

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Identification
Number

030410M052

SSID

6699709708

Eligible (AUT)Student
Last

AZOULAY

First

CHAIM (DAV

MI

Y

Date of Birth:

04-MAR-2010

Section A: Meeting Information

Pertinent Dates	Type of Meeting
Date of Initial IEP Team Meeting	<input type="radio"/> Initial
Date of Present Meeting	<input type="radio"/> Amendment of IEP dated
Annual Review to be conducted by	<input type="radio"/> Annual Review
Next Three Year Review will be conducted by	<input type="radio"/> Three Year Review
Three Year Review or Evaluation was conducted on	<input checked="" type="radio"/> Other
Transition to Kindergarten to be conducted by	<input type="radio"/> Early Start Transition
	<input type="radio"/> Expulsion Analysis
	<input type="radio"/> Individual Transition Plan
	Re-evaluation
Location of Meeting	District Name
Village Glen - remote	Los Angeles Unified School Dis

Section B: Student Information

Date of Birth	04-MAR-2010	Age	11	Grade	6
Gender	<input checked="" type="radio"/> Male <input type="radio"/> Female	Limited English Proficient Student	<input type="radio"/> Yes <input checked="" type="radio"/> No	Ethnic Code	White
Location of the Psych Folder	SUPPORT UNIT NOF	Student has no Psych Folder	<input type="checkbox"/>		
Location of the Cum Folder	MADISON MS	Student has no Cum Folder	<input type="checkbox"/>		
Home Language	Hebrew	Student Language	English	Alternate Mode of Communication	
Home Address of Student	6548 BELLAIRE AVENUE				
City	NORTH HOLLYV CA	ZIP Code	91606		
Home Telephone	818-471-9146	Daytime Telephone		Emergency Telephone	
School of Attendance	Village Glen Sch (Vall	Location Code	NP0329		
School of Residence	MADISON MS	Location Code	8230		
Name of Parent/Guardian	Avshalom Azoulay	Telephone			
Address	same				
City		CA	ZIP Code		
Surogate Parent		Telephone			
Attends CURRENT SCHOOL as a result of one of the following	Nonpublic School Placement ▼				
Is the student living in a Family Foster Home (FFH)?	<input checked="" type="radio"/> No <input type="radio"/> Yes	FFH#			
Is FFH Provider related to student?	<input type="radio"/> No <input type="radio"/> Yes	Relationship			
Licensed Children's Institution	<input checked="" type="radio"/> No <input type="radio"/> Yes	LCI Name			
		LCI#			
Out of the home placement made by	<input type="radio"/> Regional Center	<input type="radio"/> Department of Mental Health	<input type="radio"/> Department of Children's Services		
	<input type="radio"/> Superior Court	<input type="radio"/> Other			
Child's family living within LAUSD's boundaries?	<input type="radio"/> No <input checked="" type="radio"/> Yes				
If the student is 18 years old or older or is an emancipated minor, does he/she have educational decision-making rights?	<input type="radio"/> No <input type="radio"/> Yes				

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Section C: Language Acquisition

Language Classification:

Start Date:

Withdrawal by Parent Request:

☐ Yes ☐ No

Reclassification Date:

ELPAC Performance Level and Performance Descriptor:

Test Date:

Alternate ELPAC Performance Level and Performance Descriptor:

Test Date:

Section D: Goal Achievement from Current IEP

		Achieved		
Goal for: (example - Reading)		Yes	No	If No, explain the reason the goal/objective was not achieved
1	Reading	<input type="radio"/>	<input type="radio"/>	All goals not yet due
Category	Reading ▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	curriculum change needed
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	not yet due
2	Writing	<input type="radio"/>	<input type="radio"/>	
Category	Writing ▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	curriculum change needed
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	not yet due
3	Math	<input type="radio"/>	<input type="radio"/>	not yet due
Category	Math ▼			
	Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	curriculum change needed
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	not yet due
4	Social Skills	<input type="radio"/>	<input type="radio"/>	
Category	Social Functioning ▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	curriculum change needed
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	not yet due
5	Pre-Vocational	<input type="radio"/>	<input type="radio"/>	
Category	Vocational Education ▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	curriculum change needed
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	not yet due
6	Behavioral Support	<input type="radio"/>	<input type="radio"/>	
Category	Behavior Intervention ▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	curriculum change needed
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	not yet due
7	Language 1	<input type="radio"/>	<input checked="" type="radio"/>	at 70%, though data limited by limited responses
Category	Language – Expressive ▼			
	Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
8	Language 2	<input type="radio"/>	<input checked="" type="radio"/>	currently at 60%
Category	Language ▼			
	Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	currently at 60%
9		<input type="radio"/>	<input type="radio"/>	
Category	▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	
10		<input type="radio"/>	<input type="radio"/>	
Category	▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	

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Section E: Present Level of Performance

Performance Area:

General Ability (cognitive function, language function, motor skills)

Category:

General Ability

Assessment/Monitoring Process
Used:

Psychoeducational Assessment

State/District Assessment Results:

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

STRENGTHS: In oral language, David is classified as an Initially Fluent English Proficient (IFEP) student. Hebrew is the only language spoken in the home. In motor skills, per examiner observation, David appears to have age appropriate motor skills to maneuver around a general education campus without difficulties. 6th grade teacher shares that David can walk, run, skip and hop and can hit/bounce a ball while walking. No concerns were reported regarding his gross motor functioning. The examiner observed that David used a functional and appropriate pencil grasp and wrote using his right hand. 6th grade teacher reports that David is able to hold his pencil correctly and use fine motor and eye-hand coordination to pick up small items.

(CONT'D BELOW)

Performance Area:

General Ability CONT'D (cognitive function, language function, motor skills)

Category:

General Ability

Assessment/Monitoring Process
Used:

Psychoeducational Assessment

State/District Assessment Results:

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

(cont'd from above)

NEEDS: David appears to function in the well below average range of cognitive ability for a child his age. David demonstrated below average and well below average skills across all areas of cognitive processing. He was unable to participate in many assessment tasks due to his lack of understanding and ability to comply with assessment tasks. It should be noted that results of this assessment are not consistent with those of his previous assessment in 2018 in which he was determined to exhibit average cognitive ability. In oral language, per psychologist observation, he does not present with age appropriate basic interpersonal communication skills and cognitive and academic language proficiency skills in English. He does not use age appropriate vocabulary and is not able to adequately express his ideas verbally. His language skills appear inadequate for access to his educational setting. Standardized testing revealed well below average oral language skills. 5th grade and 6th grade teachers reports that David is unable to express his ideas verbally, cannot explain ideas and concepts, and does not retrieve words or respond to questions. David does not speak in complete sentences and does not use practical knowledge and judgement in social situations. David rarely communicated on the computer during distance learning and does not show much ability/desire to communicate in the classroom setting. David avoids simple PE activities. His ability to integrate visual and fine motor skills appears to be significantly less developed than his same-aged peers. Teacher reports that David is not able to cut along lines with scissors, cannot copy work accurately and has difficulty correctly shaping letters when writing.

IMPACT OF DISABILITY: David's Autism impairs his ability to read, write, communicate, and do math which impacts his progress and involvement in the general education curriculum.

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First**Y**
MIDate of Birth **04-MAR-2010**Meeting Date **29-NOV-2021**

Section E: Present Level of Performance

Performance Area:

Social Emotional

Category:

Social Emotional

Assessment/Monitoring Process
Used:

Psychoeducational Assessment

State/District Assessment Results:

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

STRENGTHS: In social-emotional functioning, David's 5th grade teacher reports that when engaged and in a calm state, David is redirectable and will listen to simple one step directions. He is close with his brother and at times will help make each other feel better if they are unhappy. When engaged and calm he is able to hold his attention for 2-3 minutes on a task or directive. Parent did not provide any information to the examiner as of the date of this report.

NEEDS: 5th grade teacher reports that David did not participate in the Virtual Classroom and was very isolated and non-communicative with his classmates. He is very hard to understand at times, he will often not respond when spoken to and may just look at you or into the distance when you are speaking to him. He does not play with classmates, have conversations with classmates, or understand his classmates when they are trying to talk or play with him. When he is very upset, he will begin to say curse words and at times may hit or break things. 6th grade teacher reports that David has difficulty participating in class and difficulty beginning or completing classwork. He has the ability to write his name but will frequently tear up his work or scribble all over the paper and his desk. His behaviors prevent him from focusing in class and participating. David frequently eats inedible objects (paint, paper, dirt, tire pieces, erasers) and eats food from the trash or off the ground. He frequently touches his genitals over and under his pants and will pull down his underwear and pants to masturbate during school. He often takes peer's school supplies and puts them in his mouth or will try to steal other students' lunches and will drink from their water bottles.

(CONT'D BELOW)

Performance Area:

Social Emotional CONT'D

Category:

Social Emotional

Assessment/Monitoring Process
Used:

Psychoeducational Assessment

State/District Assessment Results:

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

NEEDS (CONT'D): On the BASC-3, raters were consistent in indicating that David does evidence significant social, emotional and/or behavioral needs which adversely impact educational access and performance at this time. These difficulties are occurring in most areas of social-emotional functioning. On the ASRS, both teachers were consistent in their responses reflecting that David is exhibiting behaviors consistent with Autism in multiple environments within the school setting (5th and 6th grade classrooms). These behaviors are occurring in all areas assessed by the ASRS, with no areas rated in the average range.

IMPACT OF DISABILITY: David's Autism impairs his ability to communicate, socialize, and work independently which impacts his progress and involvement in the general education curriculum.

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Section E: Present Level of Performance

Performance Area:

Adaptive Behavior

Category:

Adaptive Behaviors

Assessment/Monitoring Process
Used:

Psychoeducational Assessment

State/District Assessment Results:

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

STRENGTHS: None in the school setting. Parent did not provide any information the examiner as of the date of this report.

NEEDS: In self-care skills, based on results of the ABAS-3, David is exhibiting significant deficits in all areas of his adaptive functioning in the school setting. All areas of this measure were rated to be in the well below average range by his current teacher.

IMPACT OF DISABILITY: David's Autism impairs his ability to perform general activities of daily living and function independently within the school community which impacts his progress and involvement in the general education curriculum.

Performance Area:

Category:

Assessment/Monitoring Process
Used:

State/District Assessment Results:

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

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Section E: Present Level of Performance

Performance Area:

Health

Category:

Health

Assessment/Monitoring Process
Used:

Review of school and health records

State/District Assessment Results:

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

Copied from previous IEP:

NPS schools are closed at this time due to the COVID-19 pandemic. Health information is gathered from a review of health records and conference with parent/guardian. Vision and hearing information are the most current documented in the health record.

Health Summary: Health Assessment/information was completed 5-6-2021 for the Triennial IEP with health information obtained from review of electronic school health records and conference with father. David (Chaim) is an 11 year, 2 month old young male student at Village Glen, NPS School, in the 5th grade with an eligibility of Autism. David does not take daily medication. David does not have any allergies noted to food, medication, or environment. He has no history of surgeries, accidents, injury, or hospitalization. There have been no restrictions with any physical activities.

Father states that David and his twin brother have regressed since the Pandemic and home schooling. Student has been out of school for over a year and a half according to father and student exhibits high risk behaviors such as breaking the Televisions and I pads. Aggression towards parents. Student receives assistance 4 hours a day from Regional Center. Student has expressive language delays.

STRENGTH: Student is physically healthy. He passed the LAUSD vision screening on 3-23-2018 and passed the LAUSD hearing screening last 3-22-2018.. David is pending a vision and hearing screen by private physician Father has no concerns with students vision or hearing at this time. He is independent in all activities of daily living. .

AREAS OF NEED: Health is not an area of need at this time..

IMPACT OF DISABILITY: Physical health does not impact his access, participation and progress in the educational program.

Accommodation/Modification: None related to health.

Health Assessment completed by Ginger Barickman R.N 5-6-2021

Performance Area:

Category:

Assessment/Monitoring Process
Used:

State/District Assessment Results:

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

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Section E: Present Level of Performance

Performance Area:

Language

Category:

Language – Pragmatics

Assessment/Monitoring Process
Used:

Informal assessment, observation, staff input

State/District Assessment Results:

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

David is an 11-year, 8-month-old 6th grader at Village Glen Non-Public School. He participated in a Language and Speech (LAS) assessment as part of his three-year review to determine present level of performance and appropriate level of support.

Areas of Strength: David makes comments and asks questions that are focused on his topic of interest. He may just say things aloud to the listener but does not take turns and reciprocate appropriate exchange of information. Current SLP reports that David is a highly creative individual who has demonstrated growth in responding accurately to 'who' and 'what' questions especially given pictured cues to supplement text and related questions.

Areas of Need: David may just say things aloud to the listener but does not take turns and reciprocate appropriate exchange of information. During story retell tasks, he had difficulty answering concrete wh- questions about the story and telling parts of the story even with moderate prompts. Current SLP reports that David demonstrates difficulty in responding accurately to 'which,' 'when,' 'where' and 'why' questions. David sometimes does not respond to questions and tends to respond yes to yes/no questions. He has little social interaction with peers.

Impact of Disability: David's language difficulties secondary to his eligibility of autism may impact his ability to participate in oral language activities and socially interact with peers.

Joy Lee, M.A., CCC-SLP
Speech and Language Pathologist
LAUSD NPS Assessor

Performance Area:

Category:

Assessment/Monitoring Process
Used:

State/District Assessment Results:

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

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Section E: Present Level of Performance

Performance Area: **Reading**Category: **Reading** ▼Assessment/Monitoring Process Used: **Informal/curriculum-based assessment, work samples, teacher observation**State/District Assessment Results: **N/A**

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

Strengths: When engaged, David shows that he can follow along with read alouds. He will actively listen and show interest by nodding along or expressing his like or dislike for the material read aloud. It was previously reported that David understand basic print features such as reading left to right and the top and bottom of the page. It was also reported the he is able to receptively identify common high frequency sight words.

Areas of Need: David has not been able to perform/access his reading curriculum due to excessive absences from the classroom. Based on when David does participate and information from previous teacher, David shows difficulty in concentration when dysregulated or uninterested in the reading. He struggles with vowel sounds and blending together multiple letter sounds to read simple words. He continues to struggle with expressively identifying lengthier high frequency sight words and requires visual support to identify many CVC words

Impact of Disability: Autism impairs David's ability to attend and attain skills/concepts in reading and language arts, which impacts his involvement and progress in the general education curriculum.

Performance Area: **Writing**Category: **Writing** ▼Assessment/Monitoring Process Used: **Informal/curriculum-based assessment, work samples, teacher observation**State/District Assessment Results: **N/A**

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

Strengths: David is able to use different modalities and writing instruments (e.g., pencil, marker, paintbrush, crayon) throughout the day. When provided with visual spacers (lined paper) he is able to print the letters of the alphabet in both lower and upper case, and can trace 4 to 5-word sentences, with 80% accuracy. David was also able to independently write his name.

Areas of Need: David is still not familiar with the correct punctuation needed for writing proper sentences. He is not yet able to write words independently without dictation by an adult, and he requires adult support and visuals to organize information to formulate writing that conveys information about a topic.

Impact of Disability: Autism impairs David's ability to attend and attain skills/concepts in language arts and writing, which impacts his involvement and progress in the general education curriculum.

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Section E: Present Level of Performance

Performance Area:

Math

Category:

Math

Assessment/Monitoring Process
Used:

Informal/curriculum-based assessment, work samples, teacher observation

State/District Assessment Results:

N/A

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

Strengths: David is able to count from 1 to 100 with moderate to maximum prompting. He is able to add and subtract single digit equations with values up to 10. He also has a basic understanding of time of day (e.g., calendar, schedule, etc.).

Areas of Need: David shows difficulty with solving addition and subtraction problems with values over 10. He also shows difficulty with understanding place values.

Impact of Disability: Autism impairs David's ability to attend and attain skills/concepts in math which impacts his involvement and progress in the general education curriculum.

Performance Area:

Social Skills

Category:

Social Functioning

Assessment/Monitoring Process
Used:

Teacher observation

State/District Assessment Results:

N/A

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

Strengths: David is a very kind and friendly young man and he is eager to have conversations with his fellow classmates about subjects of high interest (i.e., video games, and toys). When engaged and regulated, he shows kindness and respect towards his classmates and staff by greeting them, responding to them, and not interrupting when others are speaking/sharing.

Areas of Need: David will become irritated and sad when staff praises his twin brother or other students and not him and he will often respond with 'what about David?' or 'Are you mad at me?' David shows sadness and anger about missing out on class time while in the distance learning situation. After missing multiple days, when he returns to class, David will present as worried or nervous and may even cry at times because he is upset to have missed out on class time.

Impact of Disability: Autism impairs David's social skills, making it difficult for him to consistently interact appropriately with others, which impacts his involvement and progress in the general education curriculum.

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Section E: Present Level of Performance

Performance Area: **Pre-Vocational**Category: **Vocational Education** ▼Assessment/Monitoring Process Used: **Teacher Observation**

State/District Assessment Results:

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

Strengths: David shows the ability to follow one-step instructions (i.e. 'have a seat', 'quiet please'). When engaged and interested David will ask clarifying questions about what needs to be done in class. When an activity presents as too difficult, David will seek assistance from staff and will allow explicit assistance.

Areas of Need: David has had difficulty submitting written work samples, leaving all submissions as verbal responses in the classroom. He has also shown difficulty with following multi-step instruction when working on class assignments or independent work. Often times David will become frustrated when required to participate in class and will refuse by ignoring direction.

Impact of Disability: Autism impairs David's ability to complete vocational tasks with ease which impacts his involvement and progress in the general education curriculum.

Performance Area: **Behavioral Support**Category: **Behavior Intervention** ▼Assessment/Monitoring Process Used: **Teacher Observation**

State/District Assessment Results:

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

Strengths: When engaged and calm, David is able to pay attention in class for about 15 minutes. He will stay focused and ask 1-2 questions if interested and engage in the work. As previously reported, when David is in a positive state, he will seek assistance if he requires help.

Areas of Need: When David is dysregulated, he will pout and cry when uninterested in the work presented to the class. He will often times be seen walking around the room not paying attention and playing a handheld game. David will often ignore or disregard staff and peers when called on to return to his task or participate in class. Per parent report, David has not been sleeping well, and is not on a healthy sleep schedule. He has started to destroy property at the house, has become more dysregulated, and non-compliant to parent instruction.

Impact of Disability: Autism impairs David's ability to attend to and complete tasks which impacts his involvement and progress in the general education curriculum.

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Section F: Eligibility

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

health, academics, cognitive function, language function, motor skills, social emotional, adaptive behavior

For Initial IEP, interventions attempted prior to determining eligibility:

Eligible as a student with the disability of:

Code: **AUT** **Autism**☒ Not Applicable, ☐ Blind or ☐ Partially Sighted

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

Code: ☒ Not Applicable, ☐ Blind or ☐ Partially Sighted☐ Does not meet eligibility criteria for Special Education Services (Initial IEP).

or

☐ No Longer Eligible for Special Education Services (Review IEP).No Longer Eligible (Effective
Date):☐ This is a Final IEP, the student remains eligible for Special Education Services until the Effective Date below.

Final IEP Reason:

Final IEP Effective Date:

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

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

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Section G: Annual Goals and Objectives

Performance Area:

Language Pragmatics 1

Category:

Language – Pragmatic ▼

Annual Goal #:

1

David will remain engaged in one-on-one or small group discussions of another's choosing across 3+ conversational exchanges by contributing on-topic comments and/or questions in 70% of observed opportunities, given 1-2 visual or verbal prompts per conversation.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

David will remain engaged in one-on-one or small group discussions of another's choosing across 2+ conversational exchanges by contributing on-topic comments and/or questions in 50% of observed opportunities, given 3-4 visual or verbal prompts per conversation.

Incremental objective #2 related to the goal:

David will remain engaged in one-on-one or small group discussions of another's choosing across 3+ conversational exchanges by contributing on-topic comments and/or questions in 60% of observed opportunities, given 2-3 visual or verbal prompts per conversation.

Date to be achieved:

March ▼

2022 ▼

MO/YR

Date to be achieved:

July ▼

2022 ▼

MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR
EXCEEDED3 SUBSTANTIAL PROGRESS (50-99% of goal
met)

2 PARTIAL PROGRESS (1-49% of goal met)

1 NO PROGRESS

1st Reporting Period Date: <input type="text"/>	2nd Reporting Period Date: <input type="text"/>	3rd Reporting Period Date: <input type="text"/>	4th Reporting Period (Secondary Only) Date: <input type="text"/>	Goal Achievement
Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No
Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please explain: <input type="text"/>

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Y

Date of Birth 04-MAR-2010

Meeting Date 29-NOV-2021

Last

First

MI

Section G: Annual Goals and Objectives

Performance Area:

Behavioral Support

Category:

Behavior Intervention ▼

Annual Goal #:

8

Given visual support, and with 1-2 prompts from staff, David will begin his class work with a calm body (i.e., sitting at his desk, safe hands) for 10 minutes during a session with 80% accuracy over a 1-week period as measured by observation in the classroom setting.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

Given visual support, and with 2-3 prompts from staff, David will begin his class work with a calm body (i.e., sitting at his desk, safe hands) for 10 minutes during a session with 60% accuracy over a 1-week period as measured by observation in the classroom setting.

Incremental objective #2 related to the goal:

Given visual support, and with 2-3 prompts from staff, David will begin his class work with a calm body (i.e., sitting at his desk, safe hands) for 10 minutes during a session with 75% accuracy over a 1-week period as measured by observation in the classroom setting.

Date to be achieved:

March ▼

2022 ▼

MO/YR

Date to be achieved:

July ▼

2022 ▼

MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR EXCEEDED

3 SUBSTANTIAL PROGRESS (50-99% of goal met)

2 PARTIAL PROGRESS (1-49% of goal met)

1 NO PROGRESS

1st Reporting Period	2nd Reporting Period	3rd Reporting Period	4th Reporting Period (Secondary Only)	Goal Achievement
Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	
Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No
Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please explain: <input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student **AZOULAY****CHAIM (DAV****Y**Date of Birth **04-MAR-2010**Meeting Date **29-NOV-2021**

Last

First

MI

Section G: Annual Goals and Objectives

Performance Area:

Language Pragmatics2

Category:

Language – Pragmatic ▼

Annual Goal #:

2

David will answer age-appropriate 'WH' questions (e.g. where, when, why) related to a variety of speech and language activities in 80% of observed opportunities, given up to 2 visual or verbal prompts.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

David will answer age-appropriate 'WH' questions (e.g. where, when, why) related to a variety of speech and language activities in 60% of observed opportunities, given 3-4 visual or verbal prompts.

Incremental objective #2 related to the goal:

David will answer age-appropriate 'WH' questions (e.g. where, when, why) related to a variety of speech and language activities in 70% of observed opportunities, given 2-3 visual or verbal prompts.

Date to be achieved:

March ▼

2022 ▼

MO/YR

Date to be achieved:

July ▼

2022 ▼

MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR
EXCEEDED3 SUBSTANTIAL PROGRESS (50-99% of goal
met)

2 PARTIAL PROGRESS (1-49% of goal met)

1 NO PROGRESS

1st Reporting Period	2nd Reporting Period	3rd Reporting Period	4th Reporting Period (Secondary Only)	Goal Achievement
Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	
Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No
Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please explain: <input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student **AZOULAY****CHAIM (DAV****Y**Date of Birth **04-MAR-2010**Meeting Date **29-NOV-2021**

Last

First

MI

Section G: Annual Goals and Objectives

Performance Area:

Functional Reading

Category:

Reading

Annual Goal #:

3

David will be able to read a simple story and answer 5 reading comprehension questions (who, what, and where) with no more than 2 verbal prompts, with 80% accuracy, across two consecutive weeks, as measured by teacher observation and data collection.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

David will be able to read a simple story and answer 5 reading comprehension questions (who, what, and where) with no more than 4 verbal prompts, with 60% accuracy, across two consecutive weeks, as measured by teacher observation and data collection.

Incremental objective #2 related to the goal:

David will be able to read a simple story and answer 5 reading comprehension questions (who, what, and where) with no more than 3 verbal prompts, with 70% accuracy, across two consecutive weeks, as measured by teacher observation and data collection.

Date to be achieved:

March

2022

MO/YR

Date to be achieved:

July

2022

MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR
EXCEEDED3 SUBSTANTIAL PROGRESS (50-99% of goal
met)

2 PARTIAL PROGRESS (1-49% of goal met)

1 NO PROGRESS

1st Reporting Period	2nd Reporting Period	3rd Reporting Period	4th Reporting Period (Secondary Only)	Goal Achievement
Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	
Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No
Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please explain: <input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student AZOULAY

CHAIM (DAV

Y

Date of Birth 04-MAR-2010

Meeting Date 29-NOV-2021

Last

First

MI

Section G: Annual Goals and Objectives

Performance Area:

Functional Writing

Category:

Writing

Annual Goal #:

4

When dictated a sentence to write, David will use capitalization and correct punctuation at the end of the sentence with 80% accuracy in 4/5 trials.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

When dictated a sentence to write, David will use capitalization and correct punctuation at the end of the sentence with 60% accuracy in 2/4 trials.

Incremental objective #2 related to the goal:

When dictated a sentence to write, David will use capitalization and correct punctuation at the end of the sentence with 70% accuracy in 4/5 trials.

Date to be achieved:

March

2022

MO/YR

Date to be achieved:

July

2022

MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR
EXCEEDED3 SUBSTANTIAL PROGRESS (50-99% of goal
met)

2 PARTIAL PROGRESS (1-49% of goal met)

1 NO PROGRESS

1st Reporting Period	2nd Reporting Period	3rd Reporting Period	4th Reporting Period (Secondary Only)	Goal Achievement
Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	
Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No
Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please explain: <input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student **AZOULAY****CHAIM (DAV****Y**Date of Birth **04-MAR-2010**Meeting Date **29-NOV-2021**

Last

First

MI

Section G: Annual Goals and Objectives

Performance Area:

Functional Math

Category:

Math

Annual Goal #:

5

David will be able to accurately complete 10 single-digit subtraction problems, with no more than 2 verbal prompts, with 80% accuracy, across two consecutive weeks, as measured by teacher observation and data collection.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

David will be able to accurately complete 10 single-digit subtraction problems, with no more than 4 verbal prompts, with 60% accuracy, across two consecutive weeks, as measured by teacher observation and data collection.

Incremental objective #2 related to the goal:

David will be able to accurately complete 10 single-digit subtraction problems, with no more than 3 verbal prompts, with 70% accuracy, across two consecutive weeks, as measured by teacher observation and data collection.

Date to be achieved:

March

2022

MO/YR

Date to be achieved:

July

2022

MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR
EXCEEDED3 SUBSTANTIAL PROGRESS (50-99% of goal
met)

2 PARTIAL PROGRESS (1-49% of goal met)

1 NO PROGRESS

1st Reporting Period	2nd Reporting Period	3rd Reporting Period	4th Reporting Period (Secondary Only)	Goal Achievement
Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	
Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No
Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please explain: <input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student **AZOULAY****CHAIM (DAV****Y**Date of Birth **04-MAR-2010**Meeting Date **29-NOV-2021**

Last

First

MI

Section G: Annual Goals and Objectives

Performance Area:

Social Skills

Category:

Social Functioning

Annual Goal #:

6

With staff assistance David will express his feelings in appropriate ways by using appropriate language (e.g., I am feeling frustrated, I am feeling upset) he will do so with 2-3 prompts in 4 out of 5 opportunities in a school week.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

With staff assistance David will express his feelings in appropriate ways by using appropriate language (e.g., I am feeling frustrated, I am feeling upset) he will do so with 3-4 prompts in 2 out of 4 opportunities in a school week.

Incremental objective #2 related to the goal:

With staff assistance David will express his feelings in appropriate ways by using appropriate language (e.g., I am feeling frustrated, I am feeling upset) he will do so with 3-4 prompts in 4 out of 5 opportunities in a school week.

Date to be achieved:

March

2022

MO/YR

Date to be achieved:

July

2022

MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR EXCEEDED

3 SUBSTANTIAL PROGRESS (50-99% of goal met)

2 PARTIAL PROGRESS (1-49% of goal met)

1 NO PROGRESS

1st Reporting Period	2nd Reporting Period	3rd Reporting Period	4th Reporting Period (Secondary Only)	Goal Achievement
Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	
Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No
Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please explain: <input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student **AZOULAY****CHAIM (DAV****Y**Date of Birth **04-MAR-2010**Meeting Date **29-NOV-2021**

Last

First

MI

Section G: Annual Goals and Objectives

Performance Area:

Pre-Vocational

Category:

Vocational Education ▼

Annual Goal #:

7

With 2-3 prompts from staff for assistance, David will begin and complete a multi-step assignment with 75% accuracy in 4 out of 5 opportunities

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

With 3-4 prompts from staff for assistance, David will begin and complete a multi-step assignment with 50% accuracy in 4 out of 5 opportunities.

Incremental objective #2 related to the goal:

With 3-4 prompts from staff for assistance, David will begin and complete a multi-step assignment with 60% accuracy in 4 out of 5 opportunities.

Date to be achieved:

March ▼

2022 ▼

MO/YR

Date to be achieved:

July ▼

2022 ▼

MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR
EXCEEDED3 SUBSTANTIAL PROGRESS (50-99% of goal
met)

2 PARTIAL PROGRESS (1-49% of goal met)

1 NO PROGRESS

1st Reporting Period	2nd Reporting Period	3rd Reporting Period	4th Reporting Period (Secondary Only)	Goal Achievement
Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	
Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No
Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please explain: <input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

AZOULAY

Last

CHAIM (DAV

First

Y

MI

Date of Birth

04-MAR-2010

Meeting Date

29-NOV-2021

Section K: Participation in State and District-wide Assessments

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

Student will participate in California Alternate Assessment in English Language Arts and Math in grades 3-8 and 11 and Science in grades 5, 8, and once in high school.

CAA Subject

ELA/Math and Science

Designated Supports:

- Noise buffers (non-embedded resource)
- Test in a separate/smaller setting (non-embedded resource)
- Simplified test directions (non-embedded resource)
- Calculator (science only; four-function for grade 5, scientific for Grade 8 and high school) (non-embedded resource)

Accommodations:

- Calculator (math only, grades 6-8 and 11; non-embedded resource)

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student
Last
First
MIDate of
BirthMeeting
Date

Section N: Procedural Safeguards and Follow-up Actions



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



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



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

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

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

Specify the Individual Pages to be translated:

Special Requests:

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

Recoupment Consideration

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

THIS SPACE DELIBERATELY LEFT BLANK.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

AZOULAY

CHAIM (DAV

Y

Date of Birth

04-MAR-2010

Meeting Date

29-NOV-2021

Last

First

MI

Section Q: Parent Participation and Consent

Parent Participation

- ☒ Parent/Student (18-21) has participated in the IEP meeting.
- ☐ Parent/Student (18-21) indicated before the meeting that they would not be able to attend.
- ☐ Parent/Student (18-21) was notified 3 times of the meeting time and place. Parent/Student (18-21) did not respond to any of the meeting notifications and the meeting was held without the Parent/Student (18-21) present..
- ☐ Parent/Student (18-21) did not attend and gave permission to proceed without them if they did not attend.

Parent Notification

Method	Whom	When
Student	PZ	15-NOV-2021
Student	PZ	19-NOV-2021
Phone	NA	26-NOV-2021
Phone	NA	15-DEC-2021

I (PARENT) acknowledge that the IEP meeting was rescheduled to this date at my request. (Parent initials here ONLY if the PARENT requested that the IEP meeting be rescheduled.)

Parent/Student (18-21) Agreement to Components of the Proposed IEP

A Parent/Student (18-21) may agree to all or some of the components of a proposed IEP. The District will implement those portions of the IEP to which the parent/student (18-21) agrees so as to not delay providing instruction and services.

- ☐ Parent/Student (18-21) **AGREES** to all components of the IEP.
- ☐ Parent/Student (18-21) **AGREES** to all components of the proposed IEP **WITH THE SPECIFIC EXCEPTION(S)** stated below:
- ☐ Assessment Specify
- ☐ Eligibility Specify
- ☐ Instructional Setting Specify
- ☐ Services Specify

- ☐ The Parent/Student (18-21) **DOES NOT AGREE** with any of the components of the proposed IEP.

A Parent/Student (18-21) is not required to initiate any form of dispute resolution as to components of the proposed IEP to which the parent does not agree. If a parent/student (18-21) does wish to initiate a form of dispute resolution as to the components of the proposed IEP, the parent can find information on dispute resolution processes in the District's publication, *A Parent's Guide to Special Education Services (Including Procedural Rights and Safeguards)*.

Parent Concerns and Comments

Signature(s)

Date

- ☒ Parent ☐ Guardian ☐ Student age 18-21 years age 18-21 years ☐ Surrogate Parent ☐ Emancipated Minor ☐ Foster Parent

Did the school district facilitate parent involvement as a means of improving services and results for your child? ☐ Yes ☐ No ☒ No Response

☒ I certify that I have received a copy of the Parent Input Survey regarding the IEP process. I understand that my completion of the form is voluntary and can be done at anytime after the IEP meeting

Signature(s)

Date

16-DEC-2021

PARENT INPUT SURVEY

Would you please take a moment to complete the survey below.
The information you provide will help us improve the Individualized Education Program (IEP) process. Thank you in advance for your time and interest.

ALL INFORMATION IS CONFIDENTIAL

DIRECTIONS: After each statement, please place an X on the line that describes your experience with your child's IEP.

A. Regarding your child's current IEP:	Yes	No	Does Not Apply
1. I am satisfied with the IEP meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I feel that the IEP accurately reflects the decisions made at the IEP meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I received notice of the IEP meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I received "The IEP and You" handbook with the notice of the IEP meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. During the IEP process I received "A Parent's Guide to Special Education Services (Including Procedural Rights and Safeguards)" explaining my rights as a parent.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. The IEP meeting was held in an appropriate setting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I feel I was treated as an equal and important part of the IEP team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. The participants at the IEP meeting were prepared and informed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Placements for my child, including the general education setting, were discussed and decided upon.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Related services were discussed and decided upon, if relevant.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. If my child is 14 years old or older, an Individualized Transition Plan (ITP) was developed with my child's and my concerns in mind.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. At the end of the IEP meeting the decisions were summarized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. If I needed an oral interpretation of the IEP team meeting an interpreter was provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. The interpretation of the IEP team meeting enabled me to participate and make an informed decision regarding my child's IEP during the IEP meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. The interpreter stayed for the duration of the IEP team meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. If the interpreter left the IEP meeting before it was over, another staff member served as the interpreter and the interpretation was adequate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. I am aware that, if I am dissatisfied with the adequacy of the oral interpretation at the IEP team meeting, I can file a complaint with the Educational Equity Compliance Office at (213) 241-7682.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. If I needed a written translation of the IEP, translation services were offered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. I am aware that, if I do not receive a copy of the translated IEP, I can contact the site administrator or call the Division of Special Education at (213) 241-6701.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If any of the answers to items 13-16 or 18-19 was No, please discuss your concern(s) with the site administrator or call the Division of Special Education at (213) 241-6701.			
B. Regarding your child's previous IEP (if relevant):			
20. I am satisfied that my child received the services described on the previous IEP. (If your answer to this question is "No", please write concerns below.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Additional Comments			

Is there anything more you would like to ask us or tell us?
Please write below or call the Parent Resource Network at 1-800-933-8133.

Please fold along dotted lines with the address showing. Seal and mail. Postage is pre-paid.
Again, Thank you!



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 33798 LOS ANGELES CA 90051
POSTAGE WILL BE PAID BY ADDRESSEE

ATTN PARENT RESOURCE NETWORK
LOS ANGELES UNIFIED SCHOOL DISTRICT
PO BOX 613307
LOS ANGELES CA 90099-4093



PARENT INPUT SURVEY
English

POST

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Reconvened
Meeting DateStudent
Last
First
MIDate of Birth Meeting Date

Section R: Names and Signatures (Signatures on File)

Team Member	Print Name	Signature
Parent/Guardian	<input type="text" value="Avshalom Azoulay--participated ren"/>	<input type="text"/>
Parent/Guardian	<input type="text"/>	<input type="text"/>
Student Age 18 - 21 years	<input type="text"/>	<input type="text"/>
Student Under Age 18 years	<input type="text"/>	<input type="text"/>
Surrogate Parent	<input type="text"/>	<input type="text"/>
Foster Parent	<input type="text"/>	<input type="text"/>
Family Foster Home Provider	<input type="text"/>	<input type="text"/>
Administrator	<input type="text"/>	<input type="text"/>
Administrative Designee	<input type="text" value="Joy Kushner"/>	<input type="text" value="Joy Kushner"/>
Special Education Teacher	<input type="text" value="Debbie Lazer"/>	<input type="text" value="Deborah Lazer"/>
General Education Teacher	<input type="text"/>	<input type="text"/>
School Psychologist	<input type="text" value="Erica Salzman"/>	<input type="text" value="Erica Salzman"/>
School Nurse	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text" value="DIS LAS"/>	<input type="text" value="Alison Lewis, SLP"/>	<input type="text" value="Alison Lewis"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Interpreter	<input type="text" value="Noya Alperson - participated via Zo"/>	<input type="text"/>
Sign Language Interpreter	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Other <input type="text" value="LAUSD LAS Assessor"/>	<input type="text" value="Joy Lee"/>	<input type="text" value="Joy Lee"/>
Other <input type="text" value="VG Behavior Specialist"/>	<input type="text" value="Noya Alperson - participated via Zo"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Reconvened
Meeting Date

16-DEC-2021

Student AZOULAY
LastCHAIM (DAV
FirstY
MI

Date of Birth 04-MAR-2010

Meeting Date 29-NOV-2021

Section R: Names and Signatures (Signatures on File)

Team Member	Print Name	Signature
Parent/Guardian	Avshalom Azoulay participated remotel	
Parent/Guardian		
Student Age 18 - 21 years		
Student Under Age 18 years	Chaim David Azoulay	
Surrogate Parent		
Foster Parent		
Family Foster Home Provider		
Administrator		
Administrative Designee	Joy Kushner	Joy Kushner
Special Education Teacher	Deborah Lazer participated remotel	
General Education Teacher		
School Psychologist		
School Nurse		
Related Service Staff		
Related Service Staff		
Related Service Staff		
Interpreter	Noya Alperson participated remotel	
Sign Language Interpreter		
Agency Representative		
Agency Representative		
Agency Representative		
Other VG Behavior Specialist	Noya Alperson participated remotel	
Other		
Other		
Other		

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student **AZOULAY**
Last**CHAIM (DAV**
First**Y**
MIDate of **04-MAR-2010**
BirthMeeting **29-NOV-2021**
Date

LEAST RESTRICTIVE ENVIRONMENT ANALYSIS

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

Student's Current Placement Type:

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

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

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

Step A.	Can the supports, services, accommodations and/or modifications in the student's IEP be made available in a general education classroom/setting?	
	<input type="radio"/> Yes <input checked="" type="radio"/> No	If the answer is YES, then a general education classroom/setting is the appropriate placement. If the answer is NO, go to the question below.
	<input type="radio"/> Yes <input checked="" type="radio"/> No	If not currently available, can the required supports, services, accommodations and/or modifications be made available in a general education classroom/setting? If YES, all required supports, services, accommodations and/or modifications must be provided within a reasonable timeline. If the answer is NO, please articulate why in the box below. Then go to Step B.
IEP team determines that student continues to require support from special education provided in a small group setting to allow him to access the general education curriculum.		

Step B.	Can the supports, services, accommodations and/or modifications in the student's IEP be made available on a general education site in a special day program?	
	<input type="radio"/> Yes <input checked="" type="radio"/> No	If the answer is YES, then a special day program on a general education site is the appropriate placement. If the answer is NO, go to the question below.
	<input type="radio"/> Yes <input checked="" type="radio"/> No	If not currently available, can the required supports, services, accommodations and/or modifications be made available in a special day program on a general education site? If YES, all required supports, services, accommodations and/or modifications must be provided within a reasonable timeline. If the answer is NO, please articulate why in the box below. Then go to Step C.
IEP team determines that student continues to require special education supports and services in a small, structured environment to meet needs due to disability and allow him to maximize progress toward grade level standards.		

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student
Last

First

MI

Date of Birth

Meeting Date

ANNUAL LEAST RESTRICTIVE ENVIRONMENT ANALYSIS (Continued)

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

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

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

Step E.	Can the supports, services, accommodations and/or modifications in the student's IEP be made available in a residential care facility?	
	<input type="radio"/> Yes <input type="radio"/> No	If not currently available, articulate in the IEP what supports, accommodations and/or modifications are required for the student in this setting.
	<div style="border: 1px solid black; height: 80px; width: 100%;"></div>	

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student **AZOULAY**

Last

CHAIM (DAV

First

Y

MI

Date of
Birth

04-MAR-2010

Meeting
Date

29-NOV-2021

ANNUAL LEAST RESTRICTIVE ENVIRONMENT ANALYSIS (Continued)

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

Step F.

The student's needs as reflected in the contents of this IEP, and the placement being considered by the IEP team, outweigh any potential harmful effects at this time, including (check all that apply):



Diminished access to the full range of the curriculum



Missed general education instruction taught by highly qualified staff



Rate at which student may earn credits for graduation



Lack of opportunity for social interaction



Lack of opportunities for age-appropriate peer role models



Amount of socialization opportunities with typical peers



Limited access to peers in student's home community



Lack of exposure to appropriate behavioral models from peers



Other:

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 1 - Eligibility, Placements and Supports

Student **AZOULAY****CHAIM (DAV****Y**Date of Birth **04-MAR-2010**Meeting Date **29-NOV-2021**

Last

First

MI

		Effective With this IEP	Future Changes Related to this IEP
	As of Date:		
Eligibility: (from Page 4)		Eligible (AUT)	
	Final IEP Reason Final IEP Effective Date:		
Curriculum		Alternate Curriculum	
Placement	Type of School	Nonpublic School	
	Name of School	BRIDGEPORT SCHOOL (NPS)	
Instructional Setting	Setting	Special Education	
	Program	NPS	
	Special Day Minutes/Wk	1500	
	Addresses Goals	1(Language- Pragmatics),2(Language-Pragmatics),3(Functional Reading),4(Functional Writing),5(Functional Math),6(Social Skills),7(Pre-Vocational),8(Behavioral Support)	
Additional Factors	Low Incident Support	None	
	Assistive Technology Support	No	
	Transportation	NPS Only - NPS Transportation	
	Extended School Year/Intersession	<input checked="" type="radio"/> Yes <input type="radio"/> No	
	Parent Counseling and Training (PCT)	<input checked="" type="radio"/> Yes <input type="radio"/> No	
	ESY Transportation	Home to School	
Accommodation, Modifications, Supports	Instructional Accommodations	small group instruction, offer choices, assignments broken down into smaller parts, reading material at independent and instruction level, re-teaching, graphic organizers, show examples, preferential seating, extended time on assignments, access to keyboard, calculator access, use of visuals and manipulatives, pre-teaching, breaking math problems into simpler parts, and visual demonstrations, repeated demonstrations, tasks explained in small and sequential manner, instruction in social skills, reinforce appropriate behavior, reduce/minimize distractions, modeling positive social interactions.	
	Instructional Modifications		
	Other Supports, including Non-Academic and Extracurricular Activities	Behavior Intervention Plan Social skills instruction	
Preparation for Three Year Review IEP (At the second Annual Review IEP Meeting, the team must discuss and document the decision to conduct or not conduct a three-	Do the Parent and the District (local educational agency) agree that a reassessment is unnecessary?	<input type="radio"/> Yes <input type="radio"/> No	

year comprehensive reassessment.)	If the Parent does not agree, specify the area(s) to be reassessed.		
Comments, as appropriate			
Low Incidence Equipment			
Assistive Technology Equipment			
Participation in General Education	The above mentioned NPS (100% of the school-day) is the least restrictive environment to meet student's needs at this time due to behavioral needs and limited academic progress. Every effort will be made to re-integrate the student into the general education environment when feasible and appropriate. Areas of consideration for least restrictive environment, i.e. return to regular education setting include but are not limited to: behavior; attendance; and academic progress.		

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student **AZOULAY**
Last

CHAIM (DA' First

Y

MI

Date of Birth 04-MAR-2010

**Meeting
Date**

29-NOV-2021

		Effective With This IEP	Future Changes Related To This IEP
Service 1	Start Date:	Effective on Signature Date	
10	End Date:		
Language/Speech	Service applies to:	ESY	
	Frequency:	1-5	
This service addresses the following goals:	Interval:	Weekly	
1(Language Pragmatics1)	Minutes/Interval:	60	
2(Language Pragmatics2)	Minutes/Interval (Pullout from Gen Ed):	0	
	Service Delivery Model:	Direct Service (Collaborative)*	
	Area:	School-Based	
	Responsible Personnel:	Nonpublic School Provider (for nonpublic school students only)	
*			
Service 2	Start Date:	Effective on Signature Date	
10	End Date:		
Language/Speech	Service applies to:	Regular	
	Frequency:	1-5	
This service addresses the following goals:	Interval:	Weekly	
1(Language Pragmatics1)	Minutes/Interval:	60	
2(Language Pragmatics2)	Minutes/Interval (Pullout from Gen Ed):	0	
	Service Delivery Model:	Direct Service (Collaborative)*	
	Area:	School-Based	

	Responsible Personnel:	Nonpublic School Provider (for nonpublic school students only)	
*			

Notes:

Parents of students who are Medi-Cal eligible authorize LAUSD to submit claims for reimbursement by Medi-Cal funded services unless parent(s) signs a Parent Medi-Cal Non-Authorization to Bill form. Please see Parent's Guide to Special Education Services (including Procedural Rights and Safeguards).

Part 3 - Percentage of Time Outside of General Education

	Effective With this IEP	Future Changes Related to this IEP
% of Time per Week outside of General Education	96	

Part 4 - Additional Discussion (This section is optional)

All participants participated via Zoom. Parent provided verbal confirmation of meeting date/time. Parent will return completed meeting notification form. Parent has excused the participation of a General Education teacher prior to the meeting. Parent will sign and return the form acknowledging this consent.

Team discussed potential learning loss due to distance learning. It was determined that David's challenges in accessing his educational program and progressing toward goals are best described by his challenges in accessing the CORE curriculum overall, rather than a function of distance learning.

Team reviewed assessment results and determined that at this time, student instruction and educational program should be provided on the Alternate Curriculum. Meeting recessed to explore placement options where an Alternate Curriculum can be provided.

The IEP team discussed the possibility of student transitioning to a District-operated program. At this time, the student requires a small, structured, therapeutic learning environment with immediate response to: challenges with safe, appropriate responses to frustrating situations. Therefore, student demonstrates the continued need for a highly restrictive educational setting that can be provided by a nonpublic school (NPS). The NPS staff supports student in developing skills that would be beneficial when student is ready to transition to a District-operated program, such as: increased ability to independently utilize safe, appropriate responses to frustrating situations, in preparation for a transition to the lesser restrictive educational environment in the future. Additionally, the NPS staff will continue to lessen the degree of structure and support, fade prompts, and reduce the need for accommodations, as appropriate.

Every effort will be made to reintegrate student into the general education environment when appropriate. Student will be considered for a lesser restrictive educational setting when he is able to demonstrate noteworthy and consistent progress in the areas of: academics and behavior. The IEP team recommends the student continue to participate in a NPS which provides a small and highly structured therapeutic setting with social, emotional, and behavioral supports.

IEP team discussed the need for continued, consistent support in the area of behavior. Student has demonstrated regression with limited recoupment in regards to his ability to make consistent progress toward behavior goals and overall progress. The IEP team discussed and determined that ESY is necessary to build and maintain critical skills and avoid skill loss with limited recoupment as demonstrated over instructional breaks.

12/16/21: Meeting reconvened. All participants participated via Zoom. Parent provided verbal confirmation of meeting date/time. Parent will return completed meeting notification form. Parent has excused the participation of a General Education teacher, District assessors and LAS provider from the reconvene meeting prior to the meeting. Parent will sign and return the form acknowledging this consent.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student AZOULAY

CHAIM (DA)

Y

Date of Birth 04-MAR-2010

Meeting Date 29-NOV-2021

Last

First

MI

FAPE Summary Grid

Program:	NPS	Setting:	Special Education
Eligibility:	Eligible (AUT)	Curriculum:	Alternate Curriculum
Transportation:	NPS Only - NPS Transportation	Low Incident Support:	None
Date District Received Parent Signature:			

Service Code	Service Desc	Start Date	Service Applies To	Interval	Frequency	Area	Total Minutes	Addresses Goal(s)	No Consent
10	Language/Speech	Effective on Signature Date	ESY	Weekly	1-5	School-Based	60	Language Pragmatics1, Language Pragmatics2	--
10	Language/Speech	Effective on Signature Date	Regular	Weekly	1-5	School-Based	60	Language Pragmatics1, Language Pragmatics2	--

Alternative Remote/Distance Learning Services During Emergency Conditions

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

Means of Delivery, to greatest extent possible ("x" all that could apply for student, depending on emergency circumstances):

	Teacher-posted lessons, asynchronous (online or other media)	Virtual class meetings, synchronous	Personalized learning tools (virtual or paper packets, as available)	Scheduled teacher appointments (virtual or in-person, as available)	Scheduled email check-ins (parent or student)	Virtual office hours (drop-in; parent or student)
Specialized Academic Instruction and Related Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Extended School Year Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Supplementary Aids and Services (provided in general education classes and other general ed environments)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

As soon as practicable following the determination that instruction or services, or both, cannot be provided either at the school or in person for more than 10 days due to a qualifying state of emergency, the parent will be notified as to the specific means by which the student's IEP will be provided, in light of the emergency circumstances present at that time. The IEP will be provided by alternative means as necessitated during the period of emergency conditions, only.

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

For IEP Team Information

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

INDIVIDUALIZED EDUCATION PROGRAM

Behavior Intervention Plan

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

Los Angeles Unified School District

(Behavior Intervention Plan, pg. 1 of 3)

Student **AZOULAY** **CHAIM (DAVID)** **Y** **MI** **Date of Birth** **04-MAR-2010** **Meeting Date** **29-NOV-2021**

- 1** The behavior impeding learning is: Describe what it looks like:
 ☒ David will not begin work, when asked to work will become
- 2** It impedes learning because: lack of work production ☒ disrupts other students ☐ requires instruction to stop ☐
 instructional time is lost ☒ negative interaction with peers ☐
 other ☐
- 3** The need for a Behavior Intervention Plan: ☐ early stage intervention ☐ moderate ☒ serious ☐ extreme
- 4** Frequency or intensity or duration of behavior: Frequency (x) Period Intensity Duration (min)
 hourly ☒ medium ☒ 30
☒ Reported by and/or ☒ observed by

PREVENTION

PART 1

ENVIRONMENTAL FACTORS AND NECESSARY CHANGES

- 5** What are the predictors for the behavior? (Situations in which the behavior is likely to occur: people, time, place, subject, etc).
- | | | | |
|--|---|--|--|
| <input checked="" type="checkbox"/> Disruption in routines | <input checked="" type="checkbox"/> Work level higher than student's ability | <input type="checkbox"/> Verbal directives | <input type="checkbox"/> Lack of predictability |
| <input type="checkbox"/> Time of day | <input checked="" type="checkbox"/> Internal physical/emotional state | <input type="checkbox"/> Peer conflict | <input type="checkbox"/> Over stimulation |
| <input type="checkbox"/> Unstructured time | <input type="checkbox"/> Lack of freedom, choice, desirable activities, friends | <input type="checkbox"/> Room conditions | <input type="checkbox"/> Specific room arrangement |
| <input type="checkbox"/> Events from previous environments | <input type="checkbox"/> Under stimulation | | |
- ☐ Other Describe:

Observation Analysis

- 6** What supports the student using the problem behavior? (What is missing in the environment/curriculum or what is in the environment/curriculum that needs changing?)
- | | | | |
|-----------------------------|---|---|--|
| Present in the environment: | <input type="checkbox"/> Classroom seating arrangement | <input type="checkbox"/> Noise levels | <input type="checkbox"/> Interactions (adult and/or peers) |
| Missing in the environment: | <input type="checkbox"/> Peer status gained for misbehavior | <input checked="" type="checkbox"/> Inappropriate materials (age-appropriate, size, etc.) | <input type="checkbox"/> Conflict resolution skills |
| | <input type="checkbox"/> Transition skills | <input checked="" type="checkbox"/> Schedule | <input type="checkbox"/> Effective communication with parent |
| | <input type="checkbox"/> Re-teaching | <input checked="" type="checkbox"/> Task structuring | <input checked="" type="checkbox"/> Communications system |
| | <input type="checkbox"/> Social skills instruction | <input checked="" type="checkbox"/> Consequences not clear to student | |
| | <input type="checkbox"/> Choices | | |
- ☐ Other (Missing/Present):

REMOVE STUDENT'S NEED TO USE THE PROBLEM BEHAVIOR

Intervention

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

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

Who will establish? Who will monitor? Frequency

INDIVIDUALIZED EDUCATION PROGRAM

Behavior Intervention Plan

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

Los Angeles Unified School District

(Behavior Intervention Plan, pg. 2 of 3)

Student **AZOULAY** **CHAIM (DAVID)** **Y**
Last First MI

Date of Birth **04-MAR-2010** Meeting Date **29-NOV-2021**

ALTERNATIVE

PART II

FUNCTIONAL FACTORS AND NEW BEHAVIORS TO TEACH AND SUPPORT

8

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

To Get:

☐

Sensory input

☐

Attention (peer)

☐

Attention (staff)

To Avoid:

☐

Tangible (desired item)

☒

Tangible (desired activity)

☐

Sensory input

☐

Attention (peer)

☐

Attention (staff)

☒

Task (too difficult)

☐

Task (too easy)

☐

Task (too long)

Describe:

David will become agitated when asked to work, rather

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

Observation
Analysis

Given visual support, and with 1-2 prompts from staff, David will begin his class work with a calm body (i.e., sitting at his desk, safe hands) for 10 minutes during a session

10

What teaching Strategies/Necessary Curriculum/Materials are needed?

☒

Better communication skills

☐

Anger management

☐

Communication system

☒

Self-management systems

☐

Following schedules & routines

☒

Learning new social skills

☐

Learning how to negotiate

☐

Learning structured choice

☐

Learning new scripts

☐

Learning notebook organization

☐

Learning to use conflict resolution

☒

Learning to request breaks

☐

Other

Who will establish?

Who will monitor?

Frequency:

Teacher/ classroom staff

Teacher/ classroom staff

Daily

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

Intervention

11

Physical:

☐

High-fives

☒

Smiles

☐

Handshake

Verbal:

☐

Pat on the back

☐

Recognition of student's ...

☐

Peer recognition

Contingent Access:

☐

Use specific praises

☐

Free time

☐

Listen to music

☐

Time on the computer

☒

Describe:

☐

Other

☐

Preferred activity

☐

Certificate sent home

☐

Seating Location

Tangibles

☐

Positive phone calls or notes to home

☐

Points

Tokens and Points:

☒

Tokens

☒

Points

Privileges:

☐

Exempt assignment

☐

Extra test points

Other ideas:

Selection of reinforcer based on: Student preference

☒

reinforcer for using replacement behavior

☒

reinforcer for general increase in positive behaviors

By whom?

Frequency

Teacher/ classroom staff

Teacher/ classroom staff

EFFECTIVE REACTION

PART III

REACTIVE STRATEGIES

12

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

When David is instructed to begin class work he will be asked if he feels ready and prepared to begin. Once he expresses readiness he will begin his work. He will continue working with a calm body (i.e. sitting at desk, safe hands). If David becomes agitated he will be asked to practice his coping strategies (i.e. taking deep breaths, positive self-talk, asking for a break). Once David is ready to resume his work, he will

Personnel?

Teacher/ classroom staff

INDIVIDUALIZED EDUCATION PROGRAM

Behavior Intervention Plan

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

Los Angeles Unified School District

(Behavior Intervention Plan, pg. 3 of 3)

Student AZOULAY
LastCHAIM (DA
FirstY
MIDate of
Birth

04-MAR-2010

Meeting
Date

29-NOV-2021

OUTCOMES

PART IV

BEHAVIORAL GOALS

13

Behavioral Goal: Goal #: 8

Given visual support, and with 1-2 prompts from staff, David will begin his class work with a calm body (i.e., sitting at his desk, safe hands) for 10 minutes during a session with 80% accuracy over a 1-week period as measured by observation in the classroom setting.

The above behavioral goal is to: ☒ Increase use of replacement behavior and may also include:

☒ Reduce frequency of problem behavior ☒ Develop new general skills that remove student's need to use the problem behavior

Observation and Analysis Conclusion

Are curriculum accommodations or modifications also necessary? Where described?

David requires a functional curriculum.

☒ Yes ☐ No

Are environmental supports/changes necessary?

☒ Yes ☐ No

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

☐ Yes ☒ No

Are both teaching of new replacement behavior AND reinforcement needed?

☒ Yes ☐ No

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

☐ Yes ☒ No

Person responsible for contact between agencies.

COMMUNICATION

PART V

COMMUNICATION PROVISIONS

14

Manner and content of communication:

☒ Phone calls

☐ Email

☐ Written notes

☐ Daily reports

☐ Daily charting

☐ Behavioral logs

☐ Weekly reports

☐ Other

Between?

Teacher and father

Frequency?

Daily or as needed

INDIVIDUALIZED EDUCATION PROGRAM

LANGUAGE AND SPEECH SERVICES CERTIFICATION (LAS CERTIFICATION)

Los Angeles Unified School District

Attachment B

Student: HAIM (DAVID) Y. /

Date
of
Birth 04-MAR-2010Meeting
Date 29-NOV-2021

This page is to be completed for students with Special Education eligibility other than SLI when determining the need for LAS services to support the provision of FAPE.

Complete Step 1a or 1b

Step 1a. General Education Interventions - Check items as completed

- ☐ Intervention strategies implemented, including English Language Instruction or RtI2 prevention support (including but not limited to school staff development regarding language standards in the curriculum and referral for Special Education, consultation between the classroom teacher and school speech therapist for appropriate classroom accommodations, consultation with the SSPT that includes an EL expert if student is identified as an English Learner).
- ☐ Intervention support monitored over several weeks, and modified interventions as necessary based on student response.
- ☐ Interventions were not successful, student referred for special education assessment .
- ☐ Screening by a speech therapist or a Student Success Team meeting (including a speech therapist) with the focus being speech and language concerns OR an approved screening instrument for non-LAUSD enrolled preschoolers.

Step 1b. Interventions Not Applicable

- ☒ Interventions not applicable for non-LAUSD enrolled preschoolers or when determined unnecessary by the speech therapist.

Step 2. Review of Pre-referral Information - Check items as applicable

- ☒ The speech or language delay does not appear to be due to unfamiliarity with English.
- ☒ The delay does not appear to be due to a lack of instruction in English, dialectical factors or limited language experience.
- ☒ The delay does not appear to be due to environmental factors.
- ☒ The delay does not appear to be due to economic factors.
- ☒ The delay does not appear to be due to social or cultural factors.

Step 3. Assessment - Check either A or B, and complete the remaining items

- ☒ A. Student has received an assessment by a school psychologist that gives an indication of where the student's general ability lies. (if a language impairment is suspected)

OR

- ☐ B. A Psychological Assessment is not required if the suspected area of disability is voice, fluency or articulation.

- ☒ Student has received a health assessment that rules out whether an inability to communicate effectively is a result of a health or sensory condition.
- ☒ A credentialed or licensed speech therapist has conducted a comprehensive evaluation, including assessment in the student's primary language, that consists of multiple measures of assessment, including but not limited to standardized test instruments (or alternate forms of assessment if necessary), formal speech/language sample, parent interview or checklist, teacher interview or checklist, and observation in various communication settings.

Step 4. Determination of the Need for LAS Service (for students with Special Education eligibility other than SLI):

- ☒ The IEP team has determined that speech and language related services and support are necessary for the student to benefit from Special Education. Speech and Language Services are necessary due to the results of a formal assessment, which indicates that the student demonstrates difficulty understanding or using spoken language to such an extent that it adversely affects his/her educational performance and cannot be corrected without speech and language related services.
- ☒ The presenting need for LAS service is not due to: social maladjustment, health factors, poor school attendance, environmental, economic, or social disadvantage, or lack of instruction or the unfamiliarity with the English language.
- If the above is so, identify the area(s) of difficulty:
- ☒ Language disorder
- ☐ Articulation disorder
- ☐ Fluency disorder
- ☐ Voice disorder

If the student is eligible, the IEP Team must consider service delivery models based on the student's identified needs and appropriate placement in the least restrictive environment. The IEP team should also include teacher and parent participation in the implementation of goals and supports and accommodations to ensure achievement of goals and objectives in a time-efficient manner and carry-over to multiple communication contexts.