

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Identification Number 071605M005 SSID 8472468745

Eligible (SLD)

Student PEREZ GUY MI
Last First MI

Date of Birth: 16-JUL-2005

Section A: Meeting Information

Pertinent Dates	Type of Meeting
Date of Initial IEP Team Meeting: 24-JUL-2008	<input type="radio"/> Initial
Date of Present Meeting: 23-FEB-2022	<input type="radio"/> Amendment of IEP dated
Annual Review to be conducted by: 11-FEB-2023	<input checked="" type="radio"/> Annual Review
Next Three Year Review will be conducted by: 11-MAR-2023	<input type="radio"/> Three Year Review
Three Year Review or Evaluation was conducted on: 11-MAR-2020	<input type="radio"/> Early Start Transition
Transition to Kindergarten to be conducted by:	<input type="radio"/> Expulsion Analysis
	<input type="radio"/> Individual Transition Plan

Location of Meeting: Taft Charter HS District Name: Los Angeles Unified School Dis

Section B: Student Information

Date of Birth: 16-JUL-2005 Age: 16 Grade: 9
 Gender: Male Female Limited English Proficient Student: Yes No Ethnic Code: White
 Location of the Psych Folder: LOCAL DISTRICT N Student has no Psych Folder:
 Location of the Cum Folder: TAFT CHS Student has no Cum Folder:
 Home Language: English Student Language: English Alternate Mode of Communication:
 Home Address of Student: 4484 GAYLE DR
 City: TARZANA CA ZIP Code: 91356
 Home Telephone: (818) 406-5958 Daytime Telephone:
 School of Attendance: Taft Chs Location Code: 8880
 School of Residence: Taft Chs Location Code: 8880
 Name of Parent/Guardian: ARIELA ZISMAN Telephone:
 Address: 4484 GAYLE DR
 City: TARZANA CA ZIP Code: 91356
 Surogate Parent: Telephone:
 Attends CURRENT SCHOOL as a result of one of the following: Attends School of Residence
 Is the student living in a Family Foster Home (FFH)? No Yes FFH#:
 Is FFH Provider related to student? No Yes Relationship:
 Licensed Children's Institution: No Yes LCI Name:
 LCI#:
 Out of the home placement made by: Regional Center Department of Mental Health Department of Children's Services
 Superior Court Other:
 Child's family living within LAUSD's boundaries? No Yes
 If the student is 18 years old or older or is an emancipated minor, does he/she have educational decision-making rights? No Yes

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Los Angeles Unified School District

Student PEREZ GUY MI

Date of Birth 16-JUL-2005

Section C: Language Acquisition

Language Classification: English Only Start Date: 09-SEP-2009
 Withdrawal by Parent Request: Yes No Reclassification Date:
 ELPAC Performance Level and Performance Descriptor: Test Date:
 Alternate ELPAC Performance Level and Performance Descriptor: Test Date:

Section D: Goal Achievement from Current IEP

Goal for: (example - Reading)	Achieved		If No, explain the reason the goal/objective was not achieved
	Yes	No	
1 Reading	<input type="radio"/>	<input checked="" type="radio"/>	needs more time, missing work, goal revised
Category Reading			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
2 Writing	<input type="radio"/>	<input checked="" type="radio"/>	needs more time, missing work, goal revised
Category Writing			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
3 Math	<input checked="" type="radio"/>	<input type="radio"/>	
Category Math			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
4 Vocational Education	<input checked="" type="radio"/>	<input type="radio"/>	
Category Vocational Education			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
5 Behavioral Support	<input type="radio"/>	<input checked="" type="radio"/>	does not participate in all classes consistently
Category Behavior Intervention			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
6	<input type="radio"/>	<input type="radio"/>	
Category			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	
7	<input type="radio"/>	<input type="radio"/>	
Category			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	
8	<input type="radio"/>	<input type="radio"/>	
Category			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	
9	<input type="radio"/>	<input type="radio"/>	
Category			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	
10	<input type="radio"/>	<input type="radio"/>	
Category			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	

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Student

PEREZ

GUY

Last

First

MI

Date of Birth

16-JUL-2005

Meeting Date

23-FEB-2022

Section E: Present Level of Performance

Performance Area:

Reading

Category:

Reading

Assessment/Monitoring Process Used:

teacher reports, observations, work samples, informal tests, and review of re.

State/District Assessment Results:

SBAC 2019 2412

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

Strengths: Guy is able to read with some fluency teacher selected passages. He has basic understanding of phonetics and uses those skills to decoding of unfamiliar vocabulary in text. Guy can determine literal meaning from given text.

Need: Guy conditions to struggle with inferential information read independently. Guy inconsistently is able to use context clues to determine the meaning of a word or phrase and/or identify correctly used patterns of word changes that indicate different meanings to aid himself in the understanding of unfamiliar vocabulary in text. He continues to struggle with identifying setting, and analyzing events from given reading selections. He has difficulty identifying textual evidence that would support answers to given questions from text. Guy will determine a central idea of a text and analyze its development over the course of the text using inferential reading skills, including how it emerges and is shaped and refined by specific details; provide an objective summary of the text at 75% accuracy in 4 out of 5 trials.

IMPACT STATEMENT: Guy's Specific Learning Disability impacts his ability to be able to use context clues to determine the meaning of a word or phrase and/or identify correctly used patterns of word changes that indicate different meanings which impacts his participation and involvement in the general education curriculum.

Performance Area:

Writing

Category:

Writing

Assessment/Monitoring Process Used:

teacher reports, observations, work samples, informal tests, and review of re.

State/District Assessment Results:

N/a

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

Strength: Guy has not produce writing assignments. Based on previous IEP, Guy can write simple sentences utilizing basic sight vocabulary properly. Previous science teacher reported Guy can fill in writing organizational prompts with prompting.

Needs: Guy has had many absences and therefore he has not completed assignments. Based on review of records, his writing in the low average range based on last formal assessment administrated on 3/2020. Guy continues to need to be able to produce clear and coherent writing in which the development, organization, and style are appropriate to task, purpose, and audience. Guy struggles with the proper use of writing mechanics. Much of Guys writing is not legible because of poor penmanship. His previous Science teacher reported when Guy is provided with writing organizational tools/resources he does not or refuses to write full written response to a writing prompt whether as a introduction sentence as well as supporting details with and without prompting. He has difficulty writing a complex topic sentence that could be supported by subsequent sentences to form a topical paragraph.

IMPACT STATEMENT: Guy's Specific Learning Disability impacts his ability to be able to produce clear and coherent writing in which the development, organization, and style are appropriate to task, purpose, and audience which impacts his participation and involvement in the general education curriculum.

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23-FEB-2022

Section E: Present Level of Performance

Performance Area:

Mathematics

Category:

Math

Assessment/Monitoring Process
Used:

teacher reports, observations, work samples, informal tests, and review of re.

State/District Assessment Results:

not available

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

Strength: He can solve single and some two-step variable equations with and without prompting. Guy. With prompting Guy has demonstrated the understanding of the distributive property to solve multiple step equations. With additional prompting, Guy can find the constant rate of change of a data set. He can identify the slope and a y-intercept of a linear equation in slope-intercept form. Guy can solve linear equations with minimal prompting.

Need: Teacher reports Guy struggles with following through with the process of solving math standards. Guy tends to rush through some assignments and does not revise or review for errors before turning in his math work. Guy continues to struggles with multiple step equations. Guy needs to be able to explain orally, in writing, and/or through a combination of words and drawings that the graph of an equation in two variables is the set of all its solutions plotted in the coordinate plane.

IMPACT STATEMENT: Guy's Specific Learning Disability impacts his ability to solve linear equations and systems of equations which impacts his participation and involvement in the general education curriculum.

Performance Area:

Vocational Education

Category:

Vocational Education

Assessment/Monitoring Process
Used:

teacher reports, observations, work samples, IDEAS

State/District Assessment Results:

not available

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

Strengths: Guy attendance has improved from last school year. He has been absent a total of 8 days. His work habits have improved in some classes earning him passing grades in 6/6 classes in the Fall 2021 semester. Per IDEAS, a commercially produced assessment, Guy enjoys hanging out with people, being alone, spending money on food and going places. His favorite things to do are talking about money, gym and himself. He wants to seek a career in boxing or rapper artist.

Need: Guy is not participating class activities frequently due to cell phone usage. He is distracted. Currently Guy has 30 tardies mostly to 1st period. This causes disruption to instruction and loss of instruction. Guy needs to arrive to all his classes on time daily.

IMPACT STATEMENT: Guy's Specific Learning Disability impacts his ability to demonstrate executive functioning and organization which impacts his success in the general education curriculum.

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MI

Section E: Present Level of Performance

Performance Area:

Behavior Support

Category:

Behavior Intervention

Assessment/Monitoring Process Used:

teacher reports, observations, work samples, informal tests, and review of re.

State/District Assessment Results:

n/a

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

Strengths: According to previous teacher they report that last school year, Guy had shown improvement in his behaviors and on task ability than the past. At times, Guy could have appropriate social interactions with peers and teachers. Guy can participate in classroom lessons especially in math. Guy has demonstrated less task avoidance behaviors than in the past.

Needs: His teachers report Guy demonstrates avoidance behaviors in some classes. He will not start his assignments unless he is repeatedly told to do so. He demonstrates lack of impulse control to not use his phone in class. He frequently refuses to put his device away causing loss of instruction. Guy demonstrates a lack of understanding of consequences of his actions. This year he has had 4 referrals to the Dean's office. All were due to breaking class or school rules. Guy needs to follow class and school rules daily.

IMPACT STATEMENT: Guy's Specific Learning Disability impacts his ability to demonstrate impulse control and demonstrate positive social skills which impacts his behaviors 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):

Empty text box for current performance/assessment summary.

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Section F: Eligibility

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

[Empty text box for disability discussion]

For Initial IEP, interventions attempted prior to determining eligibility:

[Empty text box for interventions]

Eligible as a student with the disability of:

Code: SLD Specific Learning Disability

Not Applicable, Blind or Partially Sighted

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

Code: [Empty]

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): [Empty]

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

Final IEP Reason: [Empty] Final IEP Effective Date: [Empty]

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

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

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Last First MI

Date of Birth 16-JUL-2005

Meeting Date 23-FEB-2022

Section G: Annual Goals and Objectives

Performance Area: Reading Category: Reading Annual Goal #: 1

Guy will determine a central idea of a text and analyze its development over the course of the text using inferential reading skills, including how it emerges and is shaped and refined by specific details; provide an objective summary of the text at 75% accuracy in 4 out of 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
- Observation
- Other
- Norm Referenced
- Portfolio
- Criterion Referenced
- Work Samples
- Curriculum Based
- Informal

Incremental objective #1 related to the goal:

Guy will determine a central idea of a text and analyze its development over the course of the text using inferential reading skills, including how it emerges and is shaped and refined by specific details; provide an objective summary of the text at 70% accuracy in 3 out of 5 trials.

Incremental objective #2 related to the goal:

Guy will determine a central idea of a text and analyze its development over the course of the text using inferential reading skills, including how it emerges and is shaped and refined by specific details; provide an objective summary of the text at 70% accuracy in 4 out of 5 trials.

Date to be achieved: June 2022 MO/YR

Date to be achieved: October 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 Date: 17-JUN-2022	2nd Reporting Period Date: 21-OCT-2022	3rd Reporting Period Date: 17-DEC-2022	4th Reporting Period (Secondary Only) Date: 17-MAR-2023	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	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please explain: <input type="text"/>

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Student
 Last First MI

Date of Birth

Meeting Date

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

Guy will follow class and school rules daily with 90% accuracy in 5 out of 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
- Observation
- Other
- Norm Referenced
- Portfolio
-
- Criterion Referenced
- Work Samples
- Curriculum Based
- Informal

Incremental objective #1 related to the goal:

Guy will follow class and school rules daily with 85% accuracy in 4 out of 5 trials.

Incremental objective #2 related to the goal:

Guy will follow class and school rules daily with 90% accuracy in 4 out of 5 trials.

Date to be achieved: MO/YR

Date to be achieved: MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR EXCEEDED

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

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

1 NO PROGRESS

1st Reporting Period Date: <input type="text" value="10-JUN-2022"/>	2nd Reporting Period Date: <input type="text" value="14-OCT-2022"/>	3rd Reporting Period Date: <input type="text" value="23-DEC-2022"/>	4th Reporting Period (Secondary Only) Date: <input type="text" value="17-MAR-2023"/>	Goal Achievement
Progress Mark: <input type="text"/> Is progress sufficient to meet annual goal? <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"/>	Progress Mark: <input type="text"/> Is progress sufficient to meet annual goal? <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"/>	Progress Mark: <input type="text"/> Is progress sufficient to meet annual goal? <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"/>	Progress Mark: <input type="text"/> Is progress sufficient to meet annual goal? <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"/>	Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No If "No" please explain: <input type="text"/>

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Last First MI

Date of Birth 16-JUL-2005

Meeting Date 23-FEB-2022

Section G: Annual Goals and Objectives

Performance Area: Writing Category: Writing Annual Goal #: 2

PEREZ GUY will produce clear and coherent writing in which the development, organization, and style are appropriate to task, purpose, and audience independently with revisions as measured by writing samples in 4 out of 5 trials with 80% accuracy.

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
- Observation
- Other
- Norm Referenced
- Portfolio
- Criterion Referenced
- Work Samples
- Curriculum Based
- Informal

Incremental objective #1 related to the goal:

PEREZ GUY will produce clear and coherent writing in which the development, organization, and style are appropriate to task, purpose, and audience with support and revisions as measured by written samples in 3 out of 5 trials with 70% accuracy.

Incremental objective #2 related to the goal:

PEREZ GUY will produce clear and coherent writing in which the development, organization, and style are appropriate to task, purpose, and audience with support with revisions as measured writing samples in 4 out of 5 trials with 75% accuracy.

Date to be achieved: June 2022 MO/YR

Date to be achieved: October 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 Date: 17-JUN-2022	2nd Reporting Period Date: 21-OCT-2022	3rd Reporting Period Date: 23-DEC-2022	4th Reporting Period (Secondary Only) Date: 17-MAR-2023	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	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please explain: <input type="text"/>

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Meeting Date 23-FEB-2022

Section G: Annual Goals and Objectives

Performance Area: Mathematics Category: Math Annual Goal #: 3

PEREZ GUY will explain orally, in writing, and/or through a combination of words and drawings that the graph of an equation in two variables is the set of all its solutions plotted in the coordinate plane with assistance as measured by work samples in 3 out of 5 trials with 80% accuracy.

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
- Observation
- Other
- Norm Referenced
- Portfolio
- Criterion Referenced
- Work Samples
- Curriculum Based
- Informal

Incremental objective #1 related to the goal:

PEREZ GUY will explain orally, in writing, and/or through a combination of words and drawings that the graph of an equation in two variables is the set of all its solutions plotted in the coordinate plane with assistance as measured by work samples in 3 out of 5 trials with 70% accuracy.

Incremental objective #2 related to the goal:

PEREZ GUY will explain orally, in writing, and/or through a combination of words and drawings that the graph of an equation in two variables is the set of all its solutions plotted in the coordinate plane with assistance as measured by work samples in 3 out of 5 trials with 75% accuracy.

Date to be achieved: June 2022 MO/YR

Date to be achieved: October 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 Date: 17-JUN-2022	2nd Reporting Period Date: 21-OCT-2022	3rd Reporting Period Date: 23-DEC-2022	4th Reporting Period (Secondary Only) Date: 17-MAR-2023	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	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please explain: <input type="text"/>

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Date of Birth 16-JUL-2005

Meeting Date 23-FEB-2022

Section G: Annual Goals and Objectives

Performance Area: Vocational Education Category: Vocational Education Annual Goal #: 4

Guy needs to arrive on time to all his classes daily with 90% accuracy in 6 out 6 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
- Observation
- Other
- Norm Referenced
- Portfolio
- IDEAS
- Criterion Referenced
- Work Samples
- Curriculum Based
- Informal

Incremental objective #1 related to the goal:

Guy needs to arrive on time to all his classes daily with 80% accuracy in 6 out 6 trials.

Incremental objective #2 related to the goal:

Guy needs to arrive on time to all his classes daily with 85% accuracy in 6 out 6 trials.

Date to be achieved: June 2022 MO/YR

Date to be achieved: October 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 Date: 17-JUN-2022	2nd Reporting Period Date: 21-OCT-2022	3rd Reporting Period Date: 23-DEC-2022	4th Reporting Period (Secondary Only) Date: 17-MAR-2023	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"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

PEREZ

Last

GUY

First

MI

Date of Birth

16-JUL-2005

Meeting Date

23-FEB-2022

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 Regular State and District Assessments. <i>(Designated Supports and/or Accommodations identified below are applicable)</i>	CAST Subject Science
Designated Supports: - Test in a separate/smaller setting (non-embedded support)	

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student PEREZ GUY MI
Last First MI

Date of Birth 16-JUL-2005

Meeting Date 23-FEB-2022

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: Hebrew

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 PEREZ GUY MI Last First MI

Date of Birth 16-JUL-2005

Meeting Date 23-FEB-2022

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

Table with 3 columns: Method, Whom, When. Rows include Email to E.Namin and J.Otis on 04-FEB-2022 and 22-FEB-2022.

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 23-FEB-2022

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.

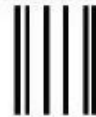
A. Regarding your child's current IEP:	Yes	No	Does Not Apply
1. I am satisfied with the IEP meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I feel that the IEP accurately reflects the decisions made at the IEP meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<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

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Reconvened Meeting Date

Student
 Last First MI

Date of Birth

Meeting Date

Section R: Names and Signatures (Signatures on File)

Team Member	Print Name	Signature
Parent/Guardian	<input type="text" value="Ariela Zilman (by ipad)"/>	<input type="text"/>
Parent/Guardian	<input type="text"/>	<input type="text"/>
Student Age 18 - 21 years	<input type="text" value="Guy Perez"/>	<input type="text" value="Guy Perez"/>
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="Janine Otis"/>	<input type="text" value="Janine Otis"/>
Special Education Teacher	<input type="text" value="Regina Reyes"/>	<input type="text" value="Regina Reyes"/>
General Education Teacher	<input type="text" value="Sarai Munoz"/>	<input type="text" value="Sarai Munoz"/>
School Psychologist	<input type="text"/>	<input type="text"/>
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"/>	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Interpreter	<input type="text"/>	<input type="text"/>
Sign Language Interpreter	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student
 Last First MI

Date of Birth

Meeting 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 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.
<div style="border: 1px solid black; height: 80px;"></div>		

Step B.	Can the supports, services, accommodations and/or modifications in the student's IEP be made available on a general education site in a special day program?	
	<input checked="" type="radio"/> Yes <input type="radio"/> No	If the answer is YES, then a special day program on a general education site is the appropriate placement. If the answer is NO, go to the question below.
	<input type="radio"/> Yes <input type="radio"/> No	If not currently available, can the required supports, services, accommodations and/or modifications be made available in a special day program on a general education site? If YES, all required supports, services, accommodations and/or modifications must be provided within a reasonable timeline. If the answer is NO, please articulate why in the box below. Then go to Step C.
<div style="border: 1px solid black; padding: 5px;">Guy requires intensive instruction in small setting with frequent reminders to stay on task and reteach skills.</div>		

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 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;"></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;"></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;"></div>	

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 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):	
	<input type="checkbox"/>	Diminished access to the full range of the curriculum
	<input type="checkbox"/>	Missed general education instruction taught by highly qualified staff
	<input type="checkbox"/>	Rate at which student may earn credits for graduation
	<input type="checkbox"/>	Lack of opportunity for social interaction
	<input type="checkbox"/>	Lack of opportunities for age-appropriate peer role models
	<input checked="" type="checkbox"/>	Amount of socialization opportunities with typical peers
	<input type="checkbox"/>	Limited access to peers in student's home community
	<input type="checkbox"/>	Lack of exposure to appropriate behavioral models from peers
	<input type="checkbox"/>	Other: <input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 1 - Eligibility, Placements and Supports

Student PEREZ GUY MI
 Last First MI

Date of Birth 16-JUL-2005

Meeting Date 23-FEB-2022

		Effective With this IEP	Future Changes Related to this IEP
	As of Date:		
Eligibility: (from Page 4)		Eligible (SLD)	
	Final IEP Reason Final IEP Effective Date:		
Curriculum		General Education	
Placement	Type of School	District Resident School	
	Name of School	TAFT CHS	
Instructional Setting	Setting	Special Education	
	Program	SLD	
	Special Day Minutes/Wk	1080	
	Addresses Goals	1(Reading),2(Writing),3(Mathematics),4(Vocational Education)	
Additional Factors	Low Incident Support	None	
	Assistive Technology Support	No	
	Transportation	None	
	Extended School Year/Intersession	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Parent Counseling and Training (PCT)		<input type="radio"/> Yes <input checked="" type="radio"/> No	
	ESY Transportation		
Accommodation, Modifications, Supports	Instructional Accommodations	Preferential seating Classwork to be broken down into smaller parts, Directions to be repeated by an adult several times Small group instruction Extra time on tests and assignments as appropriate 150% (with prior arrangement) Multi-modality instruction as needed Prompting on task Model tasks Checks for directional understanding Proximity to instructor/instruction Positive reinforcement	
	Instructional Modifications		
	Other Supports, including Non-Academic and Extracurricular Activities		
Preparation for Three Year Review IEP (At the second Annual Review IEP Meeting, the team must discuss and document the decision to conduct or	Do the Parent and the District (local educational agency) agree that a reassessment is unnecessary?	<input checked="" type="radio"/> Yes <input type="radio"/> No	

not conduct a three-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

--

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student PEREZ
Last

GUY
First

MI
MI

Date of Birth 16-JUL-2005

Meeting Date 23-FEB-2022

		Effective With This IEP	Future Changes Related To This IEP
--	--	--------------------------------	-------------------------------------------

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	57	

Part 4 - Additional Discussion (This section is optional)

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

(SLD, pg. 1 of 1)

Student PEREZ GUY MI
Last First MI

Date of Birth 16-JUL-2005

Meeting Date 23-FEB-2022

SPECIFIC LEARNING DISABILITIES CERTIFICATION

Use this form at Initial, Three Year Reviews and comprehensive assessments for students eligible as having a Specific Learning Disability, including but not limited to students with characteristics of dyslexia. This form is not required at Annual Review meetings. It is the consensus of the IEP Team that the student meets the eligibility criteria for Specific Learning Disability based upon the information which follows. This form serves as the written report of the IEP Team consensus.

1. Are there educationally relevant medical conditions which should be considered by the IEP Team? Yes No
If Yes, describe

Empty text box for describing medical conditions.

2. During the observation of the student in the general education setting, was behavior noted that relates to the student's general academic functioning? Yes No
If Yes, describe

Empty text box for describing behavior in general education setting.

3. A severe discrepancy exists in one or more of the following academic areas: (Check all that apply)
Listening Comprehension Basic Reading Skills Oral Expression Reading Comprehension
Written Expression Math Calculation Math Reasoning Reading Fluency

4. The discrepancy is the result of a disorder in one or more of the following psychological processes: (Check all that apply)
Attention Visual Processing Auditory Processing Sensory Motor Skills
Cognitive abilities including association, conceptualization and expression Phonological Processing

5. The Team agrees that the discrepancy is not primarily the result of:
Limited school experience Poor school attendance Environmental, economic or cultural disadvantage
Social maladjustment Intellectually Disabled Visual, hearing or motor impairment
Unfamiliarity with the English language

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student
 Last First MI

Date of Birth Meeting Date

FAPE Summary Grid

Program:	SLD	Setting:	Special Education
Eligibility:	Eligible (SLD)	Curriculum:	General Education
Transportation:	None	Low Incident Support:	None
Date District Received			
Parent Signature:			

Service Code	Service Desc	Start Date	Service Applies To	Interval	Frequency	Area	Total Minutes	Addresses Goal(s)	No Consent

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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Transition Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Supplementary Aids and Services (provided in general education classes and other general ed environments)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 **PEREZ** **GUY** **MI** Date of Birth **16-JUL-2005** Meeting Date **23-FEB-2022**

1 The behavior impeding learning is: Describe what it looks like:
off task behavior Guy in various environments participates in off task inapproj
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)
6 Reported by teachers and staff and/or observed by teachers and staff
daily medium 3

PREVENTION PART 1 ENVIRONMENTAL FACTORS AND NECESSARY CHANGES

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

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

REMOVE STUDENT'S NEED TO USE THE PROBLEM BEHAVIOR

7 Intervention What environmental changes, structure and supports are needed to remove the student's need to use this behavior? (Changes in Time/Space/Materials/Interactions to remove the likelihood of behavior)
Time Changes: Give more time on tasks Allow completion in parts Teach a closure system
Space Changes: Signal transition Provide a break Give less time on tasks
Material Changes: Preferred seating Different work areas Study carrels
Interaction: Personal space Hands-on learning Tasks organized
 Accommodated work Notebook organizer Enlarged print size books
 High interest materials Cue the student Model
 Use specific supportive words Praise successes Peer Models
 Verbally praise student Use calm, de-escalating language
 Use specific support communications
 Other _____
Who will establish? case manager Who will monitor? case manager Frequency weekly

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 PEREZ GUY MI Date of Birth 16-JUL-2005 Meeting Date 23-FEB-2022

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: Guy participates in behaviors he knows will produce ne

Observation 9
Analysis

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?)

Guy needs to plan ahead to arrive at school on time. Practice following class and school rules and be aware of consequences for actions.

10

What teaching Strategies/Necessary Curriculum/Materials are needed?

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

Who will establish? case manager Who will monitor? case manager Frequency: weekly

Intervention 11

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

- Physical: High-fives Smiles Handshake
- Verbal: Use specific praises Recognition of student's ... Peer recognition
- Contingent Access: Time on the computer Free time Listen to music
- Tangibles Positive phone calls or notes to home Describe: Certificate sent home Other play on his phor
- Tokens and Points: Tokens Points Seating Location
- Privileges: Exempt assignment Extra test points

Other ideas: Selection of reinforcer based on: Guy's interests
 reinforcer for using replacement behavior reinforcer for general increase in positive behaviors
By whom? case manager Frequency: weekly

EFFECTIVE REACTION PART III REACTIVE STRATEGIES

12

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

1. Model or go over proper behaviors. 2. Talk to Guy using non accusatory language. 3. Highlight daily successes

Personnel? case manager, teachers, staff and other school personnel.

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 PEREZ GUY
Last First MI

Date of Birth 16-JUL-2005

Meeting Date 23-FEB-2022

OUTCOMES

PART IV

BEHAVIORAL GOALS

13 Behavioral Goal: Goal #: 5

Guy will follow class and school rules daily with 90% accuracy in 5 out of 5 trials.

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?

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? case manager Frequency? weekly

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

(ITP, pg. 1 of 3)

Student
 Last First MI

Date of Birth

Meeting Date

INDIVIDUAL TRANSITION PLAN (ITP)

- Student was invited to IEP meeting: Yes
- Student received mentoring:^{info} Yes No
- Student referred and placed in an outside agency:^{info} Yes No
- If yes, name of agency:
- Student participated in Work Experience Education:^{info} Yes No
- Student received college awareness preparation:^{info} Yes No
- Student received career awareness:^{info} Yes No

Achievement of Transition Activities from Current ITP (not if first ITP)

Area	Completed	If no, indicate reason
Education/Training Activity	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> First ITP	<input type="text"/>
Employment Activity	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> First ITP	Needs more time and opportunities to participate in
Independent Living Skills Activity (as needed)	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A	<input type="text"/>

Section 1: Education/Training

Assessment (at least one assessment must be completed in this area).	Date	Assessment Name and Results: Indicate interests/abilities and area(s) of need (if applicable)
<input type="text" value="Commercially-produced assessment"/> <input type="text"/> If other?	<input type="text" value="31-AUG-2021"/>	IDEAS: Highest interests areas are: 1.sales, 2.protective services/food services 3. Mathematics
<input type="text"/> <input type="text"/> If other?	<input type="text"/>	

Education/Training Postsecondary Goal

Upon completion of high school, the student will:
 If other?

Education/Training Activity to Support Goal	Timeline	Person/Agency Responsible
develop a personal career / education plan If other?	<input type="text" value="13-JAN-2023"/>	<input type="text" value="Student"/> <input type="text"/> <input type="text" value="Special Education Teacher"/> <input type="text"/> <input type="text" value="Parent/Guardian/Family"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>



Student PEREZ
Last

GUY
First

MI

Date of Birth 16-JUL-2005

Meeting Date 23-FEB-2022

INDIVIDUAL TRANSITION PLAN (IEP)

Course of study: A multi-year description of student's coursework from current year to anticipated exit year, in order to enable the student to meet their postsecondary goal.

A course of study (or IGP) was reviewed with parent and student in relation to:

- Courses completed: Yes No
- Courses currently enrolled in: Yes No
- Courses still needed: Yes No

IGP or course of study was provided to the parent or student over age 18 as required: Yes

Student is working towards: Certificate of Completion Diploma

Additional courses/activities discussed that may support post secondary goals (e.g. SLC participation, electives or instruction related to postsecondary goals, community experiences, participation in other school clubs or organizations, etc.) NOTE: these are suggestions and contingent to availability:

Joining clubs such as Taft Drama Club, Alternative Rock Club and/or Health Club.

Future Agency Involvement:

Are there agencies currently or prospectively providing or paying for transition services? Yes No

Do you give permission to the District to invite these agencies to the next IEP in which transition services will be reviewed? Yes No

Agency Name:

Department of Rehabilitation

Agency Name:

Agency Name:

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