



HEARTLAND
AREA EDUCATION AGENCY

Extending your reach.

Heartland Special Education Procedures

At a Glance 2009 - 2010

Heartland Area Education Agency 11 does not discriminate based on gender, gender identity, race, national/ethnic origin, creed, age, marital status, sexual orientation, or disability. Direct inquiries to the Affirmative Action Coordinator, 6500 Corporate Dr., Johnston, IA 50131-1603, or Director, Office for Civil Rights, Chicago, IL 60606-7204.

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*A complete directory of central office and regional staff can be found on Heartland's website at www.aea11.k12.ia.us

Heartland Procedures At a Glance 2009-10



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Welcome to the 09-10 version of the Heartland Procedures At a Glance. You will notice that this year's booklet is structured a bit differently. On page two you will find a flowchart outlining the types of meetings and decisions typically held and made for students in special education. Some meetings require the team to address questions of initial or ongoing eligibility. Other decisions require various types of decision-making, but eligibility for special education is not in question. The meetings and decisions in the front section of At A Glance are also organized this way. A new section has been added. On pages three through eight you will find a section called a Quick Forms Guide. These pages contain matrixes that should be helpful in determining in a quick fashion which forms are needed for a particular type of meeting or decision. This Quick Guide will refer you to pages with more explanation. We hope you find it helpful. We thank our colleagues in AEA 10 for allowing us to incorporate their concept of a forms quick guide into our At A Glance.

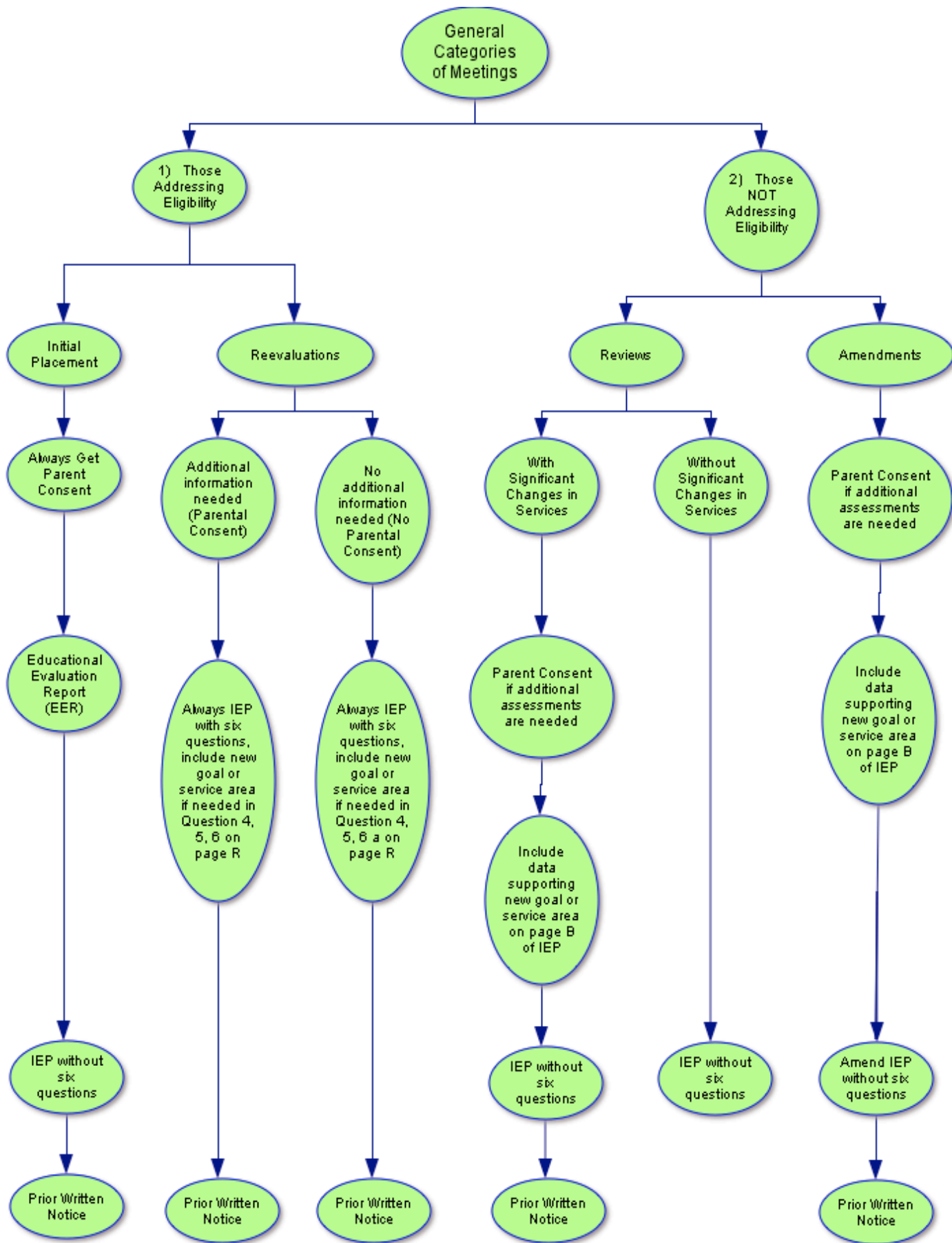
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Manuals

<http://www.aea11.k12.ia.us/spedresources/>

At A Glance
Iowa AEA State Procedures Manual
Early Access Manual
Data Based Decision Making Guide
Web Resources:
Iowa Guidance for Quality IEPs
<http://www.iepquality.iowa.gov>
IEP Tutorials
http://www.aea11.k12.ia.us/prodev/iep/iep_toc/



**Procedures at a Glance
Quick Forms Guide**

Form/Activity √ Form Required + Required Under Conditions	Disability Is Suspected (Page 10)	Initial Evaluation (Page 10)	Initial IEP Meeting (Page 11)	Reeval No new assessments (Option #1) (Page 12)	Reeval New Assessments (Option #2) (Page 12)
Disability Suspected Form	√				
Health Screen	√				
Problem Analysis		√			
Intervention Plan		√			
Eligibility Worksheet		√	√		
Meeting Notice		√	√	√	√
Agreement to Excuse (If required member excused)			+	+	+
Consent for/Notice of Evaluation	+			√	√
Educational Evaluation Report		√	√		
Procedural Safeguards Manual (At least once per year)	√			√	√
Consent for Special Ed or Related Services			√		
Reevaluation (Page R)				√	√
Prior Written Notice	+	√	√	√	√
IEP Page A Cover Page			√	√	√
IEP Pages B-G			√	√	√
IEP Additional Information			+	+	+
ESY Program Description (If ESY Needed)				+	+
Functional Behavior Assessment (If behavior is concern and assessment data needed, always updated before BIP)		+	+	+	+
Behavior Intervention Plan (If behavior requires)		+	+	+	+
Manifestation Determination (If discipline incident requires)					
Early Childhood Summary (Children 3-5)			+		
Early Childhood Setting Code (Children 3-5)			+		
Summary for Post Secondary Living, Learning, Working					
Justification for Special School (If considering Special School)			+	+	+
Individual Health Plan (If health indicates need)			+	+	+
Medicaid Authorization Form (If Medicaid eligible)			+	+	+
Authorization for Release of Information (When information needed)					
Authorization for Exchange of Information (When information needed)					
Working Together for Children	√				

**Procedures at a Glance
Quick Forms Guide**

Form/Activity √ Form Required + Required Under Conditions	Move In from Out of State (Page 13)	Exit from All SE Services (Page 13)	45 Day Trial Out of SE Services 1- Meeting (Page 14)	45 Day Trial Out of SE Services 2- Meeting (Page 14)
Disability Suspected Form				
Health Screen				
Problem Analysis				
Intervention Plan				
Eligibility Worksheet				
Meeting Notice	√	√	√	√
Agreement to Excuse (if required member excused)	+	+	+	+
Consent for/Notice of Evaluation	√	√		√
Educational Evaluation Report				
Procedural Safeguards Manual (At least once per year)	√	√	√	
Consent for Special Ed or Related Services				
Reevaluation (Page R)	√	√		√
Prior Written Notice	√	√	√	√
IEP Page A Cover Page	√	√	√	√
IEP Pages B-G	√		√	+
IEP Additional Information	+		+	+
ESY Program Description (If ESY Needed)	+			
Functional Behavior Assessment (If behavior is concern and assessment data needed, always updated before BIP)	+			
Behavior Intervention Plan (If behavior requires)	+			
Manifestation Determination (If discipline incident requires)				
Early Childhood Summary (Children 3-5)				
Early Childhood Setting Code (Children 3-5)				
Summary for Post Secondary Living, Learning, Working				
Justification for Special School (If considering Special School)	+			
Individual Health Plan (If health indicates need)	+			
Medicaid Authorization Form (If Medicaid eligible)	+			
Authorization for Release of Information (When information needed)				
Authorization for Exchange of Information (When information needed)				
Working Together for Children	√			
Final Exit Form		√		+

**Procedures at a Glance
Quick Forms Guide**

Form/Activity √ Form Required + Required Under Conditions	Annual Review (Page 15)	Amendment (Page 15)	Adding Vocational Goal or Service (Page 16)	Addition of Transportation (Page 16)	Adding ESY to IEP (Page 16)
Disability Suspected Form					
Health Screen					
Problem Analysis					
Intervention Plan					
Meeting Notice	√	+	+	+	+
Agreement to Excuse (If required member excused)	+	+	+	+	+
Consent for/Notice of Evaluation					
Educational Evaluation Report					
Procedural Safeguards Manual (At least once per year)	√	+	+	+	+
Consent for Special Ed or Related Services					
Reevaluation (Additional 6 Questions)					
Prior Written Notice	+	√	√	√	√
IEP Page A Cover Page	√	√	√	√	√
IEP Pages B -G	√	√	√	√	√
IEP Additional Information	+	+			
ESY Program Description (If ESY Needed)	+	+	+		√
Functional Behavior Assessment (If behavior is concern and assessment data needed, always updated before BIP)	+	+	+	+	
Behavior Intervention Plan (If behavior requires)	+	+	+	+	
Manifestation Determination (If discipline incident requires)					
Early Childhood Summary (Children 3-5)	+				
Early Childhood Setting Code (Children 3-5)	+				
Summary for Post Secondary Living, Learning, Working					
Justification for Special School (If considering Special School)	+	+	+	+	+
Individual Health Plan (If health indicates need)	+	+	+	+	+
Medicaid Authorization Form (If Medicaid eligible)	+	+	+	+	+
Authorization for Release of Information (When information needed)	+	+	+	+	+
Authorization for Exchange of Information (When information needed)	+	+	+	+	+

**Procedures at a Glance
Quick Forms Guide**

Form/Activity √ Form Required + Required Under Conditions	Addition of goal or service at a Review or Amendment Mtg (Page 17)	Addition of goal or service at a Reevaluation See Reevaluation Option#1 or #2	Deletion of goal or service (Services Remain) (Page 17)	Exit Due to Maximum Age or Graduation (Page 18)
Disability Suspected Form				
Health Screen				
Problem Analysis				
Intervention Plan				
Meeting Notice	+		+	√
Agreement to Excuse (If required member excused)	+		+	+
Consent for/Notice of Evaluation	+			
Educational Evaluation Report				
Procedural Safeguards Manual (At least once per year)	+		+	+
Consent for Special Ed or Related Services				
Reevaluation (Page R)				
Prior Written Notice	√		√	√
IEP Page A Cover Page	√		√	√
IEP Pages B- G	√		√	
IEP Additional Information	+			
ESY Program Description (If ESY Needed)	+			
Functional Behavior Assessment (If behavior is concern and assessment data needed, always updated before BIP)	+		+	
Behavior Intervention Plan (If behavior requires)	+		+	
Early Childhood Summary (3-5)	+		+	
Early Childhood Setting (3-5)	+		+	
Summary for Post Secondary Living, Learning, Working				√
Justification for Special School (If considering Special School)	+		+	
Individual Health Plan (If health indicates need)	+		+	
Medicaid Authorization Form (If Medicaid eligible)	+		+	
Authorization for Release of Information (When information needed)	+		+	
Authorization for Exchange of Information (When information needed)	+		+	
Final Exit Form				√

**Procedures at a Glance
Quick Forms Guide**

Form/Activity √ Form Required + Required Under Conditions	Parent Request Initial Evaluation (Page 19)	Parent Request Reeval (Page 19)	Parent Request ESY (Page 19)	Parent Revocation of Consent for Special Education and Related Services (Page 20)
Disability Suspected Form	Follow process for Disability is Suspected (page 8)			
Health Screen				
Problem Analysis				
Intervention Plan				
Meeting Notice		√	√	+
Agreement to Excuse (If required member excused)		+	+	+
Consent for/Notice of Evaluation		√		
Educational Evaluation Report				
Procedural Safeguards Manual (At least once per year)		√	+	√
Consent for Special Ed or Related Services				
Reevaluation (Page R)		√		
Prior Written Notice		√	√	√
IEP Page A Cover Page		√	+	√
IEP Pages B-G		√	+	
IEP Additional Information		+	+	
ESY Program Description (If ESY Needed)		+	+	
Functional Behavior Assessment (If behavior is concern and assessment data needed, always updated before BIP)		+		
Behavior Intervention Plan (If behavior requires)		+		
Manifestation Determination (If discipline incident requires)				
Early Childhood Summary (Children 3-5)				+
Early Childhood Setting Code (Children 3-5)				
Summary for Post Secondary Living, Learning, Working				+
Justification for Special School (If considering Special School)		+		
Individual Health Plan (If health indicates need)		+		
Medicaid Authorization Form (If Medicaid eligible)		+		
Authorization for Release of Information (When information needed)		+		
Authorization for Exchange of Information (When information needed)		+		
Working Together for Children				
Final Exit Form				√

**Procedures at a Glance
Quick Forms Guide**

Form/Activity	Student Not Attending School (Page 20)	Student Refusing Services (Page 20)
√ Form Required		
+ Required Under Conditions		
Disability Suspected Form		
Health Screen		
Problem Analysis		
Intervention Plan		
Meeting Notice	√	√
Agreement to Excuse (If required member excused)	+	+
Consent for/Notice of Evaluation		
Educational Evaluation Report		
Procedural Safeguards Manual (At least once per year)	+	+
Consent for Special Ed or Related Services		
Reevaluation (Additional 6 Questions)		
Prior Written Notice	√	√
IEP Page A Cover Page	√	√
IEP Pages B-G		
IEP Additional Information		
ESY Program Description (If ESY Needed)		
Functional Behavior Assessment (If behavior is concern and assessment data needed, always updated before BIP)		
Behavior Intervention Plan (If behavior requires)		
Manifestation Determination (If discipline incident requires)		
Early Childhood Summary (Children 3-5)		
Early Childhood Setting Code (Children 3-5)		
Summary for Post Secondary Living, Learning, Working	+	+
Justification for Special School (If considering Special School)		
Individual Health Plan (If health indicates need)		
Medicaid Authorization Form (If Medicaid eligible)		
Authorization for Release of Information (When information needed)		
Authorization for Exchange of Information (When information needed)		
Working Together for Children		
Final Exit Form	√	√

MEETINGS ADDRESSING ELIGIBILITY

Action Under Consideration	Activity Steps	Forms Needed
<p>Disability is suspected</p>	<ul style="list-style-type: none"> • Review school-wide or class-wide data comparing student in relationship to class or school data • Review all documentation from building-level interventions/Interview relevant general education staff • Review cumulative file * Obtain health screening (review for hearing, vision, health) • Convene required participants for Disability Suspected meeting (general education teacher, LEA representative, AEA representative, parent) • Complete Disability Suspected form • Provide parent rights • If disability is suspected, obtain signed Consent for Evaluation • Set Eligibility for Special Education Services meeting date which must be held within 60 days from date the consent is received by LEA or AEA • If disability is not suspected and parents request an evaluation, a PWN must be provided • Consent for Evaluation, DSF and demographic sheet turned into regional office <u>or</u> DSF and PWN turned into regional office. 	<ul style="list-style-type: none"> √ Disability Suspected Form (DSF) √ Health Screening √ Consent for Evaluation √ <i>Working Together for Children</i> brochure √ <i>Parent Rights</i> brochure √ <i>PWN</i>
<p>Initial Evaluation for Special Education</p>	<ul style="list-style-type: none"> • Electronic notification issued to all doing evaluations • Complete problem analysis including system or class analysis when appropriate (Document in format chosen by practitioner). • Assure intervention design, implementation and monitoring, evaluate effectiveness of intervention • Collect information to rule out the impact of exclusionary factors on student performance • Collect any information not already available about discrepancy, progress (rate of growth) and need • Intervention form and graph turned into regional office with EER • Educational Evaluation Report completed prior to eligibility determination meeting • Meeting Notice is sent by the school • Eligibility Determination Meeting held; may also conduct Initial IEP Meeting or reconvene and complete the Initial IEP within 30 days • Provide Parent Rights • Complete Prior Written Notice documenting eligibility decision 	<ul style="list-style-type: none"> √ Problem Analysis Documentation √ Individual or Group Intervention Plan √ Educational Evaluation Report √ Eligibility Data Worksheet √ Meeting Notice <i>Parent Rights</i> brochure √ Prior Written Notice

**PROCEDURES GUIDE AT A GLANCE
ADDRESSING ELIGIBILITY**

Action Under Consideration	Activity Steps	Forms Needed
<p>Reevaluation Option 1 – No new assessments anticipated or needed A new goal or service area may be added</p>	<ul style="list-style-type: none"> • Student is identified as needing a reevaluation and data is collected • Consent for/Notice of Evaluation completed with parent prior to the Reevaluation Meeting • Meeting notice and parental rights are sent by school • Reevaluation IEP completed • If adding a “new” goal or service area, provide progress & discrepancy data under Reevaluation Question #4 and include consideration of the “new” area or service in Questions 5 and 6 • Prior Written Notice completed • Reevaluation IEP is submitted to the regional office within five (5) business days 	<ul style="list-style-type: none"> √ Meeting Notice √ <i>Parental Rights</i> brochure √ Consent for/Notice of Evaluation √ Agreement to Excuse if needed √ IEP Pages A-G √ Reevaluation Questions Page R √ Prior Written Notice √ FBA and BIP (if Needed) √ ESY Program Description (if needed)
<p>Reevaluation Option 2 – New assessments are anticipated A new goal or service area may be added</p>	<ul style="list-style-type: none"> • Student is identified as needing a reevaluation • An IEP team member contacts the parent to discuss the need for new assessments • Consent for/Notice of Full & Individual Evaluation form is completed with parent signature and turned into regional office. • Electronic notification issued for evaluations • Assessments are conducted • Meeting notice and parental rights are sent by the school • Reevaluation IEP is complete • If adding a “new” goal or service area, provide progress & discrepancy data under Reevaluation Question #4 and include consideration of the “new” area or service in Questions 5 and 6 • Prior Written Notice completed • IEP is submitted to the regional office within five (5) business days 	<ul style="list-style-type: none"> √ Consent for/Notice of Full & Individual Evaluation √ Meeting Notice √ <i>Parental Rights</i> brochure √ Agreement to Excuse (if needed) √ IEP Pages A-G √ Reevaluation Questions Page R √ Prior Written Notice √ FBA and BIP (if needed) √ ESY Program Description (if needed)

**PROCEDURES GUIDE AT A GLANCE
ADDRESSING ELIGIBILITY**

Action Under Consideration	Activity Steps	Forms Needed
<p>Entitled individual who moves into an LEA from out of state</p>	<ul style="list-style-type: none"> • Student moves into an LEA from out of state • Principal confirms placement • Begin providing services as described in the out of state IEP or write an Interim IEP • Begin reevaluation process with review of existing data <p>If no additional data are needed use Option #1 If additional data are needed use Option #2</p>	<p>See forms for Option #1 Page 12 See forms for Option #2 Page 12</p>
<p>Exit from all Special Education services (Including deleting a support service when there are no other goals) due to completion of IEP goals.</p>	<ul style="list-style-type: none"> • Meeting notice sent by the school • Consent for/Notice of Full and individual Evaluation form is completed • Reevaluation Questions Answered • Prior Written Notice form is completed • Cover Sheet is completed with appropriate exit code • Page A, Reevaluation questions, Prior Written Notice, and Final Exit Form are submitted to regional office within five (5) business days 	<ul style="list-style-type: none"> √ Meeting Notice √ Agreement to Excuse if needed √ Procedural Safeguards √ Reevaluation Questions Page R √ Consent for evaluation form √ IEP Page A Cover Sheet √ Prior Written Notice √ Final Exit Form

**PROCEDURES GUIDE AT A GLANCE
ADDRESSING ELIGIBILITY**

Action Under Consideration	Activity Steps	Forms Needed
<p>45-Day Trial Out of all Special Education Services</p> <p>Initial Meeting</p>	<p>First Meeting</p> <p>Meeting notice and parental rights are sent by the school</p> <ul style="list-style-type: none"> • IEP meeting is held and a new IEP is rewritten or amended— (See Meeting Determination Guide) (Appropriate goals must be in place.) • Provide parent Prior Written Notice of 45 day trial reintegration • No services are provided for a 45 day period of time (or until data indicates that services are needed) with the exception of progress monitoring 	<p>First Meeting</p> <ul style="list-style-type: none"> √ Meeting Notice √ Agreement to Excuse (if needed) √ <i>Parental Rights</i> brochure √ IEP Pages A-G √ Prior Written Notice
<p>45 Day Trial Completion Student No Longer Eligible</p>	<p>Second Meeting</p> <ul style="list-style-type: none"> • Meeting notice, Consent for/Notice of Reevaluation and parental rights are sent by the school • IEP meeting is held to review results of trial out period. (This meeting should be initiated at any point during the trial out period if student progress data indicates services are needed.) • If the data indicates that the trial was <u>successful</u>: <ul style="list-style-type: none"> • Reevaluation Questions Answered • Prior Written Notice form is completed • Cover Sheet is completed with appropriate exit code • Page A, Reevaluation questions, Prior Written Notice, and Final Exit Form are submitted to regional office within five (5) business days <p style="text-align: center;">OR</p>	<p>Second Meeting</p> <ul style="list-style-type: none"> √ Consent for Notice of Evaluation √ Agreement for Excusal if needed √ Meeting Notice √ IEP Page A √ Re-evaluation Questions Page R √ Prior Written Notice √ Final Exit Form if all services are discontinued
<p>45 Day Trial Completion Student Remains Eligible</p>	<ul style="list-style-type: none"> • If data indicates that the trial was <u>not successful</u> and services should be reinstated, a Reevaluation IEP should be completed to fully describe services and review current goals. A Prior Written Notice form is used to document reinstatement of services • Submit to regional office within five (5) business days 	<ul style="list-style-type: none"> √ Consent for Notice of Evaluation √ Agreement for Excusal if needed √ Meeting Notice √ Reevaluation IEP Pages A-G, R (include six questions) √ Prior Written Notice

**PROCEDURES GUIDE AT A GLANCE
NOT ADDRESSING ELIGIBILITY**

Action Under Consideration	Activity Steps	Forms Needed
Annual Review	<ul style="list-style-type: none"> • Meeting notice and parental rights are sent by the school • Information for transition planning gathered if appropriate • Student is prepared to participate in the meeting if appropriate • IEP is developed including: <ul style="list-style-type: none"> • Strengths, preferences, interests • Parents' concerns for enhancing their child's education • Special considerations • Other information essential for development of IEP • Effect of the disability and functional implications • Post secondary expectations for living, learning, and working if appropriate • Course of study • Review of previous goals • Current functioning • Baseline • Goals • Evaluation Procedures • Iowa Core Content Standard • District standard and benchmark • Persons responsible • Milestones • Special education services, activities, and supports • Extended year, transportation, PE, and district-wide assessment • Least Restrictive Environment Considerations • Complete Cover Page • Submit IEP to regional office within five (5) business days • IEP distributed by special education teacher once the IEP has been implemented. Copies mailed to parent, placed in special education file, and sent to resident district as appropriate. General education teachers are given copy or have access to a copy. 	<ul style="list-style-type: none"> √ Meeting Notice √ Agreement to Excuse (if needed) √ <i>Parental Rights</i> brochure √ IEP Pages A – G √ FBA and BIP (if needed) √ Prior Written Notice (if needed)
Amendment	<ul style="list-style-type: none"> • Make determination if it is appropriate to do an amendment— (See Meeting Determination Guide) • Determine if all school-based IEP team members and AEA Primary Contacts are in agreement of need for the amendment • Contact parents by phone, e-mail, or other method of communication to explain proposed change and seek their agreement that the IEP be amended without a meeting. <ul style="list-style-type: none"> • If parents agree, open Web IEP and select Amendment Without a Meeting as type of meeting. Make changes to IEP. <ul style="list-style-type: none"> • Document notification of contact with parents on Page A • Complete Prior Written Notice including team members agreement under Section 5 • If parents do not agree, schedule IEP meeting and send appropriate meeting notices to all IEP members. Conduct amendment meeting. • Complete Prior Written Notice • Submit to regional office within five days 	<ul style="list-style-type: none"> √ Agreement for Excusal (if needed) √ IEP Pages A-G √ FBA and BIP (if Needed) √ Meeting Notice (if meeting is held) √ Prior Written Notice √ Be sure to update entire IEP

**PROCEDURES GUIDE AT A GLANCE
NOT ADDRESSING ELIGIBILITY**

Action Under Consideration	Activity Steps	Forms Needed
Adding a Vocational Goal/Service	<ul style="list-style-type: none"> • Meeting notice and parental rights are sent by the school • Need is validated through transition assessment information documented on page B of IEP • Complete new IEP with new goal area/service • Complete Prior Written Notice form and justify new goal area 	<ul style="list-style-type: none"> √ Meeting Notice √ Agreement for Excusal (if needed) √ Parent Rights brochure √ IEP Pages A-G √ Prior Written Notice
Addition of transportation	<ul style="list-style-type: none"> • Meeting notice and parental rights are sent by the school • Meeting is held to determine need for service • Review data using RIOT procedures • If student is determined not to be in need of specialized transportation, document on Prior Written Notice to parent • If student is determined to be in need of specialized transportation complete appropriate paperwork • 	<ul style="list-style-type: none"> √ Meeting Notice √ Parents Rights brochure √ Pages A-G updated √ Prior Written Notice
<p>Addition of ESY to student IEP</p> <p>Considerations and decisions concerning ESY should be made 60 calendar days before the potential interruption in educational services.</p>	<ul style="list-style-type: none"> • Meeting notice and parental rights are sent by the school • Amendment Meeting is held to determine need for ESY • Review data using RIOT procedures • Student determined to be in need of ESY (Amend Page G) • Examine options for provision of service • Complete ESY Program Description • Document ESY decision on Prior Written Notice • ESY Program Description form upload into associated files and Prior Written Notice are printed by regional secretary • Submit IEP to regional office within 5 days • The Primary Contact retains copy of ESY Program Description form <hr/> <ul style="list-style-type: none"> • Collect and record baseline data • Provide services • Record ending level of performance <hr/> <ul style="list-style-type: none"> • Record performance level when school year resumes • Record performance level after nine weeks • Completed ESY Program Description form turned into regional secretary and coordinator of summer services 	<ul style="list-style-type: none"> √ Meeting Notice √ Agreement for Excusal (if needed) √ <i>Parental Rights</i> brochure √ Review and update Pages A-G √ ESY Program Description √ Prior Written Notice <hr/> <ul style="list-style-type: none"> √ ESY Program Description

**PROCEDURES GUIDE AT A GLANCE
NOT ADDRESSING ELIGIBILITY**

Action Under Consideration	Activity Steps	Forms Needed
<p>Exit from all Special Education services because of graduation or reaching maximum age</p>	<ul style="list-style-type: none"> • <u>If</u> student is graduating due to meeting maximum age, meeting notice is sent, meeting is held, Post-Secondary Summary is completed, and Prior Written Notice form is completed documenting termination of services. • <u>If</u> student is graduating with a regular diploma, review goal areas and need for further services. Complete Prior Written Notice form if decision is reached to graduate the student. • Cover Sheet is completed with appropriate exit code • IEP team completes Post-Secondary Summary for Living, Learning, and Working form or SAR Support for Accommodations Request Form OR • <u>If</u> the IEP team recommends continued programming for a student, an IEP should be developed. If the student chooses to exit services despite this recommendation, this should be indicated on the Prior Written Notice form. 	<ul style="list-style-type: none"> √ Meeting Notice √ Agreement to Excuse if needed √ IEP Page A √ Prior Written Notice √ Post-Secondary Summary √ Final Exit Form √ Meeting Notice √ Prior Written Notice √ IEP Page A √ Post-Secondary Summary or SAR √ Final Exit Form √ IEP Pages A-G √ FBA and BIP (if Needed) √ Prior Written Notice

**PROCEDURES GUIDE AT A GLANCE
PARENT REQUESTS**

Action Under Consideration	Activity Steps	Forms Needed
Parent Requests Initial Evaluation	Follow process for Disability is Suspected Page 10	
Parent Requests Reevaluation	<ul style="list-style-type: none"> • Meeting notice sent by the school • IEP team meets including AEA personnel to develop Reevaluation IEP: • If additional assessments are needed, Consent for/Notice of Reevaluation form is completed with parent signature. Follow Reevaluation Option 2 process. • If additional assessments are not needed, complete Consent for/Notice of Reevaluation form accordingly. Follow Reevaluation Option 1 process. • Submit to regional office within five (5) business days 	<ul style="list-style-type: none"> √ Meeting Notice √ Agreement to Excuse (if needed) √ Consent for/Notice of Full & Individual Reevaluation √ IEP Pages A-G √ Reevaluation Question Page R √ Parent Rights brochure √ Prior Written Notice
Parent Requests for ESY	<ul style="list-style-type: none"> • Meeting notice and parental rights are sent by the school • Meeting is held to determine need for ESY • Review data using RIOT procedures <ul style="list-style-type: none"> • If student is determined not to be entitled to ESY, provide Prior Written Notice of refusal to parent • If student is determined to be entitled to ESY, follow procedures for addition of ESY (page 16) 	<ul style="list-style-type: none"> √ Meeting Notice √ Agreement to Excuse (if needed) √ <i>Parental Rights</i> brochure √ Prior Written Notice
Parent requests for services, placements, etc.	<ul style="list-style-type: none"> • Meeting notice sent by the school • IEP team meets to consider the parent's request: <ul style="list-style-type: none"> • If IEP team agrees that the request should be incorporated into the student's IEP; then appropriate IEP paperwork is completed. • If IEP team does not agree that the request is warranted, a Prior Written Notice of refusal must be completed. • Submit to regional office within five (5) business days 	<ul style="list-style-type: none"> √ Meeting Notice √ IEP paperwork √ Prior Written Notice

**PROCEDURES GUIDE AT A GLANCE
STUDENT REFUSALS**

<p>Student Not Attending School</p>	<ul style="list-style-type: none"> • Take action to encourage school attendance • If student returns, document services or changes on IEP, if needed. • If student does not return, convene IEP meeting. Document on Prior Written Notice the efforts made to encourage attendance and the student's continued eligibility. • IEP team completes exit form (Post Secondary Summary Optional) 	<ul style="list-style-type: none"> ✓ Meeting Notice ✓ Agreement to Excuse (if needed) ✓ Prior Written Notice ✓ Page A ✓ Final Exit Form ✓ Post Secondary Summary Form (Optional)
<p>Student Refusal of Services</p>	<ul style="list-style-type: none"> • Pursue appropriate avenues to ensure participation including: <ul style="list-style-type: none"> • Notification of and enlistment of help from parents • Interview of student • Review of the appropriateness of special education program • Document efforts to ensure participation in IEP • If student still does not participate in special education program <ul style="list-style-type: none"> • Convene IEP team • Prior Written Notice completed documenting efforts to ensure participation, and students retention of the right to resume special education services in the future • IEP team completes exit form (Post Secondary Summary Form Optional) 	<ul style="list-style-type: none"> ✓ Meeting Notice ✓ Agreement to Excuse (if needed) ✓ Prior Written Notice ✓ Page A ✓ Final Exit Form ✓ Post Secondary Summary Form (Optional)
<p>Parent Revocation of Consent for Special Education & Related Service</p>	<ul style="list-style-type: none"> • Parent provides written request to revoke consent for placement to LEA. • Offer to hold a meeting with parents. Parents may decline to attend. • Complete page A of IEP including Date of Meeting, indicate review IEP, duration to and from dates both the same as IEP meeting date and list participants (if applicable), Final exit code of RRT • Complete PWN • Complete ECO for preschool students • Final Exit form 	<ul style="list-style-type: none"> ✓ Meeting Notice (if appropriate) ✓ Agreement to Excuse (if needed) ✓ IEP page A ✓ PWN ✓ ECO (if needed) ✓ Final Exit Form ✓ PSS (optional) ✓ Parent Rights brochure to parent

IEP MEETING AGENDA

Note: The focus of an Individualized Education Program (IEP) meeting should be on the process, not the completion of the forms. Developing the Present Levels of Academic Achievement and Functional Performance (PLAAFP) collaboratively ensures the involvement of the family, student, and educators in planning the student's education. It is important that all team members come to the meeting prepared to share information and make decisions about the student's IEP (see section one of the State IEP Manual for additional information). **The IEP should be completed at the meeting; reconvene if necessary.**

Prior to the Meeting:

- Determine the purpose for the meeting
- Collect necessary information (preferences, strengths, concerns, evaluation results, transition information, other)
- Invite and prepare appropriate participants (parents, student, service providers, other district personnel, outside agency personnel)
- Make every effort to ensure parent participation
- Begin to fill out the draft IEP (only certain parts may be completed)
- Arrange meeting space (best time and place, comfortable space, seating that promotes eye contact)

During the Meeting

- Offer beverages to everyone if they are available
- Welcome participants, determine purpose, make introductions, and establish ground rules
- Review parental safeguards
 - Consent issues surrounding evaluation
 - Independent educational evaluation
 - Prior notice
 - Behavior and discipline issues
 - Legal process options for disagreements
 - Attorney fees
 - Private school placement and FAPE
 - Confidentiality
 - Child's rights
- Discuss and identify student strengths, interests, and preferences
- Discuss and identify parent concerns for their child
- Discuss the special considerations and decide if they will be included in the IEP
- Describe and document transition assessments conducted if appropriate
- Describe the effect of the disability and functional implications of the student's skills on involvement and progress in the general curriculum
- For students age 14 and older, use transition assessment information and student and family vision to determine the student's post-secondary expectations for living, learning, and working as well as course of study
- Discuss and determine results of the previous IEP (discuss exit and reintegration)
- For each area of concern, identify current academic achievement and functional performance, baseline, goal, related post-secondary expectation(s), evaluation procedures, Iowa Core Content Standards, related general education standard and benchmark, position responsible, and major milestones or objectives (for students assessed through alternate assessment)
- Discuss and determine special education services as they relate to the student's vision and goals
- Discuss and determine least restrictive environment considerations (Discuss exit and reintegration)
- Determine frequency and type of progress reports
- Summarize and close the meeting
- Give parents a copy of the IEP forms to take with them

After the Meeting

- Inform any participants not in attendance at the meeting of their IEP responsibilities
- Ensure that all relevant general education teachers are aware of their responsibilities
- Follow-up with participants to determine how the meeting went and receive input on how future meetings could be improved
- If necessary, provide Prior Written Notice (an AEA staff member should have been at the meeting if major changes requiring prior notice were made)

**PHASE 1 PRESENT LEVEL OF PERFORMANCE AND ACADEMIC ACHIEVEMENT
AND FUNCTIONAL PERFORMANCE (PLAAFP) PAGE B**

Component	Explanation	Examples
Strengths, Interests and Preferences of this individual	<ul style="list-style-type: none"> • First of four components that set the context of IEP discussions • Includes the student's strengths, preferences, and interests that are relevant to educational planning • Strengths: general things that the student is good at (not assessment information) and reflective of the student's personality • Interests: things, events, or people that evoke the student's curiosity • Preferences: things, events or people that the student chooses over others • All three: strengths, interests, and preferences need to be included 	<p><u>Strengths:</u> ✓ has a strong work ethic ✓ good at maintaining friendships ✓ good at art activities</p> <p><u>Interests:</u> ✓ is interested in fixing machines ✓ is interested in learning about animals ✓ has an interest in fashion</p> <p><u>Preferences:</u> ✓ prefers to work by himself ✓ prefers spending time outside ✓ prefers hands-on activities</p>
Parents' concerns for enhancing their child's education	<ul style="list-style-type: none"> • Second of four components that set the context of IEP discussions • Opportunity for parents to mention concerns or ideas they have for their student's education • Record a summary of the discussion • Does NOT include a specific request for a service or support 	<p>"Parents have concerns regarding Mario's handwriting skills. Building Assistance Team members will be contacted for problem solving on this concern."</p> <p>"Emily's parents are interested in receiving information on residential living options after high school. A member of Emily's IEP team will get information to Emily's parents on these options."</p>
Special considerations to be addressed in developing this IEP	<ul style="list-style-type: none"> • Indicate Y or N for each item after considering whether the item needs to be addressed as part of the IEP • Behavior, Communication, Health may have more than one box checked Y 	Behavior Communication Health Needs Limited English Proficiency Braille Instruction Assistive Technology
Other information essential for the development of this IEP	<ul style="list-style-type: none"> • Summarize the discussion about any other information that is essential for developing the IEP • Write "none" if appropriate • Summarize transition assessment information here including data sources and implications for living, learning, and working. • Summarize data justifying the need to add a new goal or service area (progress, discrepancy) when appropriate. 	<p>Any other IEP relevant information that may not be addressed through goals or services should be recorded here.</p> <p>"No other information"</p>

Note that there are two versions of Page B. The IEP for students ages 3-12 does not contain transition components. The version for students ages 13 through 21 contains specific prompts to ensure that all information is included.

**PHASE 1 PRESENT LEVEL OF PERFORMANCE AND ACADEMIC ACHIEVEMENT
AND FUNCTIONAL PERFORMANCE (PLAAFP) PAGE B**

Component	Explanation	Examples
<p>Describe the effect of this individual's disability on involvement and progress in the general curriculum and the functional implications of the student's skills.</p>	<ul style="list-style-type: none"> Describe the effect of the individual's disability on the pursuit of their vision and involvement and progress in general curriculum, activities, or post secondary expectations. There is only <u>one</u> general curriculum, which is reflected in standards, benchmarks, and essential learnings. Provide a broad description of how the student's disability impacts his/her ability to generalize and apply skills learned to other situations and settings. <p><u>Transition:</u> For students 13 and older, include the effect on this individual's pursuit of post secondary expectation including living, learning, and working.</p>	<p>Anna's disability is affecting her parents' vision for Anna to improve her social skills. Her disruptive behavior also affects her ability to participate in the general education curriculum with same grade peers. Anna's disability impacts all settings in school as well as her ability to make and maintain friendships outside the school setting.</p> <p>Meredith (age 4) participates in all age-appropriate activities with assistance, but her distractibility and low level of engagement affect her independent functioning. Her disability requires 1:1 adult assistance and/or numerous prompts to participate in most school and home-based activities. She will need continued layered support in order to benefit from skill instruction.</p> <p>John's disability is affecting his acquisition of reading comprehension skills at the same rate as peers at his grade level. This impacts his progress in his content area classes where independent reading is required to learn new information. John plans to attend college and study to be a teacher. He will need guided practice with generalizing comprehension strategies into post-secondary educational and work settings. Future adult living situations should not be affected by John's disability.</p>
<p>Based on transition assessments of students ages 13 and older, describe the post-secondary expectations for living, learning, and working.</p>	<ul style="list-style-type: none"> Based upon a transition assessment comparing student's current skills, preferences, and interests <i>with</i> skills, preferences, and interests needed for future living, learning, and working expectations. Must be a team decision that includes an anticipated result statement for each area of living, learning, and working Write as observable behaviors Should be more specific over time and drive the student's course of study. Must address all three living, learning and working 	<p>"Based upon transition assessment discussion, Jennifer will attend a local community college and graduate with an associate's degree in veterinary technology. She then will work as a veterinary technician. Jennifer will live in an apartment with a roommate."</p> <p>"Ben will live in a supervised apartment setting with a roommate after graduation. Ben will receive life skills training from the Supported Community Living Program. He will continue to work at a grocery store at which he is currently employed and will also continue to receive services from a job coach as needed. "</p> <p>Note that Page B has been changed to provide specific prompts for all these components. Indicate if the area will be addressed later in the IEP by checking yes or no.</p>

<p>Course of study</p>	<ul style="list-style-type: none"> • Define coursework and activities in which the student will participate to achieve outcomes identified in the vision statement • If a detailed course of study is appropriate, attach and include as part of the IEP <p><u>Transition:</u> For students 13 and older, include projected date of graduation and a description of graduation requirements and courses and activities student will take to achieve outcomes.</p>	<p>“Brody plans to graduate on schedule with peers in Spring 2009. At this time, Brody has obtained 28 of the 46 credits required for graduation. His courses will include a blend of core courses and vocational experiences. Brody needs to maintain a 2.5 GPA and complete college prerequisites to obtain admission to a post-secondary program in auto mechanics. Junior year, linkages will be made for job shadowing/work experiences in auto mechanics.”</p> <p>“Jamie will obtain a high school diploma with his class in Spring 2010. He has obtained 32 of 46 required credits to graduate. He will receive resource support in organizational skills, including work completion. He will take electives available to all students (personal development, industrial technology, and computer) to develop interests and abilities for future work.”</p> <p>Note that the Page B Web IEP has specific prompts for each of these components of the course of study.</p>
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PHASE 2 WELL-WRITTEN ANNUAL GOALS PAGE D

Section	Explanation	Example
Goal Number	Each goal is assigned a number, starting with one.	1, 2, 3, ...
Goal Area	State the goal area.	Reading, Communication, Mobility, etc.
Iowa Core	State the Iowa Core Content Standard and grade level benchmark related to this goal. If there is none – state “none”.	Choose appropriate Iowa Core Content Standard from drop down menu.
District Standard and Benchmark	State the district standard and benchmark related to this goal. If there is no district standard or benchmark directly related to the goal, an extended benchmark should be used. These should be written out rather than using a code or numerical designation.	<u>Standard:</u> To demonstrate competency in reading. <u>Benchmark:</u> Understand that letters can represent different sound and sounds can be represented by more than one letter or groups of letters. <u>Extended Benchmark:</u> Identifies symbols (e.g. letters/graphics/Braille/objects).
Current Academic Achievement and Functional Performance (CAAFP)	<p>For each goal area:</p> <ul style="list-style-type: none"> • Describe what the student can and can't do related to the specific goal area including: <ul style="list-style-type: none"> √ current skill performance that guides instruction √ current evaluation results √ relevant district-wide assessment data • Describe performance in comparison to general education peers (and standards) • Provide a specific description of how the student applies and generalizes the goal related skills s/he has acquired to a variety of situations or settings • Provide information detailed enough to make progress decisions • For students 13 and older provide information specific to how student functioning in the goal area relates to postsecondary expectations. 	<p>Zoey can compute basic addition and subtraction problems without regrouping; however, she is unable to consistently perform addition and subtraction computations requiring regrouping. Zoey displays an overall lack of number sense when making mental math calculations and using estimation. This lack of number sense affects her math problem solving skills both in school and in real life situations at home and in the community. Zoey scored at the 7th percentile rank (Iowa) on the Total Math portion of the ITBS. Typical 3rd grade peers compute 21 digits correctly in 4 minutes on a mixed math computation probe.</p> <p>Toby's behavior does not meet standards defined by school policy (no peer aggression). He yells at, pushes, and hits other students when something angers him. When an adult intervenes and offers choices, Toby is able to follow prompts. At the current time, Toby needs to be supervised throughout the school day. Toby continues to need a positive behavior plan; see the attached crisis cycle worksheet for details on de-escalation procedures. Toby's inability to deal with anger in appropriate ways interferes with adult and peer interactions both in school and at home. This behavior also interferes with his ability to fully benefit from core instruction and gain necessary academic skills. Typical peers exhibit 0 aggressive acts per day requiring intervention from school personnel.</p>

PHASE 2 WELL-WRITTEN ANNUAL GOALS PAGE D

Section	Explanation	Example
Baseline	<p>This is the student's current performance on the indicator that will be used to measure progress toward the goal. It must be observable, measurable, and specific. It must contain a number. It should be directly linked to the evaluation procedures. (The baseline should be measured in the same way the evaluation procedures indicate the goal progress will be measured.) The baseline should also match peer comparison information stated in the CAAFP.</p>	<p>Zoey computes 8 digits correctly in 4 minutes on a 3rd grade mixed math probe.</p> <p>Toby averages 5 aggressive acts per school day. Aggressive acts include yelling, pushing, or making other physically aggressive contact with a peer.</p> <p>Jamal reads 70 words correctly per minute in 4th grade reading material.</p>
Goal	<p>Statement of expected outcomes for the student from one year's instruction. Goals correspond to the PLAAFP/CAAFP. Goals should be ambitious (represent high expectations). Goals should reference the general curriculum, so progress toward expectations of the general curriculum can be assessed. For secondary students, each goal should be practical and relevant to the student's age and remaining years in school. The goal includes the time frame of the goal period (indicated by an ending date), the conditions (when and how the student will perform), behavior (what the student will do), and criterion (the acceptable level of performance).</p> <ul style="list-style-type: none"> • For students age 13 and over, indicate if this goal is related to post-secondary expectations in living, learning, and/or working (can be only one or more than one expectation). • At least one goal or service/activity must be linked to each area of living, learning, and working unless it is clearly stated on page B that transition assessments do not indicate needs in this area. 	<p>By February 1, 2007, when given one minute to read a passage from 4th grade level material (conditions), Jamal will read out loud (behavior) at a rate of 95 words with at least 95% accuracy (criterion).</p> <p>By October 15, 2006, Toby will exhibit 0 aggressive acts per week for four consecutive weeks.</p> <p>In 36 instructional weeks, Sanjay will score 80% or better on a written retell rubric (see attached rubric) for four consecutive weeks.</p> <p><input type="checkbox"/> Living <input checked="" type="checkbox"/> Learning <input checked="" type="checkbox"/> Working</p>
Evaluation Procedures	<p>Indicate how and how often progress will be measured. Progress toward a goal is monitored frequently (i.e., 1 time per week), and repeatedly (i.e., using similar measurement strategies each week). A decision-making rule must be included. Remember--copies of graphs and data summary sheets should be included in the student's permanent special education record.</p>	<p>Jamal will read orally from a 4th grade level reading probe once weekly. Teacher will calculate wpm read correctly and will graph data weekly. The four-point decision rule will be used to analyze data.</p>

PHASE 2 WELL-WRITTEN ANNUAL GOALS PAGE D

Section	Explanation	Example
Position(s) Responsible for Services	Indicate the name and the position of the person(s) responsible for delivering instruction that addresses the goal and for monitoring progress toward the goal. If different positions are responsible, write the task and the position. Individual's names will not print on the final IEP.	Special Education Teacher General Education Teacher SLP Occupational Therapist
Major Milestones or Short-Term Objectives	Major milestones or short-term objectives are required for students who take the Iowa Alternate Assessment. These should be aligned to alternate achievement standards.	Short-Term Objective: By November 8, 2006, Kayla will use her communication board to correctly answer 2 out of 4 "yes" or "no" questions related to a story she is shown.
Progress Report	<p>An eligible individual's parents must be regularly informed* of (1) their student's progress toward the annual goals; and (2) the extent to which that progress is sufficient to enable the eligible individual to achieve the goals by the end of the year. If the method chosen is updated goal pages, complete this section by circling the number that best describes the progress and updating the progress monitoring graph. Provide a copy of these pages to parents. If another method is chosen, a copy must be maintained in the student's special education records.</p> <p>* "Regularly informed" = at least as often as parents are informed of their nondisabled student's progress</p>	<p>11/07/05 1 2 3 4 5</p> <p>1= This goal has been met. 2= Progress has been made toward the goal. It appears that the goal will be met by the time the IEP is reviewed. 3= Progress has been made toward the goal but the goal may not be met by the time the IEP is reviewed. 4= Progress is not sufficient to meet this goal by the time the IEP is reviewed. Instructional strategies will be changed. 5= Your child did not work on this goal during this reporting period (provide an explanation to the parents).</p>

PHASE 3 DESCRIBE SPECIAL EDUCATION SERVICES PAGE F

Section	Explanation	Example
Indication of services, activities, and supports	<ul style="list-style-type: none"> As a team, determine those services, activities, and supports needed for the student to meet goals and receive FAPE. Indicate "yes" or "no" for each of the 11 options. Every IEP written by a special education teacher must include specially-designed instruction 	<input checked="" type="radio"/> Y <input type="radio"/> N Specially designed instruction <input checked="" type="radio"/> Y <input type="radio"/> N Supplementary aids and services <input checked="" type="radio"/> Y <input type="radio"/> N Supports for school personnel <input checked="" type="radio"/> Y <input type="radio"/> N Support or related services
Describe each service, activity, or support	Any option indicated "yes" in the previous section must be described. Label the box with the type(s) of service, activity, or support being provided.	<u>Specially Designed Instruction:</u> Jason will receive math instruction through co-teaching in his math class.
Provider(s) and when the service, activity, or support will occur.	<ul style="list-style-type: none"> Include a starting date for each service, activity, and/or support. Write the name and position(s) of the people providing the service, activity, or support. For all services (instructional, support, and related services), indicate the amount of time (in minutes) and how frequently (days per week or month) the service will be provided. For activities and supports that are not provided on a regular basis, describe in terms of when they are to be provided (e.g., particular setting or condition, date or event, time of day). 	November 10, 2009 Special Education teacher in collaboration with General Education math teacher √ 50 minutes daily during math class "During Science and Social Studies unit tests"
Setting	<ul style="list-style-type: none"> Mark the setting(s) where the service, activity, or support will be provided by writing the specific amount of time (in minutes) for that setting. A general education setting is a class that is open to all students, one in which students are not placed based on disability. Education through community experiences is not considered special education setting (removal) if the time is spent with people without disabilities. Education in a workshop or training facility where the majority of people have disabilities is considered to be a special education setting. 	___50___ General education ___0___ Special education ___0___ Community Per ___√___ Day ___ Week ___ Month

PHASE 3 DESCRIBE SPECIAL EDUCATION SERVICES PAGE G

Section	Explanation	Example
Extended School Year	Indicate "Yes" or "No" to indicate if extended school year services are needed. If "Yes," write the goal area(s) that require ESY and indicate that the services are described on the attached ESY Program Description page(s). See the program manual for guidance in making this decision.	[✓] Yes [] No Reading (See attached ESY Program Description page for specific information regarding these services.)
Transportation	Indicate "Yes" or "No" to indicate if specialized transportation services are required. If "yes," check the appropriate choice(s) to describe the service and be sure to include transportation as a related service on Page F.	[✓] Yes [] No [✓] Special route [] Attendant services [✓] Specially equipped vehicle [] Other
Physical Education	Indicate if the student will be receiving general, modified, or specially-designed physical education by checking the appropriate box. If modified PE, write the description below. Specially-designed PE services require a goal, and these services must be described on Page F of the IEP.	[] General [] Modified [✓] Specially designed (Note: the need is reflected on Page B, a goal is written on Page D or E, and the service is described on Page F.)
District-Wide Assessments	Indicate if the student will be participating in district-wide assessments without modifications or accommodations, with modification or accommodations, or through the state alternate assessment by checking the appropriate box. Describe any modifications or accommodations below. If the student will be participating in the state alternate assessment, the team must indicate why the student cannot participate in the general assessment(s) <i>and</i> why the alternate assessment is appropriate for the student.	[] Without modifications or accommodations [] With modifications or accommodations [✓] Through the state alternate assessment (Note: the special education teacher will follow the procedures outlined in the State of Iowa Alternate Assessment Educators Guide.)

PHASE 4 ADDITIONAL CONSIDERATIONS PAGE G

Questions	Explanation	Examples
Will this individual receive all special education services in general education environments?	Answer “yes” when all services are in the general education setting (e.g., collaborative services, team teaching, etc.). Answer “no” if any services are in a special education classroom or setting. Explain why the student needs to receive these services in this setting.	Bill requires instruction that is individualized to his skill level in reading and writing. Same grade peers no longer receive instruction on these skills as part of the general education curriculum. Michael needs structured break opportunities with minimal distractions after he completes tasks. These opportunities are better provided in a quiet setting.
Will this individual participate in nonacademic activities with nondisabled peers and have the same opportunity to participate in extracurricular activities as nondisabled peers?	This really asks <u>two</u> questions. First, will the student participate in nonacademic activities such as recess and lunch? Second, does the student have the same opportunities to participate in extra curricular activities as nondisabled peers? If the answer to either question is “no”, circle “no” and explain why on the lines below. Keep in mind that current case law indicates students with disabilities need to have the same access to extra curricular activities as nondisabled peers.	Joelle cannot eat lunch with peers because she may become distracted and aspirate on her food. She has the same opportunities as peers to participate in extra curricular activities. Dillon will eat lunch in a small group setting with adult supervision, because data indicates he demonstrates increased physical outbursts in the cafeteria setting. He has the same opportunities to participate in extra curricular activities.
Will this individual attend the school he or she would attend if nondisabled?	Answer “no” if a student attends an integrated school but not his/her neighborhood school or typical attendance center. Explain why on the lines provided. Answer “yes” if the student is open enrolled.	Sydney’s parents requested that she attend school in the XX district where she will be part of a classroom with peers who have similar disabilities and are developing similar skills. Karl needs a small group instructional setting to provide him with immediate behavioral feedback, intensive social skill instruction, and an opportunity to generalize and practice new skills in a variety of formats. The behavior disorders program offered at XX school matches his instructional needs.
Will this individual attend a special school?	If the student will attend a special school, mark “yes”. Complete and attach the special school form. The team from the student’s sending district/building should complete the special school form with the receiving team when the decision is first made to change placement.	

TRANSITION THROUGHOUT THE IEP

Component	Explanation	How to do it / Examples
Preparation for the Meeting	<ul style="list-style-type: none"> • Notify any potential adult service providers of the meeting after obtaining parent consent. • Prepare the student. • Prepare the parents. • Review the student's strengths, needs, interests, and preferences. • Collect assessment data using age appropriate transition assessments. (See Iowa Model for Transition) www.transitionassessment.northcentralrrc.org 	Prepare the student: <ul style="list-style-type: none"> • Describe the meeting. • Have the student collect information prior to the meeting. • Have the student invite participants. • Identify and practice ways for the student to participate in the meeting. • Teach self-determination skills. • Collect assessment data through surveys, interviews, and review of records. Contact your primary contact or TC Consultant with questions.
Transfer of Rights	<ul style="list-style-type: none"> • Beginning at least 1 year before the student turns 18, notify the student and parents that rights will transfer. • On the 18th birthday, notify parents and students that rights have transferred. 	<ul style="list-style-type: none"> • Document date on cover page. Place a copy of notification in the student's file. • If rights do not transfer, document reason. • See Transfer of Rights Brochure from AEA.
Strengths, Interests and Preferences	<ul style="list-style-type: none"> • This component sets the context of IEP discussions and transition planning. • Include the student's strengths, preferences, and interests that are relevant to educational planning and future goals. • All three areas must be addressed. (Strengths, Interests, and Preferences) 	<u>Strengths:</u> <ul style="list-style-type: none"> • good at soccer • has good sense of humor • good at maintaining friendships <u>Interests:</u> <ul style="list-style-type: none"> • is interested in plants and flowers • is interested in fixing cars <u>Preferences:</u> <ul style="list-style-type: none"> • prefers to work alone • prefers outdoor activities • prefers reading over television
Transition Assessments	<ul style="list-style-type: none"> • Must be age appropriate • Conducted prior to each IEP meeting • Each area must be assessed (living, learning and working). • Sources for each must be listed. • Results and implications must be summarized for each area of living, learning, and working. 	Only list the sources from which you actually acquired information for each area of living, learning, and working. Transition assessments completed and utilized in the development of the IEP include the following: interviews with Paul, his parents, and teachers, reviews of DWA data, and progress monitoring data collected during the 2008-09 school year. Living: Paul acquires and attains skills in the areas related to living at the same rate as his peers. Assessments do not indicate a need for services in this area. Learning: Paul has significant difficulty learning new academic skills. His study skills are not at the

		<p>same level as peers. He will need a great deal of assistance to pursue his goal of attending a four year college.</p> <p>Working: Paul's work habits and interpersonal skills are commensurate with peers, but his skills in areas like reading and writing interfere with his ability to do many jobs he is interested in. He needs to explore more jobs and advocate for his own accommodations.</p>
Effect of the Disability	<ul style="list-style-type: none"> Describe the effect of the individual's disability on the pursuit of their post-school expectations, as well as involvement and progress in the general curriculum. Include the functional implications of the student's skills. 	<p>John's disability affects his acquisition of reading skills at the same rate as same-grade peers. This impacts his progress in his content area classes where reading is required to learn new information. John plans to attend college and study to be a teacher. He may need accommodations due to his reading skills while he is in college. His reading level may impact his choice of grade level and content to teach.</p>
Post secondary expectations for living, learning, and working	<ul style="list-style-type: none"> Include statements addressing all three areas: living, learning, and working. Statements must reflect outcomes rather than process. For each area be sure to check the appropriate Y or N box. 	<p>Crystal will live in a supported living situation with assistance with budgeting and finance. She will continue to participate in adult learning opportunities provided through local community education. (Areas like cooking and recreational hobbies.) Crystal will be employed in the community in a food service job with support from a job coach until she is independent.</p>

TRANSITION THROUGHOUT THE IEP

Component	Explanation	How to do it / Examples
<p>Course of study</p>	<ul style="list-style-type: none"> • Define coursework and activities in which the student will participate to achieve outcomes identified in the vision statement. Include <u>projected date of graduation and description of graduation requirements</u>. • If an updated detailed course of study is appropriate, attach and include as part of the IEP. 	<p>Brody plans to graduate on schedule with peers in Spring 2009. At this time, Brody has obtained 28 of the 46 credits required for graduation. His courses will include a blend of core courses and vocational experiences. Brody needs to maintain a 2.5 GPA and complete college prerequisites to obtain admission to a post-secondary program in auto mechanics. Junior year, linkages will be made for job shadowing/work experiences in auto mechanics.</p> <p>Jamie will obtain a high school diploma with his class. He will receive resource support in organizational skills, including work completion. He will take electives available to all students (personal development, industrial tech., and computer skills) to develop interests and abilities for future work. He currently has 32 of 46 required credits.</p>
<p>Annual Measurable Goals</p>	<ul style="list-style-type: none"> • Current academic achievement and functional performance is described and goals are prioritized and linked to transition needs. • Each goal is considered and identified in terms of linkages to post-secondary expectations for living, learning, and working. • Each goal must be linked to living, learning, or working. It may be linked to more than one. 	<p><u>Current functioning</u>: Adam researched a variety of careers using the Occupational Outlook Handbook. He can verbally describe what he likes about the careers he studied, and indicate his preferences. Adam demonstrates and describes job seeking and job keeping skills in the school environment, but he has no experience exploring careers in the community setting and had little experience practicing basic job-seeking and job-keeping skill in generalized settings. Students at Anywhere High School who explore work sites in the community typically score satisfactory or above on all job-seeking and job-keeping skills on the Work Experience Employer Rating Scale (WEERS).</p> <p><u>Goal</u>: In one year, Adam will demonstrate job-seeking and job-keeping skills necessary to receive a satisfactory rating on 100% of items on the WEERS for at least 2 consecutive weeks from 4/6 employers at a community-based work site.</p> <p>___ Living ___ Learning <u>✓</u> Working</p>

TRANSITION THROUGHOUT THE IEP

Section	Explanation	Example
<p>Services</p>	<ul style="list-style-type: none"> Services should be designed based on the long-term outcomes desired by the student and family. These could include specially designed instruction, community experiences, linkages, and development of work and other post-high school living objectives. 	<p><u>Instruction and Community</u>: Two hours of specially designed vocational instruction are provided daily in a special education classroom and two hours of vocational training are provided daily in a work site (120 min/day SE, 120 min/day community).</p> <p><u>Community and Development of work</u>: The special education teacher oversees a community-based vocational placement two periods per day (120 min/day community).</p> <p><u>Specially Designed Instruction</u>: Adam will receive reading instruction on decoding skills 60 min/day in the special education classroom.</p>

Student Demographic Sheet: This sheet is used to communicate changes in student data to AEA 11 Regional Office Staff.



STUDENT DEMOGRAPHICS

Last Name:		First Name:	
Birthdate:	Sex:	Grade:	Ethnicity:
Parent Name:		Parent Type: <i>Student lives with: yes () no ()</i>	
Address: City, State: Zip:		Phone: (H) (Work/Cell) E-mail:	
Parent Name:		Parent Type: <i>Student lives with: yes () no ()</i>	
Address: City, State: Zip:		Phone: (H) (Work/Cell) E-mail:	
Resident District:		Resident Building:	
Attending District:		Attending Building:	
Domicile District:		Domicile Building:	
Basis of Enrollment:		Program Model or Level of Service:	
SDO:		Goal Areas:	
LRE:	Category of Need:	Served Status:	EC Code:
Gen. Ed. Teacher (Initial only):		Support Service Provider(s):	
Special Ed. Teacher(s):		Case Coordinator:	
Roster Change Date:		Roster Change Code:	
Start Date:		Annual Review Date: 3 year Date:	
Exit Date:		Exit Code:	

Codes

Early Childhood Setting Codes: Ages 3 through 5

Code	Definition
A1	The child attends a regular early childhood program for at least 80% of the time .*
A2	The child attends a regular early childhood program for 40% to 79% of the time .*
A3	The child attends a regular early childhood program for less than 40% of the time .*
B1	The child DOES NOT attend a regular early childhood program. Special education services are provided within a <i>special education class with less than 50% non-disabled children</i> .
B2	The child DOES NOT attend a regular early childhood program. Special education services are provided within a <i>separate school</i> (e.g., an Iowa School for the Deaf Day Program).
B3	The child DOES NOT attend a regular early childhood program. Special education services are provided within a <i>residential facility</i> (e.g., Iowa Braille School residential placement, all educational services provided on the IBS campus with no non-disabled peers)
B4	The child DOES NOT attend a regular early childhood program. Special education services are provided within the child's <i>home/residence</i> .
B5	The child DOES NOT attend a regular early childhood program. Special education services are provided within a <i>service provider location</i> (therapy room in a school building, clinic, etc.)

* "Time" means the total time the child spends in educational settings (preschool; therapy room; home, if educational services are provided there; etc.)

Disability	
Code	Description
AT	Autism Spectrum
BD	Behaviorally disordered
CM	Communication disability
DB	Deaf-blindness
DF	Deafness
EI	Entitled individual
HI	Hearing impairment
HJ	Head injury
LD	Learning disability
MD	Mental disability
OH	Other health impairment
OI	Orthopedic impairment
PD	Physical disability
SL	Speech language
SP	Severely disabled
VI	Visual impairment including blindness

Basis for Enrollment	
Code	Description
DE	Dual enrollment
FC	Living in foster home
GR	Group home
IP	Directed by IEP
JS	Junior/senior rule
LR	Lives with relative
OE	Open enrollment
PC	Placed by court
PI	Private competent instruction
PO	In district due to Parent Option
RD	District resident
RI	Resides in Regent's institution
RP	Residential placement
ST	Shared time
WG	Whole grade sharing

Served Status	
Code	Description
B	Both State and Federal Count Eligible
F	Federal count eligible
N	Not applicable
S	State count eligible

Part B Roster Changes	
Code	Description
CAD	Change in attending district
CPI	Competent private instruction with an IEP
CRI	Change in Roster Information
CRD	Change in resident district

Part B Roster Changes, continued	
MAK	Moved Residence to another AEA – Known to be continuing
MGS	Met goal, still served in special education
PDS	Service is discontinued at parent request, student still active

Part B Final Exit	
Code	Description
CPN	Competent private instruction, no IEP
DEC	Deceased
DRO	Dropped out
GCP	Graduated with Certificate - Completed IEP
GRD	Graduated, regular diploma
MSK	Moved Residence – Another State, Known to be continuing
RMA	Reached maximum age
RRC	Return to regular education, completed IEP
RRT	Return to regular education – IEP Terminated
UNK	Unknown

Support Services	
AP	Adapted physical education consultation
AR	Autism resource
AS	Audiometry
AT	Assistive technology or devices
AU	Audiology
CO	Consultation
DI	Deaf/hard of hearing instruction
GC	Counseling
HH	Hospital or homebound instruction
HL	Health
HV	Home Intervention (LRE Monitoring)
IH	Itinerant Hearing*
IN	Interpreter
IV	Itinerant Vision
OH	Other Health
OM	Orientation/mobility
OT	Occupational therapy
PP	Paraprofessional: Behavioral or Health Services provided
PT	Physical therapy
PY	Psychological
SS	Speech language
ST	Specialty resources
SW	Social work
TA	Teacher Associate: Academic services provided
TM	AEA Team Representation (psychologist, social worker, consultant)
TN	Transition
TR	Specialized transportation
VN	Vision instruction
WE	Work experience Coordination/Instruction

Parental Rights Summary

This is a **very brief summary** of your rights. In order to assure that you have a full explanation of your rights, you are to receive a copy of the **Procedural Safeguards Manual for Parents (Parental Rights in Special Education)** at least one time each school year. In addition, you must be given a copy (1) upon an initial referral or your request for evaluation for your child, (2) upon your filing of a first due process complaint or first state complaint in that school year; and (3) whenever a decision is made to take a disciplinary action that constitutes a change of your child's placement. You also get a copy of the procedural safeguards whenever you ask for them. In addition to your rights, the **Procedural Safeguards Manual for Parents** lists sources of assistance for parents and outlines special safeguards related to student discipline.

This summary is provided for your convenience and **is not** a replacement for the **Procedural Safeguards Manual for Parents**. If there are any differences between the **Procedural Safeguards Manual for Parents** and this summary, the information and guidance in the **Procedural Safeguards Manual for Parents** is followed.

For each child with a disability who requires special education, your public school district and area education agency have the responsibility to provide a free and appropriate public education in the least restrictive environment.

Free and appropriate public education (FAPE). *Free* means that special education services are provided at no cost to the parents. You may be charged the same general education fees that are charged to other parents, such as fees for extracurricular activities or lab fees. *Appropriate* means that your child's program must provide the right kind of services based on your child's needs and enough services for your child to receive educational benefit. *Educational benefit* is a broad term that includes access to and progress in the general education curriculum used for all children, access to the same activities and settings as children who do not have disabilities and progress towards the individual goals set specifically for your child.

Least restrictive environment (LRE). Your child will attend classes, participate in nonacademic and extracurricular activities and receive services with children who are not disabled to the maximum extent appropriate.

Parental rights. FAPE and LRE for your child are protected by rights you have as parents. These parental rights are referred to as procedural safeguards and they assure that you have an important role in planning and decision-making for your child. These safeguards include:

Participation rights:

- (1) You have the right to provide information for your child's evaluation,
- (2) You have the right to be a member of any group that makes decisions regarding the educational placement of your child, and
- (3) You have the right to participate in meetings related to your child's identification, evaluation, educational placement and the provision of FAPE.

Notice rights:

- (1) You have the right to be informed in a timely manner of meetings related to your child's identification, evaluation, educational placement and the provision of FAPE,
- (2) You have the right to be informed of any proposed changes in your child's identification, evaluation, educational placement and the provision of FAPE,
- (3) You have the right to be informed of any refusal by the school or AEA to make changes that you have requested in your child's identification, evaluation, educational placement, and the provision of FAPE, and
- (4) You have the right to receive notices in a manner and language you can understand.

Consent rights:

- (1) You have the right to give or withhold your consent to an evaluation to determine if your child is eligible for special education services,
- (2) You have the right to give or withhold your consent to reevaluations of your child, and
- (3) You have the right to give or withhold your consent for your child's initial placement in special education.
- (4) You have the right to withdraw your consent for continued special education and related services for your child. This must be done in writing.

Your consent to an evaluation may be withdrawn before the evaluation is completed. Your consent to an initial placement may be withdrawn before the placement is made.

Records rights:

- (1) You have the right to review educational records,
- (2) You have the right to ask that records be changed if you believe the records are incorrect or misleading, and
- (3) In many circumstances, you have the right to give your consent before records are disclosed to other agencies or persons. Disclosing records without your consent is allowed by the law only under certain circumstances, such as to another school to which the student is transferring, to respond to a health or safety emergency, to auditors, or to comply with a court order or subpoena.

Independent educational evaluation right: You have the right to request an independent evaluation at no cost to you if you disagree with the evaluation done by the school and AEA.

Dispute resolution rights:

You have the right to *request mediation* of a dispute. Iowa's AEAs have trained resolution facilitators who can assist with dispute resolution for any issue. The Iowa Department of Education can also provide a mediator for special education issues. Special education mediations are also referred to as Preappeal Conferences. Mediation meetings provide the opportunity for parents and the school or area education agency to resolve disagreements cooperatively with the assistance of a trained mediator.

You have the right to *request a due process hearing* if a disagreement about your child's identification, evaluation, educational placement or provision of FAPE is not successfully resolved in other ways. Requests must be made within two years of the action by the school or AEA that led to the disagreement. If you request a hearing, you will be offered a resolution session by your child's school or AEA and you will be offered a preappeal conference by the Iowa Department of Education. Like mediation meetings, a resolution session or a preappeal conference provides the opportunity for you and the school district or area education agency to resolve the disagreement. A due process hearing is presided over by an impartial administrative law judge who hears both sides, reviews evidence, and makes a ruling. Due process hearing decisions can be appealed to the courts.

In most circumstances, once you have requested a preappeal or due process hearing, your child's placement cannot be changed without your agreement until the dispute is resolved. There is an exception to this "stay put" rule when a code of conduct violation involves a weapon, drugs or serious bodily injury. In that case, the student's placement may be changed in the interim for safety reasons.

You have the right to *file a state complaint* if you believe that a special education law, rule or regulation has been violated. Complaints must be made within one year of the alleged violation. Complaints are investigated by the Iowa Department of Education and a written report is issued.

Reimbursement rights: Under certain circumstances, parents have the right to be reimbursed for expenses such as attorney's fees or private school expenses. See the *Procedural Safeguards Manual for Parents* for more information.

Transfer of rights. Parental rights transfer to a student with a disability at the age of majority unless the parent(s) or someone else takes the necessary legal steps to become the young adult's legal guardian. In Iowa, a student reaches the age of majority either on the student's 18th birthday, the date of marriage of a student under age 18, or when a student under age 18 is incarcerated in an adult or juvenile, state or local correctional institution.

Remember, this is a *very brief summary* of your rights. See the *Procedural Safeguards Manual for Parents* for complete and detailed information.

WEIGHTED ENROLLMENT: Assigning Level of Service

- **Level I:** A student's IEP must document that the student's level of service requires the services of special education instructional staff or supplemental aids and services and has a total of 1-5 points.
- **Level II:** A student's IEP must document that the student's level of service requires the services of special education instructional staff or supplemental aids and services and has a total of 6-9 points.
- **Level III:** A student's IEP must document that the student's level of service requires the services of special education instructional staff or supplemental aids and services and has a total of 10-12 points.

NOTE: This instrument is not designed to be used for assigning weights to preschool aged children.

There will be unique circumstances, e.g., medically fragile, hearing interpreters, Braille instruction in which weightings should be assigned using other processes.

	Curriculum Modifications * Use Score of Highest Rated Area (Reference IEP Pgs. B, D, E, F, G and/or BIP)	Specially Designed Instruction related to all goal areas regardless of setting (Reference IEP Pg. F)	Support for School Personnel and LRE Efforts * Use Score of Highest Rated Area (Reference IEP Pg. F and/or BIP)	Supplementary Aids & Services/Specialized Transportation * Use Score of Highest Rated Area (Reference IEP Pgs. F, G)
Zero Points	Student is functioning in the general curriculum at a level similar to peers. or Student is functioning in the general curriculum 1-2 years below peers	Student requires no specially designed instruction. or Specially designed instruction regardless of setting that is designed by and/or delivered by special education personnel for less than 55% of the school day. Could include teaching, co-teaching, and collaborative instruction.	Joint planning typical for that provided for all students. or Special education teachers engage in joint planning for 1 hour or less per month with general education teachers and/or para-educators to support involvement and progress in the general education curriculum, special education teachers conduct joint planning with 1 general education teacher or para-educator over the course of each month.	Technology use, classroom assistance, and transportation are similar to peers. or <u>Assistive Technology</u> Requires limited individualization and/or training for the student, or <u>Instructional Associates</u> Additional individual support from an adult is needed for 55% or less of the school day, or <u>Transportation</u> Transportation needs require a special route.
One Point	Student requires limited modifications to the general curriculum that allow for social skills instruction, or student has academic or behavioral goals in 1 or 2 goal areas.	Specially designed instruction regardless of setting that is designed by and/or delivered by special education personnel for 56% to 85% of the school day. Could include teaching, co-teaching, and collaborative instruction.	Special education teachers engage in joint planning for 1 to 2 hours per month with general education teachers and/or para-educators to support involvement and progress in the general education curriculum, special education teachers conduct joint planning with 2 to 3 general education teachers and/or para-educators over the course of each month.	<u>Assistive Technology</u> Requires extensive individualization and/or training for the student, or <u>Instructional Associates</u> Additional individual support from an adult is needed for 56% to 85% of the school day, or <u>Transportation</u> Transportation needs require attendant services, or the purchase of special equipment for safe transportation on a vehicle.
Two Points	Student is functioning in the general curriculum 3 or more years below peers, or student requires significant modifications to the general curriculum to allow for extensive social skills instruction, or student has academic or behavioral goals in 3 or more goal areas.	Specially designed instruction regardless of setting that is designed by and/or delivered by special education personnel for 86% to 100% of the school day. Could include teaching, co-teaching, and collaborative instruction.	Special education teachers engage in joint planning for more than 2 hours per month with general education teachers and/or para-educators to support involvement and progress in the general education curriculum, special education teachers conduct joint planning with more than 3 general education teachers and/or para-educators over the course of each month.	<u>Assistive Technology</u> Is "high end" individualized and requires extensive training for the student. Significant maintenance and/or upgrades for continued effective use are anticipated, or <u>Instructional Associates</u> Additional individual support from an adult is needed for 86% to 100% of the school day, or <u>Transportation</u> a. Requires specialized route and attendant services, or b. Requires specialized vehicle (e.g. with lift device)
Three Points	Curriculum that reflects extended standards and benchmarks is required for meaningful instruction. Alternate assessment is used to measure progress.	Specially designed instruction regardless of setting that is designed by and/or delivered by special education personnel for 86% to 100% of the school day. Could include teaching, co-teaching, and collaborative instruction.	Special education teachers engage in joint planning for more than 2 hours per month with general education teachers and/or para-educators to support involvement and progress in the general education curriculum, special education teachers conduct joint planning with more than 3 general education teachers and/or para-educators over the course of each month.	<u>Assistive Technology</u> Is "high end" individualized and requires extensive training for the student. Significant maintenance and/or upgrades for continued effective use are anticipated, or <u>Instructional Associates</u> Additional individual support from an adult is needed for 86% to 100% of the school day, or <u>Transportation</u> a. Requires specialized route and attendant services, or b. Requires specialized vehicle (e.g. with lift device)



Individualized Education Program

DATE: ____/____/____ TYPE: Initial Review Reevaluation Amendment Interim

STUDENT: _____ M F
Last (legal) First (no nicknames) M.I.

Birthdate: ____/____/____ Grade: _____ Teacher/Service Provider: _____

Resident District: _____ Building: _____

Attending District: _____ Building: _____

Attending Area Education Agency: _____ Attending Building Phone: _____

<input type="checkbox"/> Parent	Name: _____	Home Phone: _____
<input type="checkbox"/> Foster Parent	Address: _____	Work/Cell Ph: _____
<input type="checkbox"/> Guardian	_____	E-mail: _____
<input type="checkbox"/> Surrogate	_____	_____
<input type="checkbox"/> Student	_____	_____
<input type="checkbox"/> Parent	Name: _____	Home Phone: _____
<input type="checkbox"/> Foster Parent	Address: _____	Work/Cell Ph: _____
<input type="checkbox"/> Guardian	_____	E-mail: _____
<input type="checkbox"/> Surrogate	_____	_____
<input type="checkbox"/> Student	_____	_____

Duration of this IEP: From ____/____/____ to ____/____/____ Reevaluation is due: ____/____/____

Procedural safeguards were reviewed by: _____ Method: _____

Rights will transfer at age 18: ____/____/____ Notification: Student ____/____/____ Parent: ____/____/____

Persons Present at Meeting/Position or Relationship to Student

_____	Parent	_____	Student
_____	Parent	_____	_____
_____	LEA Rep/Designee	_____	_____
_____	Gen Ed Tchr	_____	_____
_____	Sp Ed Tchr	_____	_____

Listing indicates presence at the meeting, not approval or acceptance of the IEP

Outside written input: Name/Agency: _____ Date: ____/____/____

Present Levels of Academic Achievement and Functional Performance

Strengths, interests and preferences of this individual _____

Parents' concerns regarding their child's education _____

The IEP team must consider the following when developing this IEP.

Behavior (in the case of a student whose behavior impedes his or her learning or that of others, consider the use of positive behavioral interventions, supports and other strategies, to address that behavior)

- Yes, behavior is a concern and will be addressed in this IEP.
- Yes, behavior is a concern and will be addressed in the attached Functional Behavioral Assessment and Behavior Intervention Plan.
- No, behavior is not a concern.

Communication and language, especially if the student is deaf or hard of hearing.

- Yes, communication and language are a concern and will be addressed in this IEP.
- Yes, communication and language are a concern and will be addressed in the attached Communication Plan for Deaf and Hard of Hearing.
- No, communication and language are not a concern.

Health Needs (intervention, procedures, or services required in order to access education)

- Yes, health is a concern and will be addressed in this IEP.
- Yes, health is a concern and will be addressed in the health plan in the student health records.
- No, health is not a concern.

Limited English proficiency (Consider the language needs related to the IEP)

- Yes, limited English is a concern and will be addressed in this IEP.
- No, limited English is not a concern

Braille instruction needs if this student has a visual impairment

- Yes, Braille is needed and will be addressed in this IEP.
- No, Braille is not needed.

Assistive technology (services, software and devices needed to access the general education curriculum)

- Yes, assistive technology is needed and will be addressed in this IEP.
- No, assistive tech. is not needed.

This student is **NIMAS eligible**: Yes No

Other information essential for the development of this IEP _____

Describe the effect of this individual's disability on involvement and progress in the general education curriculum and the functional implications of the student's skills. For a preschool child, describe the effect of this individual's disability on involvement in appropriate activities.

Present Levels of Academic Achievement and Functional Performance

Strengths, interests and preferences of this individual _____

Parents' concerns regarding their child's education _____

The IEP team must consider the following when developing this IEP.

Behavior (in the case of a student whose behavior impedes his or her learning or that of others, consider the use of positive behavioral interventions, supports and other strategies, to address that behavior)

- Yes, behavior is a concern and will be addressed in this IEP.
- Yes, behavior is a concern and will be addressed in the attached Functional Behavioral Assessment and Behavior Intervention Plan.
- No, behavior is not a concern.

Communication and language, especially if the student is deaf or hard of hearing.

- Yes, communication and language are a concern and will be addressed in this IEP.
- Yes, communication and language are a concern and will be addressed in the attached Communication Plan for Deaf and Hard of Hearing.
- No, communication and language are not a concern.

Health Needs (intervention, procedures, or services required in order to access education)

- Yes, health is a concern and will be addressed in this IEP.
- Yes, health is a concern and will be addressed in the Health Plan as a part of the student's health records.
- No, health is not a concern.

Limited English proficiency (Consider the language needs related to the IEP)

- Yes, limited English is a concern and will be addressed in this IEP.
- No, limited English is not a concern

Braille instruction needs if this student has a visual impairment

- Yes, Braille is needed and will be addressed in this IEP.
- No, Braille is not needed.

Assistive technology (services, software and devices needed to access the general education curriculum)

- Yes, assistive technology is needed and will be addressed in this IEP.
- No, assistive tech. is not needed.

This student is **NIMAS eligible**: Yes No

Transition assessments and other information essential for the development of this IEP (address living, learning & working):

Living: Information sources: _____

Living: Results: _____

Learning: Information sources: _____

Learning: Results: _____

Working: Information sources: _____

Working: Results: _____

Other information essential for the development of this IEP _____

Describe the effect of this individual's disability on involvement and progress in the general education curriculum and the functional implications of the student's skills. _____

Based on the transition assessments, describe the post secondary expectations for living, learning, and working.

Post-secondary expectation for living: _____

Yes No Is living an area of need that will be addressed with goals, services or activities in this IEP?

Post-secondary expectation for learning: _____

Yes No Is learning an area of need that will be addressed with goals, services or activities in this IEP?

Post-secondary expectation for working: _____

Yes No Is working an area of need that will be addressed with goals, services or activities in this IEP?

Course of study.

What requirements does this student need to meet to graduate? _____

What is this student's current status with regard to these requirements?: _____

Target graduation date (mo/yr): ____ / ____

Courses and activities needed to pursue the post secondary expectations and graduate by the target graduation date.

Goal #: _____

State of Iowa Core Content Standard and Grade Level Benchmark(s) upon which this goal is based: _____

District Standard and Grade Level Benchmark(s) upon which this goal is based: _____

Current Academic Achievement and Functional Performance (Results of the initial or most recent evaluation and results on district-wide assessments relevant to this goal; performance in comparison to general education peers and standards).

Baseline (Describe individual's current performance in measurable terms using the same measurement as measurable annual goal and progress monitoring procedures). _____

Measurable Annual Goal: conditions (when and how the individual will perform); **behavior** (what the individual will do); and **criterion** (acceptable level of performance). For students 14 years and older, indicate if this goal is related to post-secondary expectations of: (check all that apply to this goal) living learning working

Progress Monitoring procedures (State how progress toward meeting this goal will be measured, how often progress will be measured, and the decision making rule that will be used in considering instructional changes). _____

Position(s) responsible for services _____

See attached graph

Major Milestones or Short Term Objectives/Dates Expected <small>(Required for students assessed against alternate achievement standards)</small>	Comments/Progress Notes/Dates Achieved

Goal #	Progress Report																
1 = This goal has been met.																	
2 = Progress has been made towards the goal. It appears that the goal will be met by the time the IEP is reviewed.																	
3 = Progress has been made towards the goal but the goal may not be met by the time the IEP is reviewed.																	
4 = Progress is not sufficient to meet this goal by the time the IEP is reviewed. Instructional strategies will be changed.																	
5 = Your child did not work on this goal during this reporting period (provide an explanation to the parents).																	
____/____/____	1	2	3	4	5	____/____/____	1	2	3	4	5	____/____/____	1	2	3	4	5
____/____/____	1	2	3	4	5	____/____/____	1	2	3	4	5	____/____/____	1	2	3	4	5
____/____/____	1	2	3	4	5	____/____/____	1	2	3	4	5	____/____/____	1	2	3	4	5

Special Education Services

Indicate the special education and related services, supplementary aids and services, based upon peer-reviewed research to the extent practicable, that will be provided in order for this individual: 1) to advance appropriately toward attaining the annual goals 2) to be involved and progress in the general curriculum; 3) to be educated and participate with other individuals with disabilities and nondisabled individuals. 4) to participate in extracurricular and other nonacademic activities; and 5) by age 14, to pursue the course of study and post-high school outcomes (living, learning & working);

- | | | |
|--|---|--|
| <input type="checkbox"/> Y <input type="checkbox"/> N Accommodations | <input type="checkbox"/> Y <input type="checkbox"/> N Linkages/interagency responsibilities | <input type="checkbox"/> Y <input type="checkbox"/> N Supplementary aids and services |
| <input type="checkbox"/> Y <input type="checkbox"/> N Assistive technology | <input type="checkbox"/> Y <input type="checkbox"/> N Program modifications | <input type="checkbox"/> Y <input type="checkbox"/> N Supports for school personnel |
| <input type="checkbox"/> Y <input type="checkbox"/> N Community experiences | <input type="checkbox"/> Y <input type="checkbox"/> N Specially designed instruction | <input type="checkbox"/> Y <input type="checkbox"/> N Support or related services |
| <input type="checkbox"/> Y <input type="checkbox"/> N Development of work and other post-high school living objectives | | <input type="checkbox"/> Y <input type="checkbox"/> N Specialized Accessible Formats (Braille, large print, audio, digital text) |

Describe each service, activity and support indicated above:	Provider(s) & when the service, activity or support will occur	Minutes in Setting
	Beginning Date: Provider(s): Time & frequency/when provided:	____ General education ____ Special education ____ Community per Day ____ Week ____ Month
	Beginning Date: Provider(s): Time & frequency/when provided:	____ General education ____ Special education ____ Community per Day ____ Week ____ Month
	Beginning Date: Provider(s): Time & frequency/when provided:	____ General education ____ Special education ____ Community per Day ____ Week ____ Month
	Beginning Date: Provider(s): Time & frequency/when provided:	____ General education ____ Special education ____ Community per Day ____ Week ____ Month
	Beginning Date: Provider(s): Time & frequency/when provided:	____ General education ____ Special education ____ Community per Day ____ Week ____ Month
	Beginning Date: Provider(s): Time & frequency/when provided:	____ General education ____ Special education ____ Community per Day ____ Week ____ Month
Total minutes per month removed from general education:		
LRE: Removal from GE % plus Time in GE % = 100%		

Special Education Services, continued

Yes No **Are extended school year (ESY) services required?** If yes, specify the goals that require ESY services and describe the services. _____

Yes No **Are specialized transportation services required that are related to the disability?** If yes, describe.

Special route (outside normal attendance area or transportation not typically provided based on distance from school)

Attendant services Specially equipped vehicle Other _____

Physical Education: General Modified — describe below Specially designed — requires goal(s)

Indicate how this individual will participate in district-wide assessments

Without accommodations

With accommodations

Describe accommodations necessary to measure academic achievement and functional performance _____

Through the state alternate assessment. Why can't the individual participate in the general assessment? _____

Why is this alternate assessment appropriate for this student? _____

District-wide assessment is not given at this grade level. The student is incarcerated in an adult correctional facility.

Additional Considerations

Address the following questions.

Yes No Will this individual receive all special education services in general education environments?

If no, explain: _____

Yes No Will this individual participate in nonacademic activities with nondisabled peers **and** have the same opportunity to participate in extracurricular activities as nondisabled peers?

If no, explain: _____

Yes No Will this individual attend the school he or she would attend if nondisabled?

If no, explain: _____

Yes No Will this individual attend a special school? If yes, attach responses to the special school questions.

Progress reports

Parents: You will be informed of your child's IEP progress _____ times per year. You will receive:

An IEP report with report cards and progress reports

Updated copies of the IEP goal pages

G

Copies: School and AEA

July 1, 2008



Disability Suspected

STUDENT: _____ Birthdate: _____
Last (legal) First (not nickname) M.I.

Gender: Male Female Grade: _____ Teacher/Service Provider: _____

Resident District: _____ Building: _____

Attending District: _____ Building: _____

Are there data to suggest:

(Check all that apply.)

- the child is affected by a health or physical condition or a functional limitation that adversely affects educational performance (e.g., a progressive condition, a condition strongly associated with adverse effects on developmental progress or educational performance).
- there has been a significant status change due to a health or medical condition, injury, etc. (e.g., a traumatic brain injury).
- there is an obvious and immediate need for service that may exceed the capacity of general education to provide (e.g., progressive loss of sight requiring Braille and orientation and mobility instruction).
- the child's performance is below standards or expectations, is unique compared to others, and not explained by more plausible factors (i.e., attendance or cultural factors). Summarize:
 - the status of the child's hearing and vision:
 - the information which suggests the child's educational performance falls persistently below state approved standards or typical developmental or behavioral expectations for age and grade level:
 - how the child's performance is unique when compared to others in the same setting:
 - other plausible explanations that may account for the child's lack of educational performance, (i.e., lack of appropriate instruction, language other than English, lack of prior knowledge, cultural expectations, attendance or mobility):

Documentation of Decision:

Participants involved in decision:

Name	Position	Name	Position

Is disability suspected? Yes No Date: _____

Note:

- Written parental consent for a full and individual initial evaluation must be sought when disability is suspected.
- Prior Written Notice of a refusal to conduct an evaluation must be provided when parents have requested an evaluation and disability is not suspected.
- This form must be retained as a part of the student's records.



Educational Evaluation Report

Eligibility Meeting: _____

Name: _____ Male Female
Last (legal) First (no nicknames) M.I.

Birthdate: _____ Grade: Drop down menu

Resident District: _____ Building: _____

Attending District: _____ Building: _____

Attending Area Education Agency: _____ Attending Building Phone: (____) ____ - ____

Parent Name: _____ Home Phone: (____) ____ - ____
 Foster Parent Address: _____ Work/Cell Ph: (____) ____ - ____
 Guardian City/State: _____ E-mail: _____@_____
 Surrogate Zip: _____
 Student

Parent Name: _____ Home Phone: (____) ____ - ____
 Foster Parent Address: _____ Work/Cell Ph: (____) ____ - ____
 Guardian City/State: _____ E-mail: _____@_____
 Surrogate Zip: _____
 Student

Individuals completing this evaluation:

Name	Position	Name	Position

Contact person for this report: _____
Phone: (____) ____ - ____
E-mail: _____@_____

The purpose of the evaluation is to determine the educational interventions that are required for the individual to be successful, and whether the individual is eligible for special education services. An individual is eligible for special education services when there is 1) a disability which is determined by assessing rate of educational progress and discrepancy from expectations, and 2) a need for special education services. This evaluation is based on educationally relevant information gathered through reviews (monitoring data, work samples, school records, and reports from other sources), interviews (teacher, parent, and child), observations, and tests or other assessments.

Individual Information: Educationally relevant information that is important for decision making.

What are the individual's strengths?

What are the area(s) of concern?

Yes No Are these concerns observed across different times and in different settings?
If yes, explain:

Yes No Are the concerns primarily caused by any of the following?

- Limited English proficiency.
- A lack of appropriate instruction in reading, including the essential components of reading instruction.
- A lack of instruction in math.

If yes, explain:

Describe any vision, hearing, or health concerns that affect the individual's educational performance or participation in age appropriate activities?

Describe any ecological factors (e.g., race, ethnicity, culture, language, or life circumstances) that affect the individual's educational performance in the areas of concern.

Note: One purpose of an evaluation is to identify necessary supports and assistance. If limited English proficiency, lack of instruction, vision, hearing, health concerns, or ecological factors affect educational performance, these factors must be addressed in the Educational Needs section.

Reminder:

For a preschool child, ages three through five, **you must** provide a brief summary of student performance and progress in each of the following areas on the **Early Childhood Outcomes (ECO) Summary page**.

- Positive social-emotional skills.
- Acquisition and use of knowledge & skills
- Appropriate behaviors to meet needs

Educational Progress: Progress means performance over time. In addressing progress, the team considers data that have been collected about the individual's performance over time in relation to the interventions that have been provided.

For each area of concern, summarize the strategies implemented as part of the intervention process and the individual's rate of progress compared to expected rate of progress. Based on the analysis of intervention data, identify those strategies that produced the greatest positive impact.

Yes No Is the individual's rate of progress significantly less than expected, or does the individual maintain expected progress only with greater resources than general education alone can provide in any areas of concern?

If yes, identify the area(s):

Educational Discrepancy: Discrepancy is the difference between the individual's level of performance and the expected level of performance for individuals of the same age, grade, or other established standards. Multiple sources of data for each area of concern are described below.

Area of Concern: _____

Date: _____

Data Source(s): _____

Individual Performance:

Expected Performance:

Discrepancy:

Yes No Is the discrepancy from expected performance significant?

Comments:

Area of Concern: _____

Date: _____

Data Source(s): _____

Individual Performance:

Expected Performance:

Discrepancy:

Yes No Is the discrepancy from expected performance significant?

Comments:

Area of Concern: _____

Date: _____

Data Source(s): _____

Individual Performance:

Expected Performance:

Discrepancy:

Yes No Is the discrepancy from expected performance significant?

Comments:

Area of Concern: _____

Date: _____

Data Source(s): _____

Individual Performance:

Expected Performance:

Discrepancy:

Yes No Is the discrepancy from expected performance significant?

Comments:

Educational Needs: Educational needs are the services, activities and supports, and the accommodations and modifications required in order for the individual to receive an appropriate education.

Summarize the individual's needs in the area of instruction. *(Based on intervention and assessment results, describe the instruction that will enable learning.)*

Summarize the individual's needs in the area of curriculum. *(Based on intervention and assessment results, what should the content of instruction include? Include the specific skills and concepts the individual needs to learn.)*

Summarize the individual's needs in the area of environment. *(Based on intervention and assessment results, describe the adaptations to procedures, schedules, routines, behavioral expectations, room or seating arrangements, or materials that are needed.)*

Summarize any additional learning supports needed to provide educational benefit for the individual. *(Based on intervention and assessment results, what family supports or involvement; community partnerships; transition supports; supports for engagement or motivation; or supplements to instruction such as assistive technology, modifications, or accommodations are needed?)*

Yes No **Do the educational needs of the individual require services and support that extend beyond what typical general education resources alone can provide?**

If yes, identify the areas:

Considerations for eligibility decision making

The following questions are addressed at a meeting with parents and professionals to consider eligibility for special education:

- **Does the individual have a disability?** *(A disability is a significant skills deficit, a health or physical condition, a functional limitation, or a pattern of behavior that adversely affects the individual's rate of progress.)*
- **Are special education resources required to meet the individual's educational needs?**
- **Is the individual eligible for special education services?**

Copies to: Parent, School, AEA



Prior Written Notice of a Proposed or Refused Action

Date: _____

Student Name:
Parent(s):

Birthdate:

You have protections under the procedural safeguards of the Individuals With Disabilities Education Act. These rights are explained in the Iowa *Procedural Safeguards Manual for Parents*. The manual contains information of whom to contact to obtain assistance in understanding your rights as well as a description of the state complaint procedures and preappeal procedures. A copy of this manual was provided on _____

We encourage open communication between parents and the school regarding your child's educational needs and parental rights. You may obtain an additional copy of the *Procedural Safeguards Manual for Parents* by contacting your building principal or area education agency.

You have a right to receive written notice prior to when the district or area education agency proposes or refuses to initiate or change the identification, evaluation, or placement of your child or the provision of a free appropriate public education. This notice must be provided within a reasonable time of any proposed action.

Purpose of this notice: An action is being proposed An action is being refused

1. A description of the action proposed or refused.
2. An explanation of why the school proposes or refuses to take the action.
3. A description of any other options the school considered and the reasons why those options were rejected.
4. A description of each evaluation procedure, test, record, or report the school used as a basis for the proposed or refused action.
5. A description of any other factors that are relevant to the school's proposal or refusal.
6. Yes No Is the proposed action a change in identification, evaluation, or placement?
If "yes," when will this proposed action be implemented? _____
(Date)

If you have questions, please contact the school principal or district/AEA designee:

(Name)	(Position)	(Phone)	(E-mail)
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Performance Domains

Domains	Description
Academic	Grade level achievement of standards related to listening comprehension, oral expression, basic reading skills (reading comprehension & fluency), math calculation, mathematical problem solving, and written expression.
Behavior	Awareness of self, identification and expression of emotions, self-regulation, and interaction with others.
Physical	Gross motor skills, fine motor skills and mobility for learning, living and work.
Health	General condition of the body or mind, especially in terms of the presence or absence of illness, injury or impairments.
Hearing/Vision	The ability to perceive sound and/or the ability to see.
Adaptive Behavior	Everyday living skills (e.g., dressing, eating, toileting), or school functioning skills (e.g., meeting timelines, organization of materials) that a child learns in the process of adapting to his/her surroundings.
Communication	Receptive and expressive language (form, content or use). This includes, but is not limited to, language (social communication), vocabulary, speech sound production, voice (nasality), or fluency.