

Transition Services

Date of Student Invitation: _____

Method of Student Invitation: _____

Measurable Postsecondary Goals (Outcomes that occur after the student has left high school.)

Training or Education Goal: _____

Employment Goal: _____

Independent Living Goal: _____
(if applicable)

Transition Assessments List the multiple assessments used to address the student's career interests, vocational skills, employability, independent living skills, self advocacy and other preferences and interests. Assessment documentation must be included in IEP folder.

TRANSITION SERVICES	SCHOOL ACTION STEPS	STUDENT ACTION STEPS	FAMILY ACTION STEPS	AGENCY ACTION STEPS
INSTRUCTION/ RELATED SERVICES				
COMMUNITY EXPERIENCES				
EMPLOYMENT AND POSTSCHOOL ADULT LIVING				
FUNCTIONAL VOCATIONAL EVALUATION AND DAILY LIVING SKILLS				

The Individual Graduation Plan (IGP) aligns to the transition plan

Educational/Career Plan for LAA 1 aligns to the Transition Plan

WHEN NEEDED, IF A PARTICIPATING AGENCY DOES NOT ATTEND, DOCUMENT OTHER ACTIONS FOR AGENCY LINKAGES.

Exit Document: _____

Years to Graduate/Exit: _____

Anticipated Exit Date: _____

General Student Information

HOMEBASED SCHOOL: _____ OTHER SCHOOL: _____

IEP TYPE: _____ INDIVIDUAL EVALUATION / WAIVER DATE: _____

Primary / Other	Exceptionality	Detail(s)
Primary		
Other		
Other		
Other		
Other		

IEP Participants	Name	IEP Participants	Name

Include strengths; parental concerns; evaluation results; academic, developmental, and functional needs; statewide assessment results; progress or lack of expected progress in general education curriculum; and consideration of special factors: behavior, language needs for limited English proficient, instruction in and use of braille, communication needs, assistive technology devices and services, and health needs.

General Information about the Student:	
Strengths:	
Parent Concerns:	
Evaluation / Reevaluation Results:	
Academic, Developmental, and Functional Needs:	
Statewide Assessment Results:	
Progress or lack of expected progress in general education curriculum:	

General Student Information (continued)

Consideration of Special Factors

Behavior:

[Empty text box for Behavior]

Limited English Proficient:

[Empty text box for Limited English Proficient]

Communication Needs of Child:

[Empty text box for Communication Needs of Child]

Instruction in and use of Braille:

[Empty text box for Instruction in and use of Braille]

Assistive Technology Services / Devices - Please indicate AT devices used on the Accommodations Page

[Empty text box for Assistive Technology Services / Devices]

Health needs - IHP needs to be attached to IEP

[Empty text box for Health needs - IHP]

After consideration by the IEP team, there are no special factors that need to be addressed at this time

Transition Courses of Study - Attach plan to IEP:

Individual Prescription for Instruction

Individual Graduation Plan: aligns with the transition plan and has been updated annually

Educational / Career Plan for LAA1 Students: aligns with the transition plan and has been updated annually

Educational Needs:

Academic/Cognitive

Behavior

Communication

Motor

Self-Help

Social

Instructional Plan # _____

EDUCATIONAL NEED AREA: _____

CONTENT AREA: _____

ESY Instruction

Targeted for Secondary Transition

Present Level of Academic Achievement and Functional Performance

Measurable Academic / Functional Goal

Method of Measurement: _____

Additional Methods of Measurement: _____

Date Achieved: _____

REQUIRED FOR STUDENTS PARTICIPATING IN ALTERNATE ASSESSMENT
MEASURABLE SHORT-TERM OBJECTIVES or BENCHMARKS (Number each objective or benchmark)

No objectives have been entered.

PERSONNEL RESPONSIBLE FOR IMPLEMENTING GOAL (Check by position)

Special Education Teacher

Parent

Speech/Language Pathologist

Regular Education Teacher

Student

Adapted Physical Educator

Other Related Service Providers (List) _____

Other (List) _____

Accommodations

CHECK THE INDIVIDUAL ACCOMMODATIONS NEEDED

			Statewide Assessments					
			Paper			Online		
	Classroom	Testing	Math ELA	Science/ Social Studies	Grades 3-12 LAA 1	Grades 9-12 LAA 2	Grades 3-8 Math ELA	Grades 9-12 EOC
Presentation Accommodations								
Math Read Aloud								
Text to speech	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	
Human reader	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	
Recorded voice	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
All content areas Read Aloud - except reading comp								
Text to speech	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>		
Human reader	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>		
Recorded voice	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
ELA Read Aloud - all								
Text to speech	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>	
Human reader	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>	
Recorded voice	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>						
Modify Test/Assignments								
Modified tests	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>						
Modify assignments as needed	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>						
Shorten assignments	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>						
Limit amount of work required or length of tests	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>						
Modify/repeat/model directions	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>						
Alter format of materials on page (type/highlight/spacing)	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>						
Limited multiple choice/Reduce answer choices	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>						
Provide Word bank/Word assistance	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>						
Multiple choice spelling tests, shortened spelling list	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>						
Communication Assistance								
Communication Assistance/Task Description	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/> <input type="checkbox"/>
Fm system	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Adapted toys/games	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						

Computer/Word-Processor	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>
Touch Screen Monitor	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Reading pen	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
Communication assistance - related to hearing loss only	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Hearing Device	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Interpreter	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Visuals	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/> <input type="checkbox"/>			
Visual schedule/Picture schedule	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>						
Audio Amplification System	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="radio"/>	<input type="checkbox"/> <input type="checkbox"/>
Other Presentation Accommodations								
Answer Masking							<input type="checkbox"/> <input type="checkbox"/>	
General Administration- Directions Clarified by test administrator		<input type="checkbox"/> <input type="checkbox"/>	<input type="radio"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="radio"/>	<input type="checkbox"/> <input type="checkbox"/>
General Masking							<input type="checkbox"/> <input type="checkbox"/>	
Highlight Tool/Highlighter	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	
Headphones or Noise Buffers	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="radio"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Magnification/Enlargement Device	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="radio"/>	
Pop-up Glossary							<input type="radio"/>	
Redirect Student to the Test		<input type="checkbox"/> <input type="checkbox"/>	<input type="radio"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="radio"/>	<input type="checkbox"/> <input type="checkbox"/>
Braille	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Closed-Captioning of Multimedia Passages on the ELA/Literacy Assessments							<input type="checkbox"/> <input type="checkbox"/>	
Video of a Human Interpreter for the ELA/Literacy Assessments, including items, response options, and passages							<input type="checkbox"/> <input type="checkbox"/>	
ASL Video for the Mathematics Assessments for a Student Who is Deaf or Hard of Hearing							<input type="checkbox"/> <input type="checkbox"/>	
ASL Video of Test Directions for a Student Who is Deaf or Hard of Hearing							<input type="checkbox"/> <input type="checkbox"/>	
Descriptive Video							<input type="checkbox"/> <input type="checkbox"/>	
Paper-and-Pencil Edition							<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Tactile Graphics			<input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>	
Utilize graphic/pictorial mode materials (e.g. tactile graphics)	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/> <input type="checkbox"/>			
Large Print	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="radio"/>	<input type="checkbox"/> <input type="checkbox"/>
Change background font and colors	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Color reading filters	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Color code material	<input type="checkbox"/> <input type="checkbox"/>							
Provide study outlines/guides	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>						
Provide assistance/cues/prompts for transitions between activities	<input type="checkbox"/> <input type="checkbox"/>							
Task analysis	<input type="checkbox"/> <input type="checkbox"/>							
Use multi-sensory modes /tools to reinforce instruction	<input type="checkbox"/> <input type="checkbox"/>							
Use text/workbooks/worksheets at modified reading level	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>						
Provide daily assignment list	<input type="checkbox"/> <input type="checkbox"/>							
Provide homework lists	<input type="checkbox"/> <input type="checkbox"/>							
Preview test procedures		<input type="checkbox"/> <input type="checkbox"/>						
Simplify test wording		<input type="checkbox"/> <input type="checkbox"/>						
Utilize audio/recorded texts	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
Utilize digital formats	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
Digital Recorders	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
E-reader	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>						
Other (Classroom only - NOT for state assessments)								
Unique (Requires additional documentation and LDOE approval for use on state assessments)								

<input type="radio"/> Access For All <input type="triangle-up"/> Accessibility Feature		<input type="checkbox"/> Accommodation <input type="diamond"/> Assistive Technology		Statewide Assessments				
				Paper			Online	
				Grades 3-8		Grades 3-12	Grades 9-12	Grades 3-8
	Classroom	Testing	Math ELA	Science/ Social Studies	LAA 1	LAA 2	Math ELA	EOC
Response Accommodations								
Communication Assistance								
Communication board/system	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>
Functional communication book	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
PECS	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Scribing/Utilize oral responses to assignments/tests (answers recorded)	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Speech-to-Text	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>
Voice output device	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>
Voice recognition software	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>			<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>			
Word Processors	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="radio"/>	<input type="radio"/>
Adaptive Keyboard	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>
Switch Interface	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>					<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>
Headmouse	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>					<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>
Adaptive Joystick	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>					<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>
Trackball Mouse	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>					<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>
Communication Device	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>
Listening device	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>
Whisper phone	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>						
Computation Devices (Except on specific fluency items)								
Calculators	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Manipulatives/Abacas	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Timers	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Multiplication Chart/Hundreds Chart/Number Line	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Other Response Accommodations								
Braille Note-taker	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>					<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	
Writing Tools	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="diamond"/>	<input type="radio"/>	
Slant Board	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
NotePad/Blank Paper							<input type="radio"/>	<input type="checkbox"/> <input type="checkbox"/>

Eliminate Answer Choices							<input type="radio"/>	
Flag Items for Review							<input type="radio"/>	
Blank Paper/Adapted paper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>
Copy of notes (teacher notes, class notes)	<input type="checkbox"/>							
Word bank, reduced answer choices on multiple choice tests	<input type="checkbox"/>	<input type="checkbox"/>						
Word prediction on the ELA/Literacy Performance-based Assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Planners/Organizers/Graphic organizers	<input type="checkbox"/>	<input type="checkbox"/>						
Adapted grips/utensils/pencils/drawing tools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eye gaze communication system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Answers Recorded	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transferred Answers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide product options for students to obtain information and demonstrate knowledge through use of: alternative projects/ interviews/ oral reports	<input type="checkbox"/>	<input type="checkbox"/>						
Student writes on test		<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>		
Objective tests		<input type="checkbox"/>						
Rephrase test questions	<input type="checkbox"/>	<input type="checkbox"/>						
Test study guide	<input type="checkbox"/>	<input type="checkbox"/>						
Shortened tasks	<input type="checkbox"/>	<input type="checkbox"/>						
Extra credit options	<input type="checkbox"/>	<input type="checkbox"/>						
Hands-on-projects	<input type="checkbox"/>	<input type="checkbox"/>						
Dictionary/Thesaurus/Spell Checker	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		<input type="checkbox"/>
Other (Classroom only - NOT for state assessments)								
Unique (Requires additional documentation and LDOE approval for use on state assessments)								

<input type="radio"/> Access For All	<input type="checkbox"/> Accommodation	Statewide Assessments						
<input type="checkbox"/> Accessibility Feature	<input type="checkbox"/> Assistive Technology	Paper				Online		
		Grades 3-8		Grades 3-12	Grades 9-12	Grades 3-8	Grades 9-12	
	Classroom	Testing	Math ELA	Science/ Social Studies	LAA 1	LAA 2	Math ELA	EOC

Timing & Scheduling								
Extended Time/Increase the amount of time allowed to complete assignments and tests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pace long term projects	<input type="checkbox"/>							
Extra time-written work	<input type="checkbox"/>	<input type="checkbox"/>						
Prior notice of tests	<input type="checkbox"/>	<input type="checkbox"/>						
Modify student's schedule	<input type="checkbox"/>							
Allow breaks during work periods, between tasks, during testing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide assistance/cues for transition between classes, lockers, and home	<input type="checkbox"/>							
Content Mastery Center	<input type="checkbox"/>	<input type="checkbox"/>						
Other (Classroom only - NOT for state assessments)								
Unique (Requires additional documentation and LDOE approval for use on state assessments)								

<input type="radio"/> Access For All <input type="triangle-up"/> Accessibility Feature		<input type="checkbox"/> Accommodation <input type="diamond"/> Assistive Technology		Statewide Assessments					
				Paper			Online		
		Classroom	Testing	Grades 3-8		Grades 3-12	Grades 9-12	Grades 3-8	Grades 9-12
				Math ELA	Science/ Social Studies	LAA 1	LAA 2	Math ELA	EOC
Setting Considerations									
Individual testing		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="checkbox"/>
Small group testing		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="checkbox"/>
Provide individualized instruction		<input type="checkbox"/> <input type="checkbox"/>							
Provide small group instruction		<input type="checkbox"/> <input type="checkbox"/>							
Assign peer tutors/work buddies/notetakers		<input type="checkbox"/> <input type="checkbox"/>							
Provide desktop list of tasks		<input type="checkbox"/> <input type="checkbox"/>							
Alter physical room environment		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Separate or Alternate Location		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="checkbox"/>
Specified Area or Seating		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="checkbox"/>
Other (Classroom only - NOT for state assessments)									
Unique (Requires additional documentation and LDOE approval for use on state assessments)									

NONE (This student does not require Accommodations)

Program / Services

LOUISIANA EDUCATIONAL ASSESSMENT PROGRAM

Regular Assessments

Alternate Assessment

LAA 1 -- For a 12th grade student who is eligible to participate in LAA1, continue selecting this option even though the student is not required to test during the 12th grade year.

LAA 2 ELA Math Science Social Studies

None

This option should be selected only under one of the following two conditions:
- Prekindergarten through second grade students
- Graduating seniors who have passed the required components of the exit examination

The ACT assessment requires separate documentation and approval for local, state, and ACT approved accommodations as outlined in the Procedures for Requesting ACT Test Accommodations.

REGULAR CLASSES

- Reading
- Science
- Math
- Vocational
- Electives (list)
- Spelling
- Writing
- Art/Music
- English/Language Arts
- Physical Education
- Social Studies
- Foreign Language

If not in regular classes, explain

ACTIVITIES WITH NON-DISABLED PEERS (Check all activities with non-disabled peers)

- Assemblies
- Library
- Extracurricular/Nonacademic
- Other
- Buses
- Meals
- Field Trips
- Recess

If not participating in activities with non-disabled peers, explain

EXTENDED SCHOOL YEAR SERVICES (ESYS)

Criteria For Consideration:

- Regression / Recoupment
- Critical Point of Instruction 1
- Critical Point of Instruction 2

Special Circumstances

- Employment
- Transition to Part B (Preschool)
- Transition to Post School Outcomes
- Excessive Absences
- Extenuating Circumstances

Supports Needed for School Personnel (Describe)

Services / Placement

STUDENTS TOTAL INSTRUCTIONAL DAY (Minutes): _____ Student attends school days per week.

Service	Date to Begin	Duration	Individual / Group	Regular Class		Community		Special Class	
				Minutes	Sessions	Minutes	Sessions	Minutes	Sessions

Total Number of Minutes in Special Setting per Week: _____

Service	Date to Begin	Frequency	Individual / Group	Regular Class		Community		Special Class	
				Minutes	Sessions	Minutes	Sessions	Minutes	Sessions

Total Number of Minutes in Special Setting per Week: _____

PLACEMENT/SERVICE DETERMINATION CHECKLIST

Attends Regular Early Childhood Program at least 10 hours per week

- Receives majority of hours of special education and related services in the regular early childhood program
- Receives majority of hours of special education and related services in some other location

Attends Regular Early Childhood Program less than 10 hours per week

- Receives majority of hours of special education and related services in the regular early childhood program
- Receives majority of hours of special education and related services in some other location

Attends Special Education Program (not in any regular early childhood program)

- Separate Special Education Class Residential Facility
- Separate School

Attends neither a regular early childhood program nor a special education program

- Receives majority of special education and related services at home
- Receives majority of special education and related services at service provider or other location

COMMENTS

Placement

Special Transportation

No Yes - Describe

SITE DETERMINATION

NOTE: The local education agency may choose to complete this section at this time. If the following assurances cannot be provided at this time, then a Site Determination Form assuring that the site selected is in accordance with least restrictive environment rules must be forwarded to the parent within ten (10) calendar days.

ASSURANCES:

1. This school is the one the student would attend if he or she were not identified exceptional.
2. This school and class are chronologically age appropriate for the student.
3. The school selected is accessible to the student for all school activities.
4. The classroom is comparable to and integrated with regular classes.

Site: _____

PROGRESS REPORT

The LEA assures that the program and services described in the IEP will be provided. The schedule for describing the progress towards achievement of the academic and functional annual goals will be every weeks, current with the issuance of report cards.

ASSESSMENT IMPLICATIONS (Check one)

- I understand my child (I) will participate in LEAP Alternate Assessment, Level 1 (LAA 1). Testing in LAA 1 means my child (I) will be progressing toward a Certificate of Achievement and not a High School Diploma. The implications of participating in LAA 1 have been explained to me and will be reviewed annually.
- I understand my child (I) will participate in LEAP Alternate Assessment, Level 2 (LAA 2), and by meeting all graduation requirements, my child (I) will receive a high school diploma. However, if my child (I am) is not pursuing a high school diploma, my child (I) may pursue Louisiana's General Education Development (GED) diploma with possibly an Industry Based Certificate, or a State Approved Skills Certificate. If during the exit year all requirements for earning a high school diploma, GED, or State Approved Skills Certificate have not been met, then my child (I) may be eligible to exit high school with a Certificate of Achievement. I understand that this certificate limits my child's (my) choices of post-secondary education and careers, including military services. The implications of participating in LAA 2 have been explained to me and will be reviewed annually.

The LAA 2 will no longer be administered in grades 4-8 starting with the 14-15 school year. Students who have entered a high school cohort in 13-14 will continue to have access to the LAA 2 high school tests for graduation purposes. State law has recently changed regarding graduation options for students with disabilities and the IEP form will be updated during the 14-15 school year to accommodate these new options.

ALTERNATE ASSESSMENT IMPLICATIONS (cont'd)

- I understand my child (I) will be participating in the Academic Skills Assessment (ASA) or ASA LAA 2, if eligible. My child (I) is (am) leaving the high school diploma pathway and is (am) entering a non-diploma pathway. If successful, my child (I) will receive a Louisiana Equivalency Diploma (GED) with possibly an Industry-Based Certificate, or a State-Approved Skills Certificate but not a High School Diploma. The implications of participating in ASA or ASA LAA 2 have been explained to me and will be reviewed annually.

The Academic Skills Assessment was administered one time in 2011-2012 and then discontinued as a state assessment.

AGE OF MAJORITY

- Beginning at least one year before reaching the age of majority, I (my child) have been informed that my (his or her) rights under the act will transfer to me (my child) on my (his or her) reaching the age of majority**

PARENT/STUDENT* CONSENT FOR SERVICES

- I have received a copy of the Louisiana Educational Rights of Exceptional Children with disabilities, and was given an opportunity for an oral explanation. I have received a copy of my (child's) evaluation and documentation of determination of eligibility.
- I give consent for the provision of special education and related services. I understand that if I disagree with any services or the placement described on the IEP, I can pursue a solution to my complaint through the state's written dispute resolution options.
- Parent / Student did not attend the **Review** IEP Team meeting.

SUPPORTING DOCUMENTATION

Have the following documents been included in the IEP folder?

LEAP Alternate Assessment Participation Criteria, Level 1 (LAA 1)	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A
LEAP Alternate Assessment Participation Criteria, Level 2 (LAA 2)	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A
Individual Healthcare Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A
Individual Prescription for Instruction (aet copy from advisor/school guidance counselor)	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A
Individual Graduation Plan (current IGP has been uploaded in the attachments feature)	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A
Parental Consent form for Connections for 8th graders (aet signed copy from SBLC team)	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A
Summary of Performance Criteria Form	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A
Parental Consent form for Medicaid Billing	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A
Educational / Career Plan for LAA 1 Students	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A
Behavior Intervention Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A
Assistive Technology Consideration Checklist	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A
Assessment Approval Form	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A

SIGN:

PARENT/GUARDIAN/SURROGATE PARENT/COMPETENT MAJOR/STUDENT _____ **Date**

PRINT:

*Signature is only required for the **initial** provision of services.
 *Parents should initial and date in signature box if they attended an IEP team meeting where the IEP was amended.

SIGN:

OFFICIALLY DESIGNATED REPRESENTATIVE OF LOCAL EDUCATION AGENCY _____ **Date**

PRINT: