



¿Realmente entiende el IEP de su estudiante?

Subcomité del IEP, Comité Asesor de Padres
Distrito Escolar Unificado de Los Ángeles
Abril 2022

Exploremos el documento del IEP:

- ¿Cuándo se debería de realizar la próxima revisión de tres años?
- ¿Cuáles son los tipos de reunión de IEP?
- ¿Cuál es la elegibilidad de su estudiante y en qué sección del IEP se encuentra?
- ¿Ha alcanzado su estudiante las metas dentro de su IEP? ¿Dónde puede encontrar esa información?
- ¿Qué tipos de adaptaciones y modificaciones se le brindan a su estudiante?

Exploremos el documento del IEP (continuación):

- ¿En dónde puede solicitar una copia del IEP en un idioma que no es el inglés?
- ¿En qué tipo de entorno de instrucción se asigna a su estudiante y dónde puedo encontrar esa información?
- ¿Dónde puede encontrar la oferta de FAPE del Distrito?
- ¿Cuáles servicios acuerde el Distrito en proveer?
- ¿En qué tipo de entornos se prestarán estos servicios y quién los prestará?

Programa de Educación Individualizada Página 1 (Reunión e Información del Estudiante)

Puntos por considerar:

- ¿Qué tipo de reunión es?
- ¿Cuándo se llevará a cabo la próxima reunión anual del IEP?
- ¿Cuándo se realizará la revisión de tres años?
- ¿Cuál es el idioma natal del estudiante?
- ¿Quién posee los derechos de educación?

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INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Identification Number SSID **Eligible**

Student Last First MI Date of Birth:

Section A: Meeting Information

Pertinent Dates	Type of Meeting
Date of Initial IEP Team Meeting <input type="text"/>	<input type="radio"/> Initial <input type="radio"/> Amendment of IEP dated <input type="text"/>
Date of Present Meeting <input type="text"/>	<input type="radio"/> Annual Review <input type="radio"/> Three Year Review <input type="radio"/> Other <input type="text"/>
Annual Review to be conducted by <input type="text"/>	<input type="radio"/> Early Start Transition <input type="radio"/> Expulsion Analysis <input type="radio"/> Individual Transition Plan <input type="text"/>
Next Three Year Review will be conducted by <input type="text"/>	
Three Year Review or Evaluation was conducted on <input type="text"/>	
Transition to Kindergarten to be conducted by <input type="text"/>	

Location of Meeting District Name

Section B: Student Information

Date of Birth <input type="text"/>	Age <input type="text"/>	Grade <input type="text"/>
Gender <input type="radio"/> Male <input type="radio"/> Female	Limited English Proficient Student <input type="radio"/> Yes <input type="radio"/> No	Ethnic Code <input type="text"/>
Location of the Psych Folder <input type="text"/>	Student has no Psych Folder <input type="checkbox"/>	
Location of the Cum Folder <input type="text"/>	Student has no Cum Folder <input type="checkbox"/>	
Home Language <input type="text"/>	Student Language <input type="text" value="English"/>	Alternate Mode of Communication <input type="text"/>
Home Address of Student <input type="text"/>		
City <input type="text"/>	ZIP Code <input type="text"/>	
Home Telephone <input type="text"/>	Daytime Telephone <input type="text"/>	Emergency Telephone <input type="text"/>
School of Attendance <input type="text"/>	Location Code <input type="text"/>	
School of Residence <input type="text"/>	Location Code <input type="text"/>	
Name of Parent/Guardian <input type="text"/>	Telephone <input type="text"/>	
Address <input type="text"/>		
City <input type="text"/> CA	ZIP Code <input type="text"/>	
Surogate Parent <input type="text"/>	Telephone <input type="text"/>	
Attends CURRENT SCHOOL as a result of one of the following <input type="radio"/> Attends School of Residence <input type="radio"/>		
Is the student living in a Family Foster Home (FFH)? <input type="radio"/> No <input type="radio"/> Yes	FFH# <input type="text"/>	
Is FFH Provider related to student? <input type="radio"/> No <input type="radio"/> Yes	Relationship <input type="text"/>	
Licensed Children's Institution <input type="radio"/> No <input type="radio"/> Yes	LCI Name <input type="text"/>	
	LCI# <input type="text"/>	
Out of the home placement made by <input type="radio"/> Regional Center <input type="radio"/> Superior Court <input type="radio"/> Department of Mental Health <input type="radio"/> Department of Children's Services <input type="radio"/> Other <input type="text"/>		
Child's family living within LAUSD's boundaries? <input type="radio"/> No <input type="radio"/> Yes		
If the student is 18 years old or older or is an emancipated minor, does he/she have educational decision-making rights? <input type="radio"/> No <input type="radio"/> Yes		

Adquisición del idioma/ Progreso de las metas anuales: Secciones C y D

Puntos por considerar:

- ¿Qué es la clasificación de competencia de lenguaje de su hijo?
- Si tiene dominio limitado del idioma inglés o LEP, ¿cuál es el nivel de desempeño de su estudiante en el ELPAC y cuándo fue evaluado/a?
- ¿Ha alcanzado su estudiante sus metas anuales?
- Si no, ¿sabe por qué?

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INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District
 Student Last (CRISTIAN) First MI Date of Birth

Section C: Language Acquisition

Language Classification: (Limited English Proficient) Start Date: (23-SEP-2010)
 Withdrawal by Parent Request: Yes No Reclassification Date:
 ELPAC Performance Level and Performance Descriptor: Test Date:
 Alternate ELPAC Performance Level and Performance Descriptor: Test Date:

Section D: Goal Achievement from Current IEP

Goal for: (example - Reading)	Achieved		If No, explain the reason the goal/objective was not achieved
	Yes	No	
1 (BLD)	<input type="radio"/>	<input checked="" type="radio"/>	(Rec'd F in spring 2019 BLD class, current grade F)
Category (English Language Development)			
Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	(Rec'd F in spring 2019 BLD class, current grade F)
Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	(Rec'd F in spring 2019 BLD class, current grade F)
2 (Reading)	<input type="radio"/>	<input checked="" type="radio"/>	(Current grade is F; Spring 2019 grade of D)
Category (Reading)			
Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	(Current grade is F; Spring 2019 grade of D)
Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	(Current grade is F; Spring 2019 grade of D)
3 (Writing)	<input type="radio"/>	<input checked="" type="radio"/>	(Current grade is F; Spring 2019 grade of D)
Category (Writing)			
Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	(Current grade is F; Spring 2019 grade of D)
Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	(Current grade is F; Spring 2019 grade of D)
4 (Math)	<input checked="" type="radio"/>	<input type="radio"/>	
Category (Math)			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
5	<input type="radio"/>	<input type="radio"/>	
Category			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	
6	<input type="radio"/>	<input type="radio"/>	
Category			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	
7	<input type="radio"/>	<input type="radio"/>	
Category			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	
8	<input type="radio"/>	<input type="radio"/>	
Category			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	
9	<input type="radio"/>	<input type="radio"/>	
Category			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	
10	<input type="radio"/>	<input type="radio"/>	

Niveles Actuales de Rendimiento conocido en inglés como PLOP por sus siglas: Sección F

¿Qué son?

- Un resumen sobre cómo se está desempeñando el estudiante dentro de cierto ámbito al transcurso del año.
- Enumera qué tipo de evaluaciones / Se está usando un proceso de seguimiento
- Incluye comentarios del maestro y/o coordinador de casos
- ¡EL PLOP siempre debe incluir un punto de referencia para cada meta anual!
- Se debería de incluir PLOP para los ámbitos de lectura, escritura, ELD, matemáticas y socioemocional así como CUALQUIER otras área de la discapacidad OT, PT, AT, comportamiento)

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Los Angeles Unified School District
Student Date of Birth

Last First MI

Section E: Present Level of Performance

Performance Area:

Category:

Assessment/Monitoring Process Used:

State/District Assessment Results:

Current Performance/Assessment Summary (include student strengths, student needs and impact of disability on student performance):

Performance Area:

Category:

Assessment/Monitoring Process Used:

State/District Assessment Results:

Current Performance/Assessment Summary (include student strengths, student needs and impact of disability on student performance):

Niveles Actuales de Rendimiento (PLOP)

Áreas de mayor dominio

- En lo que el estudiante sobresalió durante este año
- El desarrollo del estudiante
- Una lista de las habilidades dentro de cada área

Áreas de menor dominio

- Necesidades/Retos
- ¿En lo que necesita trabajar el estudiante?
- Cualquier área en la no hubo crecimiento/en la que disminuyó
- Ámbitos en los que debe estar atento/a

Efecto de la discapacidad

- ¿Cuál es la discapacidad del estudiante?
- ¿Cómo afecta la discapacidad al estudiante en poder acceder a la educación?

Elegibilidad: Sección F

Puntos por considerar:

- ¿Cuál es la elegibilidad de su estudiante?
- Si su estudiantes califica bajo más de una elegibilidad, ¿dónde se incluirá esto?

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INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Date of Birth Section F: Meeting Date

Last First MI

Eligibility

If applicable, areas discussed related to disability or suspected disability:

For Initial IEP, interventions attempted prior to determining eligibility:

Eligible as a student with the disability of:

Code:

Not Applicable, Blind or Partially Sighted

Additional Low Incidence Eligibility (only for VI, DBL, DEA, HOH, or severe OI):

Code:

Not Applicable, Blind or Partially Sighted

Does not meet eligibility criteria for Special Education Services (Initial IEP).

or

No Longer Eligible for Special Education Services (Review IEP).

No Longer Eligible (Effective Date):

This is a Final IEP, the student remains eligible for Special Education Services until the Effective Date below.

Final IEP Reason: Final IEP Effective Date:

The IEP Team has considered and agrees that the educational needs of the student are not primarily due to:

Social Maladjustment	Temporary Physical Disability	Lack of instruction in reading
Lack of instruction in math	Limited English Proficiency	Environmental, Cultural or Economic Factors

Metas, metas, metas: Sección G

Puntos por considerar:

- ¿Se incluye un punto de referencia dentro del nivel actual de rendimiento para esta meta en particular?
- ¿Hay una meta para todas las áreas en las que se prevé una discapacidad?
- ¿Cómo se evaluará la meta?
- ¿Las metas establecidas a corto plazo apropiadas para esta meta?
- ¿Su estudiante está mostrando suficiente progreso para cumplir con esta meta anual?
- Si no, ¿sabe por qué?

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

Progress on annual goals to be reported to parents by completing the "IEP Report of Progress and Achievement from Current IEP" form(s) which will be provided at either Progress Report or Report Card periods.

Methods of Evaluation

State Assessments Norm Referenced Criterion Referenced Curriculum Based
 Observation Portfolio Work Samples Informal
 Other

Incremental objective #1 related to the goal:

Incremental objective #2 related to the goal:

Date to be achieved: MO/YR Date to be achieved: MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS					
4 GOAL MET OR EXCEEDED	3 SUBSTANTIAL PROGRESS (50-99% of goal met)	2 PARTIAL PROGRESS (1-49% of goal met)	1 NO PROGRESS		
1st Reporting Period	2nd Reporting Period	3rd Reporting Period	4th Reporting Period (Secondary Only)	Goal Achievement	
Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>		
Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No	
Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No	
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please explain: <input type="text"/>	

Crear metas SMART para el IEP

- **Específicas:** La meta debe ser específica en que se enfoca en el área de rendimiento académico y desempeño en lo funcional. Esta meta debería incluir una descripción clara sobre el conocimiento y las destrezas que se enseñarán y cómo el progreso del estudiante será evaluado.
- **Medibles:** Usted debería de poder evaluar esta meta por medio de las evaluaciones estandarizadas, evaluaciones que se basan en el plan de estudio, muestras de trabajo, y/o datos registrados por el maestro.
- **Alcanzable:** El estudiante debería de ser capaz de alcanzar la meta dentro del plazo de un año.
- **Resultados Dirigidos/Relevantes:** La meta debería de claramente indicar los resultados previstos. La meta debería de ser relevante a las necesidades únicas del estudiante y no deberían basarse en los planes de estudio del distrito, las pruebas estatales o del distrito, u otros estándares externos.
- **Tiempo establecido:** Las metas y los objetivos tienen tiempo establecido. ¿Que necesita saber y capaz en hacer el estudiante después de un año en la educación especial?

Las metas SMART son realistas en que el estudiante podrá alcanzarlas e indican cómo el estudiantes las logrará

Participación en los Exámenes Administrados por el Estado y en todo el Distrito: Sección L

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Los Angeles Unified School District

Last First MI Date of Birth Meeting Date

Section K: Participation in State and District-wide Assessments

Assessments administered will conform to those assessments determined for each grade by the California Department of Education and/or the Los Angeles Unified School District.

No assessment tests found.

Puntos por considerar:

- ¿En qué tipo de evaluaciones estatales y del distrito participará su estudiante?
- ¿Necesita su estudiante adaptaciones o apoyos para cualquiera de estas evaluaciones?

Protecciones Procesales y Acciones de Seguimiento: Sección N (Actualizado 11/29/21)

Puntos por considerar:

- ¿Se le proporcionó una copia de los Derechos y Protecciones Procesales en su idioma natal?
- ¿Se le proporcionó un intérprete que poseía conocimientos sobre la terminología de educación especial sin costo durante toda la reunión del IEP?
- ¿Solicitó una copia del IEP en su idioma natal para repasarla antes de firmarla?
- ¿Se discutieron los servicios de recuperación durante la reunión del IEP?

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Date of Birth Meeting Date
Last First MI Birth Date

Section N: Procedural Safeguards and Follow-up Actions

A Parent's Guide to Special Education Services including Procedural Rights & Safeguards was provided to the parent in his/her primary language.

The IEP Team Meeting Introductory Statements were read aloud at the beginning of the IEP Team meeting.

The parent/guardian was informed of his/her right to a written translation of the IEP.

Is the parent/guardian requesting informal translation? Yes No Select Preferred Language:

Is the parent/guardian requesting official translation? Yes No Select Preferred Language:

Specify the Individual Pages to be translated:

Special Requests:

For students who are 17 years old, the student and parent(s)/guardian(s) have been informed that the educational decision-making rights will transfer to the student at 18 years of age, unless the court has determined otherwise.

Recoupment Consideration

The IEP team has reviewed and discussed student's progress/achievement and considered factors that may have impacted student's learning during the school facility closures as a result of the COVID-19 national pandemic. The IEP team has determined:

- Student has made expected progress toward IEP goals and/or progress is in alignment with expectations of progress/goal achievement. No recoupment supports/accommodations/services, etc. are recommended.
- Student experienced learning loss as a result of the school facility closures caused by the COVID-19 global pandemic and recoupment supports/accommodations/services, etc. are necessary. Additionally, the IEP team discussed recoupment to address past learning loss. Recoupment is not part of the Student's stay put program. Recoupment offer details are included in FAPE Part 2, Part 4 of the IEP (including completion of a service grid, as necessary).
- Recoupment consideration was documented on IEP dated
- Preschool Only Consideration (Transition IEP)
- 30-Day IEP Consideration (Out-of-District)
- Student attends private school within district boundaries and resides outside of district boundaries (Eligibility Determination Only)

Página de Consentimiento: “Página 10”

Puntos por considerar:

- ¿Con qué sección del IEP está de acuerdo?
- Los padres pueden enumerar sus preocupaciones y comentarios en esta página y/o incluir una página adjunta
- Los padres pueden estar de acuerdo con implementar el IEP a pesar de estar en desacuerdo con que la oferta del Distrito constituye una educación pública gratuita y apropiada (FAPE, por sus siglas en inglés)
- Los padres pueden estar en desacuerdo con el IEP en su totalidad

Section Q: Parent Participation and Consent			
Parent Participation		Parent Notification	
<input type="radio"/> Parent/Student (18-21) has participated in the IEP meeting. <input type="radio"/> Parent/Student (18-21) indicated before the meeting that they would not be able to attend. <input type="radio"/> Parent/Student (18-21) was notified 3 times of the meeting time and place. Parent/Student (18-21) did not respond to any of the meeting notifications and the meeting was held without the Parent/Student (18-21) present. <input type="radio"/> Parent/Student (18-21) did not attend and gave permission to proceed without them if they did not attend.		Method	Whom
			Email
		<input type="radio"/> Email <input type="radio"/> Email	
<i>I (PARENT) acknowledge that the IEP meeting was rescheduled to this date at my request. (Parent initials here ONLY if the PARENT requested that the IEP meeting be rescheduled.)</i>			
Parent/Student (18-21) Agreement to Components of the Proposed IEP			
A Parent/Student (18-21) may agree to all or some of the components of a proposed IEP. The District will implement those portions of the IEP to which the parent/student (18-21) agrees so as to not delay providing instruction and services.			
<input type="radio"/> Parent/Student (18-21) AGREES to all components of the IEP.			
<input type="radio"/> Parent/Student (18-21) AGREES to all components of the proposed IEP WITH THE SPECIFIC EXCEPTION(S) stated below:			
<input type="checkbox"/>	Assessment	Specify	
<input type="checkbox"/>	Eligibility	Specify	
<input type="checkbox"/>	Instructional Setting	Specify	
<input type="checkbox"/>	Services	Specify	
<input type="radio"/> The Parent/Student (18-21) DOES NOT AGREE with any of the components of the proposed IEP.			
A Parent/Student (18-21) is not required to initiate any form of dispute resolution as to components of the proposed IEP to which the parent does not agree. If a parent/student (18-21) does wish to initiate a form of dispute resolution as to the components of the proposed IEP, the parent can find information on dispute resolution processes in the District's publication, <i>A Parent's Guide to Special Education Services (Including Procedural Rights and Safeguards)</i> .			
Parent Concerns and Comments			
Signature(s) <input type="text"/>		Date <input type="text"/>	
<input type="radio"/> Parent	<input type="radio"/> Guardian	<input type="radio"/> Student age 18-21 years age 18-21 years	<input type="radio"/> Surrogate Parent
			<input type="radio"/> Emancipated Minor
			<input type="radio"/> Foster Parent
Did the school district facilitate parent involvement as a means of improving services and results for your child? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No Response			
I certify that I have received a copy of the Parent Input Survey regarding the IEP process. I understand that my completion of the form is voluntary and can be done at anytime after the IEP meeting.			
Signature(s) <input type="text"/>		Date <input type="text"/>	

Nombres y Firmas: Página 11 - Página de firmas

Puntos por considerar:

- Estas son las personas que participaron en la reunión del IEP
- Los padres pueden invitar a cualquier profesional externo y/o persona de apoyo a la reunión del IEP, que incluye terapeutas, doctores, defensores de la educación y abogados y parientes o amistades quienes conocen al estudiante

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INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Date of Birth Recouvened Meeting Date
Last First MI Meeting Date

Section R: Names and Signatures (Signatures on File)

Team Member	Print Name	Signature
Parent/Guardian	<input type="text"/>	<input type="text"/>
Parent/Guardian	<input type="text"/>	<input type="text"/>
Student Age 18 - 21 years	<input type="text"/>	<input type="text"/>
Student Under Age 18 years	<input type="text"/>	<input type="text"/>
Surrogate Parent	<input type="text"/>	<input type="text"/>
Foster Parent	<input type="text"/>	<input type="text"/>
Family Foster Home Provider	<input type="text"/>	<input type="text"/>
Administrator	<input type="text"/>	<input type="text"/>
Administrative Designee	<input type="text"/>	<input type="text"/>
Special Education Teacher	<input type="text"/>	<input type="text"/>
General Education Teacher	<input type="text"/>	<input type="text"/>
School Psychologist	<input type="text"/>	<input type="text"/>
School Nurse	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/> LAS	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Interpreter	<input type="text"/>	<input type="text"/>
Sign Language Interpreter	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>

Análisis del Entorno de Restricción Mínima

Puntos por considerar:

- ¿Se discutió durante la reunión de IEP si la asignación académica que se ofrece es el entorno de restricción mínima?

LEAST RESTRICTIVE ENVIRONMENT ANALYSIS

To Be Completed By the IEP Team at the IEP Team Meeting

Student's Current Placement Type:

<input type="radio"/> General Education Class/General Education Site	<input type="radio"/> Special Day Program/General Education Site
<input type="radio"/> Special Day Program/Special Education Center	<input type="radio"/> Nonpublic School
<input type="radio"/> Home/Hospital or Residential Care Facility	

DIRECTIONS: Complete the information below as part of the IEP team discussion regarding placement from the beginning at Step A until the team reaches the Step that indicates YES. After reaching the Step that indicates YES, it is also required to complete Step F.

The Individuals with Disabilities Education Act (IDEA) requires that students with disabilities be educated in the least restrictive environment. Placement in a more restrictive setting should only occur if the nature or severity of the student's disability is such that placement in a less restrictive setting with the use of supplementary aids and services cannot be achieved satisfactorily. The lack of current availability of a student's required supports, services, accommodations and modifications is not the sole justification for placement in a more restrictive setting, unless there is a compelling reason why they cannot be provided. In selecting the LRE, consideration is given to any potential harmful effect on the child or on the quality of services that he or she needs.

Step A.	Can the supports, services, accommodations and/or modifications in the student's IEP be made available in a general education classroom/setting?
	<input type="radio"/> Yes <input type="radio"/> No If the answer is YES, then a general education classroom/setting is the appropriate placement. If the answer is NO, go to the question below. <input type="radio"/> Yes <input type="radio"/> No If not currently available, can the required supports, services, accommodations and/or modifications be made available in a general education classroom/setting? If YES, all required supports, services, accommodations and/or modifications must be provided within a reasonable timeline. If the answer is NO, please articulate why in the box below. Then go to Step B.
<div style="border: 1px solid black; height: 80px; width: 100%;"></div>	

Step B.	Can the supports, services, accommodations and/or modifications in the student's IEP be made available on a general education site in a special day program?
	<input type="radio"/> Yes <input type="radio"/> No If the answer is YES, then a special day program on a general education site is the appropriate placement. If the answer is NO, go to the question below. <input type="radio"/> Yes <input type="radio"/> No If not currently available, can the required supports, services, accommodations and/or modifications be made available in a special day program on a general education site? If YES, all required supports, services, accommodations and/or modifications must be provided within a reasonable timeline. If the answer is NO, please articulate why in the box below. Then go to Step C.
<div style="border: 1px solid black; height: 80px; width: 100%;"></div>	

IEP FAPE Parte I: Elegibilidad, Asignación, y Apoyos

Puntos por considerar:

- Elegibilidad
- Tipo de Plan de Estudio
- Asignación académica
- Tipo de Entorno de Instrucción
- Tipos de Programas
- Minutos/Semanas en Educación Especial
- Factores Adicionales - Apoyo para discapacidades poco comunes, tecnología de apoyo, ESY, Transporte, PCT
- Adaptaciones, modificaciones, y apoyos
- Preparación para el repaso de tres años
- Equipo para discapacidades poco comunes
- Equipo para la tecnología de apoyo

	As of Date:	Effective With this IEP	Future Changes Related to this IEP
Eligibility: (from Page 4)		<i>Eligible</i>	
	Final IEP Reason Final IEP Effective Date:		
Curriculum		General Education	
Placement	Type of School	District Resident School	
	Name of School		
Instructional Setting	Setting		
	Program		
	Special Day Minutes/Wk	0	
	Addresses Goals		
Additional Factors	Low Incident Support	None	
	Assistive Technology Support	No	
	Transportation	None	
	Extended School Year/Interession	<input type="radio"/> Yes <input type="radio"/> No	
	Parent Counseling and Training (PCT)	<input type="radio"/> Yes <input type="radio"/> No	
	ESY Transportation		
Accommodation, Modifications, Supports	Instructional Accommodations		
	Instructional Modifications		
	Other Supports, including Non-Academic and Extra-curricular Activities		
Preparation for Three Year Review IEP (At the second Annual Review IEP Meeting, the team must discuss and document the decision to conduct or not conduct a three-year comprehensive reassessment.)	Do the Parent and the District (local educational agency) agree that a reassessment is unnecessary?	<input type="radio"/> Yes <input type="radio"/> No	
	If the Parent does not agree, specify the area(s) to be reassessed.		
Comments, as appropriate			
Low Incidence Equipment			
Assistive Technology Equipment			

IEP FAPE Parte 2: Resumen de los Servicios

Puntos por considerar:

- ¿Qué servicios recibe su estudiante?
- ¿Con qué meta está relacionada?
- ¿Con qué frecuencia se prestarán los servicios?
- ¿Dónde se prestarán los servicios?
- ¿Cómo se prestarán los servicios?
- ¿Quién proporcionará los servicios?
- ¿Cuándo iniciarán los servicios?
- ¿Cuándo finalizarán los servicios?

		Effective With This IEP	Future Changes Related To This IEP
Service 1	Start Date:	Effective on Signature Date	
RSP	End Date:		
RSP	Service applies to:		
	Frequency:		
This service addresses the following goals:	Interval:		
1(Reading)	Minutes/Interval:		
2(Behavior)	Minutes/Interval (Pullout from Gen Ed):		
3(Behavioral Support)	Service Delivery Model:		
	RSP Area:		
	Responsible Personnel:		
*			
Service 2	Start Date:	Effective on Signature Date	
	End Date:		
Behavior Intervention Implementation (BII)	Service applies to:		
	Frequency:		
This service addresses the following goals:	Interval:		
2(Behavior)	Minutes/Interval:		
3(Behavioral Support)	Minutes/Interval (Pullout from Gen Ed):		

IEP FAPE Parte 3: Porcentaje de tiempo fuera la educación general

Part 3 - Percentage of Time Outside of General Education		
	Effective With this IEP	Future Changes Related to this IEP
% of Time per Week outside of General Education	<input type="text"/>	

Puntos por considerar:

- ¿Cuál será el % de tiempo durante cada semana que su estudiante estará fuera del entorno de educación general?

IEP FAPE Parte 4: Discusión Adicional

Part 4 - Additional Discussion (This section is optional)

Parent has agreed to obtain a land line phone to facilitate communication with Cristian. The IEP team will meet during the second week of school (week of January 18) to evaluate the effectiveness of supports for Cristian. Cris has not been reporting to class and has not been receiving services due to avoidance behavior.

The PCT informational packet is available online via the LAUSD Parent Portal. You can register for this online platform at <https://parentportalapp.lausd.net/parentaccess/>. If you require assistance with accessing the Parent Portal, please contact a staff member in the main office of your child's school. You may obtain a copy of this PCT announcement from your child's IEP team. All workshops will be provided in both English and Spanish. If you have questions, please call

An implementation IEP was held on September 2, The following points were discussed:
- Individual DIS counseling was included with 45 minutes of service per week as indicated by FSA which was agreed upon on July 16, . 2 social emotional goals were developed. All compensatory services and IEE information have been documented in FSA.
- Per FSA, the district will conduct a health and transition assessment in lieu of the assessment plan that parent consented to on June 29,

Puntos por considerar:

- Tenga en cuenta que esta sección se indica como opcional, pero a menudo es una de las partes más importantes del IEP porque aquí se enumeran las discusiones del equipo de IEP, así como las preocupaciones y peticiones de los padres. Además, cualquier acción de seguimiento debería de ser enumerada aquí.

IEP FAPE Parte 2: Resumen de los Servicios - Prestación Alternativa de Servicios Remotamente / A Distancia

Puntos por considerar:

- ¿Conoce qué servicios de educación especial se le prestarán a su estudiante y con qué frecuencia?
- ¿Se discutió la prestación de servicios remotamente / otro medio (si el estudiante no accederá a los servicios en persona)?

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INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District IEP FAPE Part 2 - Summary of Services

 Date of Birth Meeting Date
 Last First MI

FAPE Summary Grid

Program:		GE		Setting:		General Education			
Eligibility:				Curriculum:		General Education			
Transportation:		None		Low Incident Support:		None			
Date District Received									
Parent Signature:									

Service Code	Service Desc	Start Date	Service Applies To	Interval	Frequency	Area	Total Minutes	Addresses Goal(s)	No Consent
32	Behavior Intervention Implementation (BII)	Effective on Signature Date	Regular	Weekly		~			--
10	Language/Speech	Effective on Signature Date	Regular	Yearly		School-Based			--
RSP	RSP	Effective on Signature Date	Regular	Weekly		RSP-Literacy/ELA/ELD			--

Alternative Remote/Distance Learning Services During Emergency Conditions

If instruction or services, or both, cannot be provided to the pupil either at the school or in person for more than 10 school days due to emergency conditions caused by fire, flood, impassable roads, epidemic, earthquake, imminent major safety hazard as determined by local law enforcement, a transportation services strike by nonschool entity, or other official order issued to meet a state of emergency or war, the IEP will be provided by one or more of the means stated below, to the greatest extent possible in light of the emergency circumstances and District policy.

Means of Delivery, to greatest extent possible ("x" all that could apply for student, depending on emergency circumstances):						
	Teacher-posted lessons, asynchronous (online or other media)	Virtual class meetings, synchronous	Personalized learning tools (virtual or paper packets, as available)	Scheduled teacher appointments (virtual or in-person, as available)	Scheduled email check-ins (parent or student)	Virtual office hours (drop-in; parent or student)
Specialized Academic Instruction and Related Services						
Supplementary Aids and Services (provided in general education classes and other general ed environments)						

As soon as practicable following the determination that instruction or services, or both, cannot be provided either at the school or in person for more than 10 days due to a qualifying state of emergency, the parent will be notified as to the specific means by which

IEP FAPE Parte 2: Tabla de Resumen de FAPE Servicios Alternos Remotamente / A Distancia Durante Condiciones de Emergencia

the student's IEP will be provided, in light of the emergency circumstances present at that time. The IEP will be provided by alternative means as necessitated during the period of emergency conditions, only.

Comments above do not constitute a change to the District's offer of FAPE or IEP. Because the nature of any future emergency cannot be known in advance, the specific means by which the IEP shall be provided in a future emergency will be determined at the time, in light of the circumstances.

For IEP Team Information

By clicking this box the IEP team has reviewed the FAPE Summary Page to ensure that it reflects the IEP Team decisions.

Plan de Intervención de Conducta

Puntos por considerar:

- ¿Qué comportamientos están impidiendo el aprendizaje?
- ¿Hay una buena descripción sobre cómo sería?
- ¿Con qué frecuencia se observa el comportamiento?
- ¿Quién observa el comportamiento y cómo se está documentando?
- ¿Cuáles son los predictores del comportamiento?
- ¿Qué falta del entorno/plan de estudio?
- ¿Qué cambios del entorno, en la estructura y apoyos se necesitan para eliminar la necesidad del estudiante en usar el comportamiento?

Page 1 of 3

INDIVIDUALIZED EDUCATION PROGRAM
Behavior Intervention Plan

For Behavior Interfering with Student's Learning or the Learning of His/Her Peers

Los Angeles Unified School District (Behavior Intervention Plan, pg. 1 of 3)

Student (Last:) (First:) (MI:) Date of Birth () Meeting Date (02-SEP-2021)

1 The behavior impeding learning is: Describe what it looks like:
(poor attendance) (attendance rate of 5.26%)

2 It impedes learning because: lack of work production disrupts other students requires instruction to stop
instructional time is lost negative interaction with peers
other ()

3 The need for a Behavior Intervention Plan: early stage intervention moderate serious extreme

4 Frequency or intensity or duration of behavior: Frequency (x) Period Intensity Duration (min)
() (daily) (high) (70)

Reported by (attendance records) and/or observed by (teachers and other staff)

PREVENTION PART 1 ENVIRONMENTAL FACTORS AND NECESSARY CHANGES

5 What are the predictors for the behavior? (Situations in which the behavior is likely to occur: people, time, place, subject, etc.)

Disruption in routines Work level higher than student's ability Verbal directives Lack of predictability
 Time of day Peer conflict Over stimulation
 Unstructured time Internal physical/emotional state Room conditions Specific room arrangement
 Events from previous environments Lack of freedom, choice, desirable activities, friends
 Under stimulation

Other Describe: ()

6 Observation Analysis What supports the student using the problem behavior? (What is missing in the environment/curriculum or what is in the environment/curriculum that needs changing?)

Present in the environment: Classroom seating arrangement Noise levels Interactions (adult and/or peers)
Missing in the environment: Peer status gained for misbehavior Inappropriate materials (age-appropriate) Conflict resolution skills
 Transition skills Schedule Effective communication with parent
 Re-teaching Task structuring Communications system
 Social skills instruction Consequences not clear to student
 Choices

Other (Missing/Present): ()

REMOVE STUDENT'S NEED TO USE THE PROBLEM BEHAVIOR

7 Intervention What environmental changes, structure and supports are needed to remove the student's need to use this behavior? (Changes in Time/Space/Materials/Interactions to remove the likelihood of behavior)

Time Changes: Give more time on tasks Allow completion in parts Teach a closure system
Space Changes: Signal transition Provide a break Give less time on tasks
 Preferred seating Different work areas Study carrels
Material Changes: Personal space Hands-on learning Tasks organized
Interaction: Accommodated work Notebook organizer Enlarged print size books
 High interest materials Cue the student Model
 Use specific supportive words Praise successes Peer Models
 Verbally praise student Use calm, de-escalating language
 Use specific support communications

Other ()

Who will establish? (RSP teacher/other staff) Who will monitor? (RSP Teacher/other staff) Frequency (Weekly)

Plan de Intervención de Conducta (continuación)

Puntos a considerar:

- ¿Cuándo sucede el comportamiento?
- ¿Qué estrategias / plan de estudio necesario / materiales se necesitan?
- ¿Quién enseñará estas estrategias?
- ¿Quién dará seguimiento a estas estrategias?
- ¿Con qué frecuencia se les dará seguimiento?
- ¿Qué refuerzos deberían de ser usados para establecer, mantener y generalizar comportamientos de sustitución?
- ¿Por quién? ¿Con qué frecuencia?
- ¿Qué estrategias serán usadas si el comportamiento que causa problemas sucede de nuevo?
- ¿Por quién?

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INDIVIDUALIZED EDUCATION PROGRAM
Behavior Intervention Plan
For Behavior Interfering with Student's Learning or the Learning of His/Her Peers

(Behavior Intervention Plan, pg. 2 of 3)

Student: Los Angeles Unified School District
 Last: CRISTIAN First: MI Date of Birth: Meeting Date: 02-SEP-2021

ALTERNATIVE 8 PART II: FUNCTIONAL FACTORS AND NEW BEHAVIORS TO TEACH AND SUPPORT

Team believes the behavior occurs because: (Function of behavior in terms of getting, protest or avoiding something)

To Get: Sensory input Attention (peer) Attention (staff)
 Tangible (desired item) Tangible (desired activity)

To Avoid: Sensory input Attention (peer) Attention (staff)
 Task (too difficult) Task (too easy) Task (too long)

Describe: _____

What team believes the student should do INSTEAD of the problem behavior? (How should the student escape/protest/avoid or get his/her need met in an acceptable way?)

Observation Analysis 9
 Cris should create a schedule for himself (such as using the school Bell Schedule posted in a prominent place or creating a class log) so that he is aware of his classes and what assignments he needs to complete.

10 What teaching Strategies/Necessary Curriculum/Materials are needed?

Better communication skills Anger management Communication system Self-management systems
 Following schedules & routines Learning new social skills Learning how to negotiate Learning structured choice
 Learning new scripts Learning notebook organization Learning to use conflict resolution Learning to request breaks
 Other: _____

Who will establish? RSP Teacher/Other staff Who will monitor? RSP Teacher/other staff Frequency: Monthly

What are reinforcement procedures to use for establishing, maintaining, and generalizing the replacement behavior(s)?

Intervention 11

Physical: High-fives Smiles Handshake
 Pat on the back Recognition of student's st... Peer recognition

Verbal: Use specific praises Free time Listen to music
 Time on the computer

Contingent Access: Preferred activity Describe: _____ Other: _____
 Positive phone calls or notes to home

Tangible: Certificate sent home Seating Location
 Tokens Points

Privileges: Exempt assignment Extra test points

Other ideas: _____

Selection of reinforcer based on: student input
 reinforcer for using replacement behavior reinforcer for general increase in positive behaviors

By whom? RSP teacher/other staff Frequency: Weekly

EFFECTIVE REACTION PART III REACTIVE STRATEGIES

12 What strategies will be employed if the problem behavior occurs again, (1. Prompt student to switch to the replacement behavior, 2. Describe how staff should handle the problem behavior if it occurs again, 3. Positive discussion with student after behavior ends, 4. Any necessary further classroom or school consequences)

Contact student to determine possible issues with technology. If there are no such issues, remind student of the program he has agreed to follow, and discuss consequences for future if he doesn't turn in work. Recognize efforts to date and provide encouragement.

Personnel?
 RSP teacher/other staff

Plan de Intervención de Conducta (continuación)

Puntos por considerar:

- ¿Cuál es la meta para la conducta?
- ¿Es una meta SMART para el IEP?
- ¿Son también necesarias las adaptaciones o modificaciones al plan de estudio?
- ¿Son necesarios cambios/apoyos referentes al entorno?
- ¿Es suficiente reforzar el comportamiento de sustitución por sí solo?
- ¿Se necesita tanto enseñar como reforzar el nuevo comportamiento de sustitución?
- ¿Este BSP se coordina con otras agencias?
- ¿Quién es responsable por comunicarse con las agencias?
- ¿Cómo y con qué frecuencia se notificará al padre?

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INDIVIDUALIZED EDUCATION PROGRAM
Behavior Intervention Plan

For Behavior Interfering with Student's Learning or the Learning of His/Her Peers

Los Angeles Unified School District (Behavior Intervention Plan, pg. 3 of 3)
 Student: Last () First () MI () Date of Birth () Meeting Date (02-SEP-2021)

OUTCOMES PART IV BEHAVIORAL GOALS

13 Behavioral Goal: Goal #: (5)

Cris will increase his class attendance rate to 96% or better.

The above behavioral goal is to: Increase use of replacement behavior and may also include:
 Reduce frequency of problem behavior Develop new general skills that remove student's need to use the problem behavior

Observation and Analysis Conclusion

Are curriculum accommodations or modifications also necessary? Where described?
 (Accommodations described at FAPEI)

Yes No

Are environmental supports/changes necessary?
 Yes No

Is reinforcement of replacement behavior alone enough? (no new teaching is necessary)?
 Yes No

Are both teaching of new replacement behavior AND reinforcement needed?
 Yes No

This BIP to be coordinated with other agency's service plans? Agency?
 ()

Yes No

Person responsible for contact between agencies.
 ()

COMMUNICATION PART V COMMUNICATION PROVISIONS

14 Manner and content of communication:

Phone calls Email Written notes
 Daily reports Daily charting Behavioral logs
 Weekly reports
 Other ()

Between? Frequency?
 (Parent and RSP teacher/other school) Monthly

Plan Individual de Transición

Puntos por considerar:

- ¿Se invitó al estudiante al IEP?
- ¿Ha recibido el estudiante un mentor?
- ¿Se ha remitido y asignado al estudiante a una agencia externa?
- ¿Participó el estudiante en educación de experiencia laboral?
- ¿Ha recibido el estudiante conocimiento sobre la preparación universitaria?
- ¿Ha recibido el estudiante conocimiento sobre la carreras?
- ¿Cuáles evaluaciones se han administrados para evaluar la meta de educación/capacitación del estudiante?
- ¿Cuál es la meta postsecundaria de educación/capacitación del estudiante?
- ¿Qué tipo de actividades apoyan la meta del estudiante?
- ¿Qué persona/agencia que es responsable?

INDIVIDUAL TRANSITION PLAN (ITP)

Student was invited to IEP meeting: Yes

Student received mentoring: Yes No

Student referred and placed in an outside agency: Yes No

If yes, name of agency: []

Student participated in Work Experience Education: Yes No

Student received college awareness preparation: Yes No

Student received career awareness: Yes No

Achievement of Transition Activities from Current ITP (not if first ITP)		
Area	Completed	If no, indicate reason
Education/Training Activity	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> First ITP	School closure due to national pandemic
Employment Activity	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> First ITP	School closure due to national pandemic
Independent Living Skills Activity (as needed)	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A	

Section 1: Education/Training

Assessment (at least one assessment must be completed in this area)	Date	Assessment Name and Results: Indicate interests/abilities and area(s) of need (if applicable)
Other - (textbox) <input type="text" value="Other"/> If other? Previous ITP	10-DEC-2020	Previous ITP: Cris was undecided about his future interests. He was not at the IEP meeting for interviewing.
Other - (textbox) <input type="text" value=""/> If other?		

Education/Training Postsecondary Goal
Upon completion of high school, the student will: If other?

Education/Training Activity to Support Goal	Timeline	Person/Agency Responsible
develop a list of high school courses needed for college entrance and develop a schedule for completing them in the remaining years of high school	08-DEC-2021	Student <input type="text" value=""/> Counselor <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
If other?		

Plan Individual de Transición (continuación)

Puntos por considerar:

- ¿Cuáles evaluaciones se han administrado para evaluar la meta de empleo del estudiante?
- ¿Cuáles son los títulos de las evaluaciones y los resultados de las evaluaciones?
- ¿Cuál es la meta postsecundaria de empleo del estudiante?
- ¿Qué tipo de actividades apoyan la meta del estudiante?
- ¿Cuándo se finalizarán las actividades?
- ¿Qué persona/agencia que es responsable?
- ¿Cuáles evaluaciones se han administrado para evaluar la meta de las destrezas para vivir por cuenta propia del estudiante?
- ¿Cuál es la meta postsecundaria de vivir por cuenta propia del estudiante?
- ¿Qué tipo de actividades apoyan la meta del estudiante?
- ¿Qué persona/agencia que es responsable?

INDIVIDUALIZED EDUCATION PROGRAM (IEP)		
Los Angeles Unified School District	Student (Last First MI)	Date of Birth Meeting Date
(ITP, pg. 2 of 3) (02-SEP-2021)		
INDIVIDUAL TRANSITION PLAN (ITP)		
Section 2: Employment		
Assessment (at least one assessment must be completed in this area).	Date	Assessment Name and Results: Indicate interests/abilities and area(s) of need (if applicable)
Other - (textbox) <input type="checkbox"/> If other? Previous ITP	{ 10-DEC-2020 }	Previous ITP: Crisis was undecided about his future interests. He was not at the IEP meeting for interviewing.
Other - (textbox) <input type="checkbox"/> If other?	{ }	
Employment Postsecondary Goal Upon completion of high school, the student will: be competitively employed		If other? <input type="checkbox"/>
Employment Activity to Support Goal	Timeline	Person/Agency Responsible
develop a career plan and identify career goals	{ 08-DEC-2021 }	Student <input type="checkbox"/> Counselor <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
If other?		
Section 3: Independent Living (as needed)		
Assessment (at least one assessment must be completed in this area).	Date	Assessment Name and Results: Indicate interests/abilities and area(s) of need (if applicable)
Other - (textbox) <input type="checkbox"/> If other?	{ }	
Other - (textbox) <input type="checkbox"/> If other?	{ }	
Independent Living Postsecondary Goal Upon completion of high school, the student will:		If other? <input type="checkbox"/>
Independent Living Activity to Support Goal	Timeline	Person/Agency Responsible
	{ }	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
If other?		

Plan Individual de Transición (continuación)

Puntos por considerar:

- ¿Se repasó una trayecto de estudio con el padre y el estudiante con relación a los cursos completados, los cursos que están realizando y los cursos que aún necesitan?
- ¿Se proporcionó un trayecto de estudio al padre o estudiante mayor de 18 años de edad?
- ¿Está el estudiante trabajando en obtener un diploma o certificación de terminación de estudios?
- ¿Hay agencias actualmente o posiblemente prestando o pagando por los servicios de transición?
- ¿Se puede invitar a estas agencias a la próxima reunión de IEP?
- ¿Hay meta/s anual/es de IEP que tienen que ver con las necesidades del estudiante en términos de los servicios de transición?
- ¿Hay evidencia que el estudiante fue invitado a la reunión del equipo de IEP?

9/2/2021 Individualized Education Program (IEP)
 INDIVIDUALIZED EDUCATION PROGRAM (IEP) (TTP, pg. 3 of 3)

Los Angeles Unified School District
 Student: (Last) (First) (MI) Date of Birth Meeting Date (02-SEP-2021)

INDIVIDUAL TRANSITION PLAN (IEP)

Course of study: A multi-year description of student's coursework from current year to anticipated exit year, in order to enable the student to meet their postsecondary goal.
 A course of study (or IGP) was reviewed with parent and student in relation to:
 Courses completed: Yes No
 Courses currently enrolled in: Yes No
 Courses still needed: Yes No

IGP or course of study was provided to the parent or student over age 18 as required: Yes
 Student is working towards: Certificate of Completion Diploma

Additional courses/activities discussed that may support post secondary goals (e.g. SLC participation, electives or instruction related to postsecondary goals, community experiences, participation in other school clubs or organizations, etc.) NOTE: these are suggestions and contingent to availability:
 Chris should increase his attendance so he can complete his work and improve his grades.

Future Agency Involvement:
 Are there agencies currently or prospectively providing or paying for transition services? Yes No
 Do you give permission to the District to invite these agencies to the next IEP in which transition services will be reviewed? Yes No

Agency Name: _____
 Agency Name: _____
 Agency Name: _____

1. Does the student's IEP include appropriate measurable postsecondary goals that cover education/training, employment and, as needed, independent living? *info* 1. Yes
 2. Are the postsecondary goals updated annually? *info* 2. Yes
 3. Is there evidence that the measurable postsecondary goals were based on age appropriate transition assessment? *info* 3. Yes
 4. Are there transition services that will reasonably enable the student to meet their postsecondary goals? *info* 4. Yes
 5. Do the transition services include a course of study that is a multi-year description of coursework from the student's current year to anticipated exit year and that is designed to help the student achieve the identified postsecondary goals? *info* 5. Yes
 6. Is (are) there annual IEP goal(s) related to the student's transition services needs? *info* 6. Yes
 7. Is there evidence that the student was invited to the IEP team meeting where transition services were discussed? *info* 7. Yes
 8. If appropriate, is there evidence that a representative of any participating agency was invited to the IEP team meeting with the prior consent of the parent or student who has reached the age of majority? *info* 8. Yes N/A



¿Alguna pregunta?
¡Gracias!

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