term Instructional Objectives
1. Given role playing situations, Jim will use his Link Communicator and gestures to greet peers.
2. When entering PE, Jim will use his Link Communicator and gestures to greet the PE teacher and at least 2 different peers.
3. Jim will enter three different classrooms and use his Link Communicator and gestures to greet at least 3 different people.

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Annual Goal #4: Mary will successfully perform the job duties of receptionist at a work-base site for 1 semester as measured by her site performance evaluations.

Benchmarks/Short-Term Instructional Objectives
1. Mary will appropriately answer the telephone and take messages.
2. Mary will accurately file the special education forms for the special education supervisor.
3. Mary will appropriately respond to supervisor directions and corrections.
4. Mary will initiate and maintain conversation (at least 3 sentences) with a coworker during scheduled breaks.
5. Mary will achieve satisfactory performance evaluations.

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Annual Goal #5: Johnny will independently prepare for each class.

Benchmarks/Short-Term Instructional Objectives
1. Johnny will prepare for class using a checklist initialed by the teacher.
2. Johnny will prepare for class using a self-monitoring checklist.
3. Johnny will consistently be prepared for class.

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22. ANTICIPATED BEGINNING DATE

DIRECTIONS: Write the *anticipated* date when instruction of this objective/benchmark will begin.

POINTS TO REMEMBER:

- This is the *approximate* date when instruction of this objective/benchmark should begin. It is acceptable if you are not able to address the short term objective at the date given or if you address the objective prior to the date provided.
- When reviewing the goal sheet, the "Anticipated Beginning Dates" should cover the school year in sequential order. Teachers should include the month and year in the date or the time period/grading period it will be offered.

SUGGESTED QUESTION TO ANSWER:

- Is there an anticipated beginning date for providing instruction for each short-term objective or benchmark listed on the IEP Goal Sheet?

EXAMPLE OF ANTICIPATED BEGINNING DATE:

Annual Goal #1: Sally will use a self-management strategy to control her anger.

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date
1. Sally will verbalize the steps to her self-management strategy.	8/00
2. Sally will initiate her anger control self-management strategies.	11/00
3. Sally will correctly use her anger control strategy with prompting.	2/01
4. Sally will correctly use her anger control strategy.	4/01

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23. CRITERIA FOR MASTERY

Codes		
Criteria for Mastery	Methods of Evaluation	Results of Evaluation
1. 100% 2. 90% 3. 80% 4. 70% 5. Other: _____	1. Standard Tests 2. Teacher-Made Tests 3. Teacher Observations 4. Other: _____	M – Objective Met – Proceed to Next Objective C - Continue with same objective- Some progress made, more time needed D - Discontinue objective – Less than expected or no progress made

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DIRECTIONS: Indicate what criteria the student must meet in order to master the annual goal. (Refer to the "Codes" section on the goal sheet of the IEP.) Be sure to consider both accuracy and reliability. (Accuracy is how well you expect the child to perform the task, such as 80%; reliability is the frequency at which mastery is demonstrated, such as 4 out of 5 times.)

POINTS TO REMEMBER:

- The codes at the bottom of the goal page may be used or the IEP Team may determine different criteria for mastery.
- If other criteria for mastery are utilized, they should be recorded in the IEP.

SUGGESTED QUESTIONS TO ANSWER:

- What percentage/ratio should be utilized for each benchmark or short-term objective in order to show mastery?
- What is an acceptable level of proficiency that leads toward the expected goal?
- Should the percentage of mastery change over time?

EXAMPLE OF CRITERIA FOR MASTERY:

Annual Goal #1: Sally will use a self-management strategy to control her anger .

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Criteria for Mastery
1. Sally will verbalize the steps to her self-management strategy.	8/00	2
2. Sally will initiate her anger control self-management strategies.	11/00	3
3. Sally will correctly use her anger control strategy with prompting.	2/01	3
4. Sally will correctly use her anger control strategy.	4/01	4

24. METHODS OF EVALUATION

DIRECTIONS: Indicate the method used to evaluate each short-term objective/benchmark. (Refer to the "Codes" section on the goal sheet of the IEP.)

POINTS TO REMEMBER:

- The codes at the bottom of the goal page may be used **or** the IEP Team may determine other methods of evaluation.
- If other methods of evaluation are utilized, they should be recorded in the IEP.

SUGGESTED QUESTIONS TO ANSWER:

- What is an appropriate way to measure the benchmark/short-term objective?
- Would tests, portfolios, end-of-chapter assessments, observations, or other means be appropriate?

EXAMPLE OF METHODS OF EVALUATION:

Annual Goal #1: Sally will use a self-management strategy to control her anger.

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Criteria for Mastery	Methods of Evaluation
	Refer to	"Codes" Section below	
1. Sally will verbalize the steps to her self-management strategy.	8/00	2	3
2. Sally will initiate her anger control self-management strategies.	11/00	3	3
3. Sally will correctly use her anger control strategy with prompting.	2/01	3	3
4. Sally will correctly use her anger control strategy.	4/01	4	3

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25. ACTUAL DATE & RESULTS OF EVALUATION

DIRECTIONS: Enter the date and results when the child is evaluated on a short-term objective.

POINT TO REMEMBER:

- Some short-term objectives/benchmarks may have more than one date before mastery is obtained.

SUGGESTED QUESTIONS TO ANSWER:

- Has the child mastered or met the objective/benchmark?
- Is more time necessary?
- Does the objective/benchmark need to be adjusted or discontinued?

EXAMPLE OF ACTUAL DATE(S) & RESULTS OF EVALUATION:

Annual Goal #1: Sally will use a self-management strategy to control her anger.

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Criteria for Mastery	Methods of Evaluation	Actual Date(s) & Results of Evaluation
	Refer to	"Codes" Section below		
1. Sally will verbalize the steps to her self-management strategy.	8/00	2	3	9/8/00 78% 9/22/00 85%
2. Sally will initiate her anger control self-management strategies.	11/00	3	3	
3. Sally will correctly use her anger control strategy with prompting.	2/01	3	3	
4. Sally will correctly use her anger control strategy.	4/01	4	3	

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26. REPORT OF PROGRESS

Report of Progress					
1st	2nd	3rd	4th	5th	6th

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Report of Progress	
<ol style="list-style-type: none"> No progress made*  Very little progress being made toward goal* Some progress being made towards goal, or Goal has been met.  <p>And</p> <ol style="list-style-type: none"> Anticipate meeting goal by IEP end, or Do not anticipate meeting goal by IEP end. <p>N/A Not Applicable. Objective not covered during this grading period.</p>	<p>*If 1 or 2, due to:</p> <ol style="list-style-type: none"> Lack of prerequisite skills, More time needed, Inadequate assessment, Excessive absences/tardies, or Other: _____.

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DIRECTIONS:

In the top triangle: Refer to choices #1 - #4 listed on the bottom of the page. Indicate progress toward meeting the objective. (If either #1 or #2 are indicated, use explanation codes "Due to...")

In the bottom triangle: Indicate current status of choices #5 or #6 listed on the bottom of the page. If the objective is not being taught this grading period, indicate by writing "N/A".

POINTS TO REMEMBER:

- A progress report must be completed for each reporting period.
- Progress must be reported on the objective/benchmark that leads toward the annual goal.
- If the objective/benchmark was not taught during a particular reporting period, write N/A.
- A report of progress must be sent to parents of children with disabilities at least as often as reports are sent to parents of non-disabled children.

SUGGESTED QUESTION TO ANSWER:

- Has sufficient progress been made that will enable the child to achieve the annual goal by the end of the IEP?

EXAMPLE OF REPORT OF PROGRESS:

Annual Goal #1: Sally will use a self-management strategy to control her anger.

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Criteria for Mastery	Methods of Evaluation	Actual Date(s) & Results of Evaluation	Report of Progress			
					1st	2nd	3rd	4th
1. Sally will verbalize the steps to her self-management strategy.	8/00	2	3	9/8/00 65% 9/22/00 85%	4			
2. Sally will initiate her anger control self-management strategies.	11/00	3	3		N/A			
3. Sally will correctly use her anger control strategy with prompting.	2/01	3	3		N/A			
4. Sally will correctly use her anger control strategy.	4/01	4	3		N/A			

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Individual Education Program

27. SUPPLEMENTARY AIDS/SERVICES & SUPPORTS FOR THE STUDENT

Supplementary Aids/Services and Supports for the Student: _____ _____ _____

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Individual Education Program

DIRECTIONS: List any specific aids, services, modifications and/or supports that are **unique to this child** that would enable him/her to progress in the general curriculum.

Write N/A if not applicable for this child.

POINTS TO REMEMBER:

- List any specific modifications and/or supports needed, that are unique to this child, such as the need for textbooks in Braille, assistive technology or communication needs.
- This is not material and services already in place for all children.
- Specific methodology should not be listed.
- The term "**supplementary aids and services**" is defined as aids, services and other supports that are provided in regular education classes or other education-related settings to enable a child with a disability to be educated with non-disabled children.

SUGGESTED QUESTIONS TO ANSWER:

- Does the child need any special services, devices, or aids that are not usually provided to eligible children?
- What is necessary to assist this child with his/her unique needs to complete this goal?
- What supplementary aids and services are needed to enable this child to participate in the regular class, extracurricular, and other nonacademic activities?

EXAMPLE OF SUPPLEMENTARY AIDS, SERVICES & SUPPORTS:

Supplementary Aids/Services and Supports for the Student: <u>Social Skills training, Nursing services for Catherization, Auditory trainer (FM), Link Communicator</u>

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Individual Education Program

28. PROGRAM MODIFICATIONS/SUPPORTS FOR SCHOOL PERSONNEL

Program Modifications/Supports for School Personnel: _____ _____ _____
--

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Individual Education Program

DIRECTIONS: List any specific program modifications or program supports school personnel need in order to address the unique needs of this child. If none are needed, write "None" or "N/A".

POINTS TO REMEMBER:

- This is not a place to indicate additional personnel.
- Some examples of program modifications/supports to school personnel would be: in-services dealing with specific topics, consultation with someone knowledgeable about a particular discipline, workshops, additional materials, specific teaching strategies, instruction on how to use equipment or how to utilize a program.

SUGGESTED QUESTION TO ANSWER:

- In order to address the unique needs of the child, are there any program modifications and/or supports that need to be provided to school personnel?

EXAMPLE OF PROGRAM MODIFICATIONS/SUPPORTS:

Program Modifications/Supports for School Personnel: In-services dealing with autism: strategies for teaching and different types of teaching methodologies

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Individual Education Program

29. DATE OF PROGRESS REPORT

DIRECTIONS: Document the date that the progress report was sent home to the parents.

POINT TO REMEMBER:

- Parents are not required to sign progress reports and return them to the school.
- Retain original for your records.

Date Progress Report Sent to Parents;

1st Grading Period _____

2nd Grading Period _____

3rd Grading Period _____

4th Grading Period _____

5th Grading Period _____

6th Grading Period _____

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30. REGULAR PROGRAM PARTICIPATION

Regular Program Participation: Indicate the appropriate subject area letter beside all modifications that are to be used by the student in the regular program.

Classroom Accommodations/Modifications:	Assignment Accommodations/Modifications:												
<input type="checkbox"/> Preferential seating <input type="checkbox"/> Provide copies of material to be copied from book or board <input type="checkbox"/> Provide copies of notes (from another student) <input type="checkbox"/> Peer tutoring <input type="checkbox"/> Behavior/performance contracting <input type="checkbox"/> Highlighted textbook (student) <input type="checkbox"/> Taped materials <input type="checkbox"/> Other: _____	<input type="checkbox"/> Assignment book <input type="checkbox"/> Abbreviated assignments <input type="checkbox"/> Additional time <input type="checkbox"/> Study guide <input type="checkbox"/> Extra grade opportunities (Re-do items missed, extra credit) <input type="checkbox"/> Compacting <input type="checkbox"/> Other: _____												
<p>Classroom Testing Accommodations/Modifications: (In order to justify appropriateness of accommodations for any state mandated tests, the testing accommodations listed below should be used consistently within a student's academic program over the previous year.)</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Extended Time</td> <td><input type="checkbox"/> Modify grading scale (Pass/Fail or points)</td> </tr> <tr> <td><input type="checkbox"/> Reading aloud/sign for internal instructions</td> <td><input type="checkbox"/> Oral Testing</td> </tr> <tr> <td><input type="checkbox"/> Reading aloud/sign for test items</td> <td><input type="checkbox"/> Modify test format (word bank, multiple choice, short answer)</td> </tr> <tr> <td><input type="checkbox"/> Repeating oral directions verbatim</td> <td><input type="checkbox"/> Abbreviated concepts tested</td> </tr> <tr> <td><input type="checkbox"/> Use of calculator</td> <td><input type="checkbox"/> Other: _____</td> </tr> <tr> <td><input type="checkbox"/> Word processor with or without talk-text technology</td> <td></td> </tr> </table>		<input type="checkbox"/> Extended Time	<input type="checkbox"/> Modify grading scale (Pass/Fail or points)	<input type="checkbox"/> Reading aloud/sign for internal instructions	<input type="checkbox"/> Oral Testing	<input type="checkbox"/> Reading aloud/sign for test items	<input type="checkbox"/> Modify test format (word bank, multiple choice, short answer)	<input type="checkbox"/> Repeating oral directions verbatim	<input type="checkbox"/> Abbreviated concepts tested	<input type="checkbox"/> Use of calculator	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Word processor with or without talk-text technology	
<input type="checkbox"/> Extended Time	<input type="checkbox"/> Modify grading scale (Pass/Fail or points)												
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<input type="checkbox"/> Repeating oral directions verbatim	<input type="checkbox"/> Abbreviated concepts tested												
<input type="checkbox"/> Use of calculator	<input type="checkbox"/> Other: _____												
<input type="checkbox"/> Word processor with or without talk-text technology													
a. All Subjects	b. Reading	c. English	d. Spelling	e. Math	f. Science								
g. Social Studies	h. History	i. Health	j. Economics	k. Physical Education	l. Music/Art								
m. Vocational	n. Lunch	o. Library	p. Title I	q. Other:									

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Individual Education Program

DIRECTIONS:

The IEP Team should determine what accommodations/modifications, if any, the child needs in order to access the general curriculum. The accommodations/modifications should be based on the child's needs as they relate to his/her disability.

Indicate the subject area(s) in which accommodations/modifications will be provided by inserting the appropriate letter(s) in front of the modification.

POINTS TO REMEMBER:

- The information from pages one and two of the IEP should lead into this section.
- All modifications listed by the IEP Team should have clear descriptions so that no misunderstandings occur in this area.
- Modifications should be specific so that all persons involved understand what they are expected to modify.
- The modifications listed on the IEP are **not** all inclusive. There are many other modifications and support strategies that may be written into this section.
- *Classroom Testing Accommodations* can be utilized in **any** educational setting, including special education classes.
- In order to use "Special Accommodations" with all TCAP assessments, classroom testing accommodations /modifications must be documented in the IEP and should be used consistently with a child over the previous year.
- For clarification purposes, the following definitions are being utilized.

Accommodations - Any supports or services that will help a student access the curriculum and validly demonstrate learning. (CEC-Council for Exceptional Children)

Accommodations in assessment - The alteration in how a test is presented to the test taker or how the test taker responds; includes a variety of alterations in presentation format, response format, setting in which the test is taken, timing or scheduling. The alterations do not substantially change level, content or performance criteria. The changes are made in order to level the playing field, that is, to provide equal opportunity to demonstrate what is known. (NCEO-National Council for Educational Outcomes)

Adaptations - Changes made to assessment practices that allow students to participate in the assessment. Adaptations include (1) accommodations and (2) modifications. (NCEO)

Modification - Refers to any educational plans that change the content and performance expectations for what students should learn. For example, the IEP Team may deem it inappropriate to ask a student to master every performance standard listed. (CEC)

OR

Substantial changes in what a student is expected to learn and/or demonstrate. The changes include changes in instructional level, content, and performance criteria, as well as changes in test form or format. (NCEO)

SUGGESTED QUESTIONS TO ANSWER:

- How does this child learn best?
- What modifications are needed in order for this child to access the general curriculum?
- Are the modifications appropriate to the child's area(s) of exceptionality?
- Have these modifications been used consistently in the classroom?

31. STATE MANDATED TESTS

State/District Mandated Tests: (Check either Number 1 or Number 2. When utilizing accommodations 1A, 1B or 2, the appropriate addendum must be attached to this IEP.)

1. Student will participate in the following state/district mandated assessment(s):

HSSM/End of Course Test(s):

TCAP Achievement _____

TCAP Writing _____

TCAP Competency/Gateway Test _____

Language/English II Score: _____ Date Passed: _____ Exit Exam (Specify which test): _____

Math/Algebra I Score: _____ Date Passed: _____ Work Keys ACT SAT

Biology I Score: _____ Date Passed: _____ District Assessment: _____

(Check either A and/or B when using accommodations for the TCAP or TCAP-Alt: ASA.)

A. State Mandated Assessment with Allowable State Accommodations

B. State Mandated Assessment includes Special Conditions Accommodations.

2. Student will participate in State Mandated Alternate Assessment (TCAP-Alt).

A. TCAP-Alt: ASA _____ Achievement Level (Check Accommodations Above)

B. TCAP-Alt: PA _____

INSTRUCTIONS FOR COMPLETING THE ACCOMMODATIONS' ADDENDUMS

NOTICE: These instructions are to be used for children who will be participating in the TCAP utilizing Allowable State Accommodations, Special Conditions Accommodations, and for children who meet participation criteria for the TCAP-Alt.

State/District Mandated Tests

The 1997 Reauthorization of IDEA states that **all students must be included in state, regional, and district large-scale assessments, with results from assessments reported and findings aggregated with the total school population. This means there can be NO EXEMPTIONS from State Mandated Assessments.** Therefore, all students will be participating in the TCAP Assessments given at state-scheduled predetermined grade levels:

TCAP Achievement	Grades 3-8
TCAP Writing	Grades 4, 7, and 11
TCAP Competency	Grades 9-12 – Required for Graduating Classes: 2001-2004
TCAP Gateway Tests	Grades 9-12 – Required for Graduating Classes: Spring 2005
TCAP High School Subject Matter Tests (HSSMT)	Taken at completion of specified course(s)
TCAP End-of-Course Tests (EOC)	Taken at completion of specified course(s)

NOTE: If a system chooses to administer a non-mandated system-wide assessment, appropriate policy would be to implement Special Conditions Accommodations.

Students will take the Tennessee Comprehensive Assessment Program (TCAP) Assessment (listed above), or the Tennessee Comprehensive Assessment Program-Alternate (TCAP-Alt). The IEP Team must complete #1 or #2 of the State-Mandated Tests Section of the IEP. For students who will be participating in the TCAP utilizing Allowable State Accommodations, Special Conditions Accommodations and for those children who meet participation criteria for the TCAP-Alt (approximately 1% to 2 % of the Total School Population), refer to the *Instructions for Accommodations Addendum*.

Students taking the TCAP State Mandated Tests may take the test with:

- a. No Accommodations
- b. Allowable State Accommodations
- c. Special Conditions Accommodations

1.) Student will participate in the following State Mandated Assessments

For each test listed, indicate “yes” or “N/A”. If the student’s grade placement is scheduled for a state mandated test, write “yes” in the space next to the test. If the TCAP assessment is not administered at the student’s grade level, write “N/A” in the space next to the test.

1(A.) State Mandated Assessment with Allowable State Accommodations

(NOTE: If this accommodation is not used throughout a student's daily education, it is not advisable to use the Allowable Accommodations during assessment.)

When Allowable State Accommodations are to be used with the TCAP assessment, place a check mark next to A. The page included in this manual entitled Allowable State Test Accommodations ADDENDUM should be used when the IEP Team is making decisions about accommodations. This addendum must be attached to the IEP when the TCAP is given. Although all students can receive the State Allowable Accommodations, the Allowable State Test Accommodations ADDENDUM, are to be attached to the IEP, as all decisions about accommodations are made through the IEP Team and thus become part of the student’s Individual Education Program. Special education personnel are not responsible for administering Allowable Accommodations to students without disabilities.

ALLOWABLE STATE TEST ACCOMMODATIONS ADDENDUM

Any departure from **standardized test procedures** can potentially invalidate the test results. The **test validity is seriously threatened by modifications** that change the nature of the task being tested. The following accommodations of administrative procedures are allowed to make administration easier in certain cases.

Allowable Accommodations: TCAP accommodations are very limited. Students may not have extra time allotments or use any accommodations not listed below.

- **Revised Format** - Refers to Large Print and Braille editions. Any revised format must be requested in advance. Large Print and Braille may require different editions of the test or a different test. When administering the Achievement Test, refer to the Teacher's Notes to Braille Edition for directions (including standardized time limits for the Braille version of the TCAP). "Readers" for illustrations and graphs are also permitted with the Braille version of the TCAP assessments. Extended time for students using Large-Print editions of the TCAP assessment is not applicable as an Allowable Accommodation.
- **Signing Directions** - Refers to one-on-one signing of directions for hearing-impaired students only with directions normally read aloud to students. Nothing but the spoken portions of the directions can be signed to the student.
- **Flexible Setting** - Students may take the TCAP assessment in an individual or small group setting. Other options include: the student seated in the front of the room, in a study carrel, taking the test in the special education classroom, or at home if the student is homebound (with appropriate documentation).
- **Other Allowable Accommodations** - May include magnifying devices, use of templates to reduce the amount of visible print on a page, masks, pointers and abacus.
- **Auditory Aids** - Only students who have taken tests orally throughout the student's school career will be allowed to use auditory aids. Auditory aids include amplification devices and devices that are used as noise buffers. A tape recording can be used for the Competency Test only. Tape recordings are primarily used with visually impaired students who do not read

Braille or cannot read large-print text. A tape recording requires special permission from Testing Services. Please contact your principal or guidance counselor about receiving special permission for a taped recording.

- **Flexible Scheduling**—Refers to giving the TCAP Achievement subtests a few at a time during the day. Each subtest must be taken during the given time allotment although the teacher has the option to give only 1 or 2 subtests at a time instead of the recommended regimen. Extended breaks may also be given to the student. It is allowable to give the student the Competency Test in short subsections. This is not a timed test and the student can take as much time as needed per subtest. If testing within a subtest extends beyond one school day, notify the LEA Testing Coordinator who will then contact Testing Services for special instructions.
- **Recording Answers** - Students who cannot mark their own answer sheets may use an impartial proctor, who will transcribe them onto an answer sheet. Students who cannot bubble sheets may record directly in the test booklet or on a separate piece of paper. This accommodation requires special return packing procedures. Please contact your LEA Test Coordinator for packing instructions.

Notice: Use of accommodations such as reading internal test directions and test items, or increasing time limits would invalidate the test results. Accommodations must be limited to those listed above in order to have valid results. Requests for any type of accommodation other than those listed above must be agreed upon by the student's IEP Team and must be indicated on the student's IEP. For further information contact the Division of Special Education at (615) 741-2851.

1(B.) State Mandated Assessment includes Special Conditions Accommodations

Only special education students who meet the required conditions for the special accommodations may use “Special Conditions Accommodations”. If the student does meet the criteria for the Special Conditions Accommodations, place a check mark next to B. The *Special Conditions Accommodations* ADDENDUM must be attached to the IEP as documentation for Special Conditions Accommodations. Special Education personnel are responsible for administering Special Conditions Accommodations. Please refer to the document entitled “Instructions for Completing the Accommodations’ Addendum” for detailed instructions on completing the *Special Conditions* Addendum, which can be found at <http://www.state.tn.us/education/seiephm.htm>.

2. Student will participate in State Mandated Alternate Assessment (TCAP-Alt)

This section is completed when the student meets the participation criteria for the Alternate Assessment. When the IEP Team has made this determination, all items under #1 may be skipped, and the information under #2 should be completed. The IEP Team will place a check mark in the space provided next to the statement #2 “Student will participate in State Mandated Alternate Assessment (TCAP-Alt), and attach this addendum to the IEP.

2(A.) TCAP-Alt: (ASA) Academic Skills Assessment

2(B.) TCAP-Alt: (PA) Portfolio Assessment

After the IEP Team has agreed that the student meets participation criteria for the Alternate Assessment, a determination is made as to whether the student will participate in TCAP-Alt: (ASA) or TCAP-Alt: (PA). When TCAP-Alt: (ASA) is the most appropriate TCAP assessment, place a check mark next to 2(A), and enter the level of TCAP Achievement (Terra Nova) the student will take. When the TCAP-Alt: (PA) is the most appropriate TCAP assessment, place a check mark next to 2(B).

DIRECTIONS FOR COMPLETING TCAP-Alt PARTICIPATION FORM:

Please refer to the instruction pamphlet entitled "Instructions for Completing the Accommodations' Addendum" for detailed instructions on completing the *Special Conditions Addendum* and the *TCAP-ALT Participation Addendum*. It can be located at <http://www.state.tn.us/education/seiephm.htm>.

QUESTIONS TO ANSWER:

- What modifications are in place for the student during instruction, demonstration and mastery in the regular classroom?
- Are those same modifications necessary and appropriate in order for the student to demonstrate knowledge and skills in the statewide assessments?
- Are any additional modifications or accommodations necessary in the administration of statewide assessments?
- If using the TCAP-Alt, have the modifications/accommodations been used consistently with the child during the previous year?

NOTE: Please refer to the instruction pamphlet entitled "Instructions for Completing the Accommodations' Addendums" for detailed instructions on completing the *Special Conditions Addendum* and the *TCAP-ALT Participation Addendum*. It can be located at <http://www.state.tn.us/education/seiephm.htm>.

32. SPECIAL EDUCATION AND RELATED SERVICES

Special Education and Related Services:					
Service Code and Type of Service	Sessions Per Week/Mo/Yr	Time per Session	Hours Per Week	Beginning/Ending Dates	Location of Services
01 Consultation	____/____	____	____/____	____/____	____
____	____/____	____	____/____	____/____	____
____	____/____	____	____/____	____/____	____
02 Direct Special Education (For Inclusion, refer to State Instruction Booklet under "Type of Service" section.)	____/____	____	____/____	____/____	____
____	____/____	____	____/____	____/____	____
____	____/____	____	____/____	____/____	____
____	____/____	____	____/____	____/____	____
03 Supervision (Option 8 only)	____/____	____	____/____	____/____	____
Related Service(s), including Instruction from Specialized Personnel					
____	____/____	____	____/____	____/____	____
____	____/____	____	____/____	____/____	____
____	____/____	____	____/____	____/____	____
Related Service Codes:					
04 Psychological Services			12 Orientation & Mobility Services	20 Work-Based Learning	
05 Social Work Services			13 Audiology Services		
06 Occupational Therapy			14 Other Services		
07 Speech/Language Pathology Services			15 Ancillary - Attendant		
08 Recreation Services			16 Ancillary - Interpreter		
09 Physical Therapy			17 Ancillary - Other		
10 School Health Services			18 Residential		
11 Counseling Services			19 Homebound/Hospital		
Total Regular Education hours per week: _____			Total Special Education hours per week: _____		

DIRECTIONS: This section of the IEP includes a detailed description on all special education and related service to be received by the student. The following information is needed for each service provided:

- a) Type of service (see definitions below). Include a brief description of the service.
- b) Number of sessions and appropriate unit of time - week, month, and year.
- c) Length of each session - hours and minutes (exact time - not class periods); cannot round off minutes to the closest half-hour or hour.
- d) Number of hours per week, if appropriate.

- e) Beginning service date and ending date by **month/day/year**.
- f) Location of each service.
- g) Total number of Regular Education hours per week and the total number of Special Education hours per week.

POINTS TO REMEMBER:

1. Type of Service

01 Consultation is provided when:

- a. The special education teacher consults with a regular classroom teacher at least twice a month.

NOTE: This consultation time is not subtracted from regular classroom time or counted as special education hours on the IEP.

- b. Direct services are provided to an eligible student for less than one hour per week.
- c. Related services are provided to an eligible student at least twice a month and less than one hour per week (3 times a year for OT/PT).

For example, a secondary student receiving Consultation Services could be listed as follows:

01	a) Math	b) 2/mo	c)	d)	e) 8/17/01 - 5/30/02	f) Resource teacher 's room (or Mrs. Smith's room)
	OT/PT	3/yr			8/17/01 - 5/30/02	PT therapist's room (or Ms. Jones' room)

- Reference material: The Division of Special Education Memorandum from Joseph Fisher, dated February 13, 1998, Subject: "Option 1 – Consultation" states..."It has been brought to our attention that the "consultation" option of service is being misused in many school systems throughout the State. Since this service generates state funds, it is imperative that appropriate consultation services are provided.

Consultation (Option 1) services are described in Tennessee as follows:

OPTION	DESCRIPTIONS	CONTACT HOURS	RECOMMENDED CASELOAD/CLASS SIZE
Option 1	a. Consulting teacher	a. Consults with regular teacher at least twice a month	a. 75 students
	b. Direct Services	b. Less than 1 hour per week	b. 75 students
	c. Related Services	c. At least twice a month and less than one hour per week (3 times a year OT/PT)	c. 75 students

Consulting teacher (a) is the service that appears to be misused in many systems. This service should be utilized when the regular classroom teacher needs guidance and support in providing an appropriate education to a student with a disability. The regular teacher may need consultation on a regular basis on particular teaching strategies, materials, communication methods, etc. that enable an eligible child to be provided an education in a regular classroom with the student's non-disabled peers.

Consultation is not merely communicating (through documentation or verbally) with the regular teacher routinely on the progress of eligible students in the regular classroom. Consultation is providing a regular teacher with guidance and support that is unique to the needs of a particular child with a disability in a regular classroom. If it is found through monitoring that students are not provided appropriate consultation services, these students will be deleted from the census. A focus monitoring may be done on some systems where consultation (Option 1) numbers are high.

Please review your method of "Consultation" to ensure that students are truly receiving consultation services. If not, we encourage you to reconvene an IEP Team and remedy the situation.

- 02 Direct Special Education - Instruction is provided to a child with a disability by a special education teacher and is designed to meet the special educational needs of an eligible child. Instruction may be provided in any setting. (Systems that have received written permission from the Tennessee Division of Special Education can utilize time provided by the educational assistant's time in the regular program that is not part of Option 8, but is used for special education inclusionary/collaborative time. However, the additional time provided by this person **cannot be counted** to raise the child's current option of service. Approved inclusionary or collaborative programs can use the range of time within the option of service specified. For additional information, refer to the Memorandum dated July 21, 2000 from Mr. Joseph Fisher titled *Counting of Inclusionary Education on IEPs & Census.*)

For example, a secondary student receiving Resource or Inclusionary instruction per day should be listed as follows:

	a)	b)	c)	d)	e)	f)
02	Resource	5/wk	: 45	3:45	8/17/01 - 5/27/02	Resource teacher's room (or Mrs. Smith's room)
02	Inclusion (4 Block)	5/wk	1:30	7:30	8/17/01 - 5/27/02	9 th grade English room (or Mrs. Jones' room)
02	Resource Lab	1-3 hrs. /wk			8/17/01 - 5/27/02	9 th grade Resource room (or Mr. Fisher's room)
02	Inclusion	5/wk	:45	3:45	8/17/01 - 5/29/02	9 th grade History (or Mr. Conger's room)

- 03 Supervision - This line only applies to Option 8 services. A special education teacher assistant supervises student(s) with disabilities in a regular program. Up to 10 hours per week of this time can be counted, as well as related services and direct services to total the 32.5 contact hours required for Option 8.

- 04 Psychological Services - Treatment services provided by a licensed school psychologist, clinical psychologist, licensed psychologist, licensed psychological examiner or psychiatrist on a routine basis at least twice a month so the child can benefit from the educational program.

- 05 Social Work Services - These services include a school social worker integrating information obtained on a child to identify those problems that are affecting the child's adjustment in school and providing counseling to a child and/or the family on a routine basis at least twice a month so the child can benefit from the educational program.
- 06 Occupational Therapy - These services are provided through direct intervention or consultation by a qualified occupational therapist. A minimum of three contacts per year by the occupational therapist is required in order to report Occupational Therapy as a related service.
- 07 Speech/Language Pathology Services - These services include the provision of speech or language services by a speech/language specialist or pathologist and is reported in the funding option for which the contact hour requirements are met. There must be a minimum of two contacts a month.
- 08 Recreation Services - This service includes assessment of leisure functions, therapeutic recreation services, recreation programs in schools and community agencies and leisure education. No funding is tied to this service, but you may use it.
- 09 Physical Therapy - These services include direct intervention or consultation provided by a qualified physical therapist. A minimum of three contacts per year is required in order to report Physical Therapy as a related service for funding.
- 10 School Health Services - These services are provided by a qualified school nurse or other qualified person and include services not normally provided for non-eligible children.
- 11 Counseling Services - This service includes counseling for children and parents by qualified social workers, counselors, or other qualified personnel and must be provided at least twice a month. Such service must be beyond that provided for non-eligible children.
- 12 Orientation & Mobility Services - These services include training in orientation and mobility, visual efficiency, listening skills and other areas related to a visual impairment provided by a certified teacher of the visually impaired or other appropriately qualified persons. These services must be provided at least twice a month.
- 13 Audiology Services - These services include an interpreter for the deaf or hearing impaired, the provision of manual communication skills, aural rehabilitation therapy and tutoring and must be provided at least twice a month. This does not include maintenance of hearing aids or diagnostic evaluation services.
- 14 Other Services - These services include related services, which are not specified above such as: Early identification and assessment of disabilities in children, Medical services, Parent counseling and training, Rehabilitation services, Transportation services, etc. No funding is tied to these service, but you may use them.
- 15 Ancillary - Attendant - A child with a disability may have such unique needs that an ancillary attendant is necessary to provide specific services a minimum of 4 hours per day in order for the child to be maintained in the regular program.
- 16 Ancillary - Interpreter - An example is a deaf student who requires a full time interpreter in order to participate in regular classes.
- 17 Ancillary - Other - Other than the ancillary services identified above.

NOTE: All ancillary services, (15, 16, 17) for funding purpose can only be provided to one or two students for a minimum of 4 hours per day in order to allow the student to be educated with non-eligible students. An example of this is a physically impaired student requiring a full time attendant in order to participate in the regular program.

- 18 Residential Services - A special residential program is provided for a child whose disability characteristics are so profound or complex that continuous intervention is required to meet his/her education needs (provided 24 hours per day). No special education services offered in a CDC or self-contained program can adequately or appropriately meet these needs. (The local system is responsible for the total program.)
- 19 Homebound/Hospital Services - Home or hospital instruction may be provided to continue the educational advancement of eligible students who are not able to attend school. Minimum time is 3 hours per week. The IEP Team determines actual hours.
- 20 Work-Based Learning (WBL) – Work-based Learning may be provided to students through their transition plan in the IEP under the supervision of a teacher who is qualified and trained as a work-based learning coordinator and/or WBL supervising teacher. When recording this service, it is **not** counted under “02 Direct Special Education” services. It must be counted as a related service and is limited to 8 hours a week for funding purposes. That would mean that a student who is served under a block schedule could be counted up to 7 ½ hours a week and a student who is served under a regular schedule could be counted up to 5 hours a week. The IEP Team may determine that the student should participate in WBL experiences for a longer time period; however, the funding will not go beyond the 8-hour limit. (Refer to the *Work-Based Learning Policies, Procedures, and Resources* manual for teacher qualifications and program policies.)

PAGE 5 OF THE IEP – TOP SECTION

LRE and General Education:

Explain the extent, if any, in which the student **will not** participate with non-disabled peers in:

- ◆ the regular class: _____

- ◆ extracurricular and nonacademic activities:

- ◆ his/her LEA Home School:

Special Transportation: Does student require special transportation? ___ Yes ___ No. If yes, please explain: _____.

Extended School Year: Date ESY program was/will be determined: _____. ESY program _____ is _____ is not to be provided.

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Individual Education Program

33. LRE and GENERAL EDUCATION

DIRECTIONS: Write a statement with specific reasons if this child is being removed from the regular class & not being educated with his peers. Include a statement that provides the reason(s) why the child is not participating in extra-curricular and non-academic activities, if the child is placed away from his/her home school.

POINTS TO REMEMBER:

- In this section ALL three factors must be justified if applicable to the student. They are:
 - The extent to which the child **will not** participate in the regular class;
 - The extent to which the child **will not** participate in extracurricular and non-academic activities; and
 - The reason for placement if other than the LEA/Home school.

- Do **not** justify why the child is in special education based on a specific category of disability. Justify why the child cannot remain in and participate in regular classes with his non-disabled peers utilizing appropriate modifications and accommodations.
- If the second statement is not justified in this section, indicate where in the IEP this information is located.
- The third statement must be justified if this is not the student’s home school. If it is the student’s home school, write N/A.

SUGGESTED QUESTIONS TO ANSWER:

- Can the general curriculum provide specialized materials required to master the goals and objectives outlined in the IEP?
- Can the general curriculum include the specialized instructional strategies/goals outlined in the IEP? Such as community-based training, work adjustment, Braille, or discrete-trial?
- Can the general curriculum provide direct instruction, time on task, and the pupil-teacher ratio necessary to master the goals and objectives outlined in the IEP?
- Does the behavior management system outlined in the IEP dictate when the child will be educated in the general curriculum?
- Can the general curriculum provide the behavior management necessary for the child to function appropriately?
- Can the general curriculum provide the structure necessary for the child to learn and/or behave appropriately?
- Can the program outlined in the IEP be implemented in the home school?
- Does the behavior management program in place in the special education classroom indicate when the child will participate in extracurricular and nonacademic activities?

EXAMPLES OF A JUSTIFICATION STATEMENT:

Example #1:

LRE and General Education:

- The regular class: Sally demonstrates a severe reading deficit when compared to her peers which necessitates specialized individualized instruction that is not available in the regular class.
- Extracurricular and nonacademic activities: Has access to all extracurricular and nonacademic activities.
- His/her LEA Home School: The programs and services that meet her needs are not offered in her home school.

Example #2:

LRE and General Education:

- The regular class: Severe reading deficits necessitate small group individualized instruction
- Extracurricular and nonacademic activities: She fully participates with her peers.
- His/her LEA Home School: She is attending her home school. OR “N/A”.

34. SPECIAL TRANSPORTATION

DIRECTIONS: If the child will ride a special education bus or if special transportation arrangements will be made, check “Yes”. Describe what type of arrangements will be made for the student. If special transportation is not needed, check “No”.

POINT TO REMEMBER:

- Special transportation includes paying a parent to transport a child to and from school **or** having an attendant ride the regular bus with a child.

SUGGESTED QUESTIONS TO ANSWER:

- Does the child ride a regular bus without assistance?
- Does the child ride a special education bus because the program outlined in the IEP is not available in the school of zone?
- Does the child ride a special education bus because the child is physically unable to ride a bus without a lift?
- Does the child need to ride in a car seat?
- Does the child ride a special education bus because of behavior?

35. EXTENDED SCHOOL YEAR (ESY)**DIRECTIONS:**

Determine if ESY Services will be provided.

If the decision is not being made at this meeting, the IEP Team should determine the date the decision for extended school year services will be made.

NOTE: It is recommended that the decision whether a child needs extended school year services or not should occur closer to the time when extended school year services will be offered.

POINTS TO REMEMBER:

- ESY must be considered on a case by case basis by the child's IEP Team.
- Based on the Division of Special Education Memorandum from Joseph Fisher, dated February 24, 1997, some areas to consider when determining whether ESY Services are needed are:
 - Degree of regression/time to regain skill
 - Degree of disability: Mild - Moderate - Severe
 - Ability of the child's parents to provide educational structure at home
 - The child's rate of progress when compared to other children with the same or similar disability
 - Consideration of any behavioral/physical problems which the child might have
 - The availability of alternative (community) resources for serving this child
 - The ability of the child to interact with children who are non-disabled
 - Areas in the child's program/curriculum which require continuous attention; and
 - Consideration of the child's vocational needs.

SUGGESTED QUESTIONS TO ANSWER:

- Based on available data, does the IEP Team anticipate that the child will regress significantly during the summer (i.e., more than can be made up in the first six weeks of school)?
- Is the area of service(s) under consideration "Extraordinary" to this child's disability?
- Is the area of service(s) under consideration an educational program designed specifically for this child?
- Is the child at a critical point in the development of a skill that continued practice is essential to the learning of the skill?

36. IEP PARTICIPANTS

Position	Signatures	In Agreement	Date
Parent	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
LEA Representative	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Special Education Teacher	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Regular Education Teacher	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Student (if appropriate)	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Interpreter of Evaluation Results	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

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Individual Education Program

DIRECTIONS:

The members of the IEP Team should sign this section of the IEP and indicate if they are in agreement. If anyone is not in agreement, a statement concerning why should be written and attached to the IEP.

If other persons, such as any State Department personnel or parent advocates, were in attendance and want to sign the IEP, they should sign their name and write "Observer", "Attendee" or "Present". They do **not** check whether they agree or disagree with the child's IEP.

POINTS TO REMEMBER:

- Members of the IEP Team are the parents of a child with a disability, at least one of the child's regular education teachers, when appropriate, at least one of the child's special education teachers, the LEA representative, the interpreter of evaluation results (who may, or may not be, one of the members listed above), the child, whenever appropriate, and at the discretion of the parent or the agency, other individuals who have knowledge or special expertise regarding the child, including related service personnel.
- If a child with a disability attends several regular education classes, all of the regular education teachers do not have to be present at the IEP meeting. The IEP team should include one of the child's teachers or more if it would be beneficial to the child's success in school.
- The child's teachers who are responsible for modifications written into the IEP should review the IEP to become knowledgeable of the specific needs of the child and of their responsibilities in implementing the IEP. After the child's teachers review the IEP, they sign their names in the "documentation of IEP review" section.
- When considering transition services, the child shall be invited to attend the meeting.
- For children with disabilities, aged 3 through 5, who receive services at schools where services are also available to non-disabled children, the regular kindergarten teacher can represent the "regular education teacher".
- For those agencies that do not provide regular preschool education services to non-disabled children, a preschool teacher or someone knowledgeable of developmental milestones can be the representative.

SUGGESTED QUESTIONS TO ANSWER:

- Are all appropriate professionals present at the meeting?
- If appropriate, has the child been invited to participate in the meeting?
- Have all the necessary participants signed and dated the proposed IEP?

37. INFORMED PARENTAL CONSENT

Informed Parental Consent:			
___ Yes ___ No I certify that I am the legal parent(s) / guardian(s) / surrogate(s) of this child.			
___ Yes ___ No I have been informed of and understand my rights as a parent, and have received a copy of my rights.			
___ Yes ___ No I have been involved in the IEP Team meeting and/or the development of this IEP, and give permission for the proposed program described in this IEP for my child.			
___ Yes ___ No My child and I have been informed of his/her right to represent himself/herself upon his/her eighteenth birthday. (Note: This information must be provided beginning at least one year prior to the student's 18th birthday.)			
Parent/Guardian/Surrogate Signature	Date	Student Signature	Date

Date IEP was given to parent(s) _____. If the parent(s) did not attend, the person responsible for forwarding and explaining the contents of the IEP to the parents along with their rights is _____.

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Individual Education Program

DIRECTIONS:

The parent should read each statement and verify his/her agreement by checking "Yes". After reading and agreeing to the statements, the parent(s) should sign his/her/their name(s).

POINTS TO REMEMBER:

- The parents must provide written consent prior to the **initial provision** of special education and related services for a child with a disability.
- For IEPs developed after the initial IEP, a parent signature is **not** required. However, efforts to notify the parents through an *Invitation to a Meeting* form must be documented.
- A signature indicates that the legal parent/guardian/surrogate of the child was informed of his/her rights, was involved in the development of the IEP, and has given permission for the proposed program.
- When applicable, a signature indicates that the student and parent have been informed of the transfer of the student's rights beginning at least one year prior to the student's 18th birthday.
- In Tennessee, the age of majority is 18 years of age. In order for a parent or guardian to retain educational rights for a child who has reached the age of majority, the parent will need to present a court order demonstrating that the child has been adjudicated incompetent. Under IDEA, an LEA may in some cases continue to invite a parent or guardian to an IEP Team meeting once the child has reached the age of majority due to the parent's "specialized knowledge" regarding the child.
- If this is an initial placement for special education services or if there is a change in the proposed service from the current IEP, *Prior Written Notice* must be given to the parent(s) prior to the initiation of services.
- **Upon completion of the IEP, the school system/agency shall provide the parent's with a copy of the IEP at no cost to the parent(s).**

SUGGESTED QUESTIONS TO ANSWER:

- Have the parent(s) signed that they are the legal parent(s)/guardian(s)/surrogate(s) of the child?
- Have the parent(s)/guardian(s)/surrogate(s) been given a copy of their rights and have these rights been verbally explained to them at the IEP meeting?
- Do the parent(s)/guardian(s)/surrogate(s) indicate an understanding of their rights?
- Have the parent(s)/guardian(s)/surrogate(s) been involved in the IEP team meeting and in the development of the IEP?
- If this is an initial IEP, has the parent(s)/guardian(s)/surrogate(s) give permission for the proposed program?

- Have the parent(s)/guardian(s)/surrogate(s) been informed, one year prior to the student's 18th birthday, of the student's right to represent himself/herself upon his/her 18th birthday?
- Have the parent(s)/guardian(s)/surrogate(s)/or student if age 18 or older, indicated their agreement or disagreement with the above items and signed the IEP?

38. DOCUMENTATION OF IEP REVIEW

Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date

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Individual Education Program

DIRECTIONS:

Teachers who are not present at the IEP Team meeting should sign here after they review the IEP. They should also receive a synopsis or a copy of the appropriate sections of the IEP that outlines their responsibilities/duties for carrying out the program as outlined.

POINTS TO REMEMBER:

- This space is for classroom teachers who are not at the IEP Team meeting to sign that they have reviewed the IEP and know their responsibilities for implementation.
- This is not a space to disagree with the IEP or the contents of the IEP.

SUGGESTED QUESTIONS TO ANSWER:

- Is documentation present showing that the classroom teachers who will be responsible for implementing the IEP but were not in attendance, have been informed of their responsibilities?
- If there is more than one special education teacher involved, has he/she reviewed the IEP?
- If appropriate, have the related service personnel reviewed the IEP?

Student's Name: _____

Write "Yes" or "No" under "Exceptional" column for each area assessed. Remember "Exceptional" areas require a completed Goal Sheet.

Area Assessed	Present Levels of Performance Levels of functioning, should, when applicable, include norm referenced and/or criterion referenced data, as well as descriptive information on the student's deficit areas.	Sources of Information	Date	Exceptional Yes/No
5	6	7	8	9
Prevocational /Vocational	10			

Consideration of Special Factors for IEP Development:

- ◆ Does the child have limited English proficiency? ___ Yes ___ No. If yes, what is his/her primary mode of language? _____
- ◆ Is the child blind or visually impaired? ___ Yes ___ No. If yes, does the child need instruction in Braille? _____
- ◆ Does the child have communication needs? ___ Yes ___ No. If yes, what are they? _____
- ◆ Is the child deaf or hard of hearing? ___ Yes ___ No. If yes, did the IEP Team consider:
 - ◆ the child's language and communication needs; ___ Yes ___ No
 - ◆ opportunities for direct communications with peers and professional personnel in the child's language and communication mode; ___ Yes ___ No
 - ◆ necessary opportunities for direct instruction in the child's language and communication mode? ___ Yes ___ No
- ◆ Is assistive technology necessary in order to implement the child's IEP? ___ Yes ___ No. If yes, what is needed? _____
- ◆ Does the child's behavior impede his/her learning or that of others? ___ Yes ___ No. If yes, the IEP Team has addressed the child's behavior in the following way(s): _____
Functional Behavior Assessment, ___ Behavior Intervention Plan, ___ Accommodations, ___ Goals and Objectives, ___ Other.
- ◆ Where in the IEP is this information located? _____

11

Student's Name: _____

12

Has a comprehensive vocational evaluation been administered? ___ Yes ___ No

Transition Services Planning (Beginning at age 14, or younger)

Desired Post School Outcomes

13

Employment: _____ Post-Secondary Education/Training: _____

Independent/Supported Living: _____ Community Involvement: _____

Transition Service Needs

Grade: 9 Course of Study: _____

Grade: 10 Course of Study: _____

14

Grade: 11 Course of Study: _____

Grade: 12 Course of Study: _____

Transition Services (Beginning at age 16, or younger)

Service Area	Need Yes/No	Activities/Strategies (All activities/strategies that are the responsibility of special education and are to be implemented this year must be reflected in goal sheets.)	Agency/Responsibilities
Instruction:			
Related Services:			
Community Experiences:			
Employment & Post-school Adult Living Objectives:			
Daily Living Objectives: (if appropriate)			
Functional Vocational Evaluation: (if appropriate)			

15

Documentation of other agency participation in planning and the person responsible for contacting agency(s) if a representative did not attend: _____

16

If the student was not in attendance, how were the student's preferences and interests considered? (Check all that apply.)

___ Student interview ___ Student survey ___ Student portfolio ___ Vocational Assessments ___ Interest Inventory ___ Other: _____

17

Measurable Annual Goals and Benchmarks/Short-term Instructional Objectives for IEP and Transition Activities

Student's Name: _____ Goal _____ of _____

Area of Need: _____ Personnel/Position Responsible: _____

Annual Goal: _____

<div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">21</div> Benchmarks/Short-Term Instructional Objectives	<div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">22</div> <small>Anticipated Beginning Date</small>	<div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">23</div> <small>Criteria for Mastery</small>	<div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">24</div> <small>Methods Of Evaluation</small>	<small>Actual Date(s) & Results of Evaluation</small>	<div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">26</div> Report of Progress
					<small>1st</small> <small>2nd</small> <small>3rd</small> <small>4th</small> <small>5th</small> <small>6th</small>
1.				<div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">25</div>	<div style="display: flex; justify-content: space-between;"> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> </div>
2.					<div style="display: flex; justify-content: space-between;"> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> </div>
3.					<div style="display: flex; justify-content: space-between;"> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> </div>
4.					<div style="display: flex; justify-content: space-between;"> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> <div style="width: 15%; text-align: center;">/</div> </div>

Supplementary Aids/Services and Supports for the Student: _____ _____ _____	<div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">27</div>
Program Modifications/Supports for School Personnel: _____ _____ _____	<div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">28</div>

<p style="text-align: center;">Codes</p> <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">Criteria for Mastery</td> <td style="width:33%; border: none;">Methods of Evaluation</td> <td style="width:33%; border: none;">Results of Evaluation</td> </tr> <tr> <td style="border: none;">1. 100%</td> <td style="border: none;">1. Standard Tests</td> <td style="border: none;">M - Objective Met - Proceed to Next Objective</td> </tr> <tr> <td style="border: none;">2. 90%</td> <td style="border: none;">2. Teacher-Made Tests</td> <td style="border: none;">C - Continue with same objective - Some progress made, more time needed</td> </tr> <tr> <td style="border: none;">3. 80%</td> <td style="border: none;">3. Teacher Observations</td> <td style="border: none;">D - Discontinue objective - Less than expected or no progress made</td> </tr> <tr> <td style="border: none;">4. 70%</td> <td style="border: none;">4. Other: _____</td> <td></td> </tr> <tr> <td style="border: none;">5. Other: _____</td> <td></td> <td></td> </tr> </table>	Criteria for Mastery	Methods of Evaluation	Results of Evaluation	1. 100%	1. Standard Tests	M - Objective Met - Proceed to Next Objective	2. 90%	2. Teacher-Made Tests	C - Continue with same objective - Some progress made, more time needed	3. 80%	3. Teacher Observations	D - Discontinue objective - Less than expected or no progress made	4. 70%	4. Other: _____		5. Other: _____			<p style="text-align: center;">Report of Progress</p> <ol style="list-style-type: none"> 1. No progress made* 2. Very little progress being made towards goal* 3. Some progress being made towards goal, or 4. Goal has been met, And 5. Anticipate meeting goal by IEP end, or 6. Do not anticipate meeting goal by IEP end. <p>N/A Not applicable. Objective not covered during this grading period</p>
Criteria for Mastery	Methods of Evaluation	Results of Evaluation																	
1. 100%	1. Standard Tests	M - Objective Met - Proceed to Next Objective																	
2. 90%	2. Teacher-Made Tests	C - Continue with same objective - Some progress made, more time needed																	
3. 80%	3. Teacher Observations	D - Discontinue objective - Less than expected or no progress made																	
4. 70%	4. Other: _____																		
5. Other: _____																			

<p style="text-align: center;">Date Progress Report Sent to Parents:</p> 1st Grading Period _____ 2nd Grading Period _____ 3rd Grading Period _____ 4th Grading Period _____ 5th Grading Period _____ 6th Grading Period _____	<p>*If 1 or 2, due to:</p> <ol style="list-style-type: none"> (a) Lack of prerequisite skills, (b) more time needed, (c) inadequate assessment, (d) excessive absences/ tardies, or (e) other: _____ <div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">29</div>
--	--

Regular Program Participation: Indicate the appropriate subject area letter beside all modifications that are to be used by the student in the regular program.

Classroom Accommodations/Modifications:	Assignment Accommodations/Modifications:
<input type="checkbox"/> Preferential seating	<input type="checkbox"/> Assignment book
<input type="checkbox"/> Provide copies of material to be copied from book or board	<input type="checkbox"/> Abbreviated assignments
<input type="checkbox"/> Provide copies of notes (from another student)	<input type="checkbox"/> Additional time
<input type="checkbox"/> Peer tutoring	<input type="checkbox"/> Study guide
<input type="checkbox"/> Behavior/performance contracting	<input type="checkbox"/> Extra grade opportunities (Re-do items missed, extra credit)
<input type="checkbox"/> Highlighted textbook (student)	<input type="checkbox"/> Compacting
<input type="checkbox"/> Taped materials	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

Classroom Testing Accommodations/Modifications: (In order to justify appropriateness of accommodations for any state mandated testing accommodations listed below should be used consistently within a student's academic program over the previous year.)

<input type="checkbox"/> Extended Time	<input type="checkbox"/> Modify grading scale (Pass/Fail or points)
<input type="checkbox"/> Reading aloud /sign for internal instructions	<input type="checkbox"/> Oral Testing
<input type="checkbox"/> Reading aloud /sign for test items	<input type="checkbox"/> Modify test format (word bank, multiple choice, short answer)
<input type="checkbox"/> Repeating oral directions verbally	<input type="checkbox"/> Abbreviated concepts tested
<input type="checkbox"/> Use of calculator	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Word processor with or without talk-text technology	

30

Special Education and Related Services:

Service Code and Type of Service	Sessions Per Wk/Mo/Yr	Time Per Session	Hours Per Week	Beginning/Ending Dates	Location of Services
02 Consultation	___/___/___	___	___/___	___/___/___	___
02 Direct Special Education (For Inclusion, refer to State Instruction Booklet under "Type of Service" section.)	___/___/___	___	___/___	___/___/___	___

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a. All Subjects	b. Reading	c. English	d. Spelling	e. Math	h. Science
i. Social Studies	h. History	i. Health	j. Economics	k. Physical Education	l. Music/Art
m. Vocational	n. Lunch	o. Library	p. Title I	q. Other:	

12 Supervision (Option 8 only)	___/___/___	___	___/___	___/___/___	___
--------------------------------	-------------	-----	---------	-------------	-----

State/District Mandated Tests: (Check either Number 1 or Number 2. When utilizing accommodations 1A, 1B or 2, the appropriate addendum must be attached to this IEP.)

1. Student will participate in the following state/district mandated assessment(s): HSSM/End of Course Test(s):

TCAP Achievement _____

TCAP Writing _____

TCAP Competency// Gateway Test _____

Language/English Score: 31 Date Passed: _____ Exit Exam (Specify which test): _____

Math/Algebra I Score: 31 Date Passed: _____ Work Keys _____ ACT _____ SAT _____

Biology I Score: _____ Date Passed: _____ District Assessment: _____

(Check either A and/or B when using accommodations for the TCAP.)

A. State Mandated Assessment with Allowable State Accommodations

B. State Mandated Assessment includes Special Conditions Accommodations.

2. Student will participate in State Mandated Alternate Assessment (TCAP-Alt).

A. TCAP-Alt: ASA _____ Achievement Level (Check Accommodations Above)

B. TCAP-Alt: PA _____

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Related Service(s), including Instruction from Specialized Personnel

___/___/___

___/___/___

___/___/___

Related Service Codes:

13 Psychological Services	12 Orientation & Mobility Services	20 Work-Based Learning
14 Social Work Services	13 Audiology Services	
15 Occupational Therapy	14 Other Services	
16 Speech/Language Pathology Services	15 Ancillary - Attendant	
17 Recreation Services	16 Ancillary - Interpreter	
18 Physical Therapy	17 Ancillary - Other	
19 School Health Services	18 Residential	
20 Counseling Services	19 Homebound/Hospital	

Total Regular Education hours per week: _____	Total Special Education hours per week: _____
--	--

LRE and General Education:

Explain the extent, if any, in which the student **will not** participate with non-disabled peers in:

- ♦ the regular class: _____
- ♦ extracurricular and nonacademic activities: _____
- ♦ his/her LEA Home School: _____

33

Special Transportation:

Does student require special transportation? Yes No. If yes, please explain: _____

34

Extended School Year:

Date ESY program was/will be determined: _____ ESY program _____ is _____ is not to be provided.

35

IEP Participants: (The following individuals attended the IEP Team and participated in the development of this Individualized Education Program.)

Position	Signature	In Agreement	Date
Parent	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
LEA Representative	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
Special Education Teacher	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
Regular Education Teacher	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
Student (if appropriate)	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
Interpreter of Evaluation Results	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____

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Informed Parental Consent:

Yes No I certify that I am the legal parent(s) / guardian(s) / surrogate(s) of this child.
 Yes No I have been informed of and understand my rights as a parent, and have received a copy of my rights.
 Yes No I have been involved in the IEP Team meeting and/or the development of this IEP, and give permission for the proposed program described in this IEP for my child.
 Yes No My child and I have been informed of his/her right to represent himself/herself upon his/her eighteenth birthday. (Note: This information must be provided beginning at least one year prior to the student's 18th birthday.)

 Parent/Guardian/Surrogate Signature Date Student Signature Date

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Date IEP was given to parent(s) _____. If the parent(s) did not attend, the person responsible for forwarding and explaining the contents of the IEP to the parents along with their rights is _____.

Documentation of IEP Review by Other Teachers not in Attendance:

Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date

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DEVELOPMENT OF IEP CHAPTER

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Special thanks to STEP and the many emails received from parents, school personnel and interested readers who suggested changes that helped clarify the form and the instructions.