

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Identification Number 200241X469 SSID 4767426876
 Student VOLCHUCK NOA B
 Last First MI

Eligible (AUT)

Date of Birth: 21-APR-2017

Section A: Meeting Information

Pertinent Dates	Type of Meeting
Date of Initial IEP Team Meeting 09-FEB-2022	<input type="radio"/> Initial <input type="radio"/> Amendment of IEP dated
Date of Present Meeting 16-MAY-2022	<input type="radio"/> Annual Review <input type="radio"/> Early Start Transition
Annual Review to be conducted by 16-MAY-2023	<input type="radio"/> Three Year Review <input type="radio"/> Expulsion Analysis
Next Three Year Review will be conducted by 09-FEB-2025	<input type="radio"/> Other <input type="radio"/> Individual Transition Plan
Three Year Review or Evaluation was conducted on 09-FEB-2022	
Transition to Kindergarten to be conducted by 16-MAY-2022	
Location of Meeting ECSE Intake at Melvin	District Name Los Angeles Unified School Dis

Section B: Student Information

Date of Birth 21-APR-2017 Age 5 Grade -1
 Gender Male Female Limited English Proficient Student Yes No Ethnic Code White
 Location of the Psych Folder SUPPORT UNIT NOF Student has no Psych Folder
 Location of the Cum Folder Student has no Cum Folder
 Home Language Student Language Alternate Mode of Communication
 Home Address of Student 17834 BURBANK BLVD APT 113
 City ENCINO CA ZIP Code 91316
 Home Telephone (818) 484-6298 Daytime Telephone
 School of Attendance Sp Ed Inf/Pre (1017) Location Code 1017
 School of Residence Emelita St El Location Code 3589
 Name of Parent/Guardian Shoal/Aviv Volchuck Telephone
 Address same
 City CA ZIP Code
 Surogate Parent Telephone
 Attends CURRENT SCHOOL as a result of one of the following Preschool Program
 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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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

Goal for: (example - Reading)	Achieved		If No, explain the reason the goal/objective was not achieved
	Yes	No	
1 <input type="text"/>	<input type="radio"/>	<input type="radio"/>	Previous IEP not signed or implemented
Category <input type="text"/>			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
2 <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Category <input type="text"/>			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
3 <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Category <input type="text"/>			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
4 <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Category <input type="text"/>			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
5 <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Category <input type="text"/>			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
6 <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Category <input type="text"/>			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
7 <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Category <input type="text"/>			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
8 <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Category <input type="text"/>			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
9 <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Category <input type="text"/>			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
10 <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Category <input type="text"/>			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student VOLCHUCK NOA B Date of Birth 21-APR-2017 Meeting Date 16-MAY-2022
Last First MI

Section E: Present Level of Performance

Performance Area: Communication
Category: Communication
Assessment/Monitoring Process Used: interview, observation, ALDeQ, NWRT, language sample, performance-based measures
State/District Assessment Results: n/a

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

Noa is a 5;0 year old girl who was referred for an initial language and speech evaluation following a psychoeducational evaluation conducted in January 2022 due to concerns in the area of language. At an initial IEP meeting held on 02/09/2022, Noa was determined to qualify for special education services under the eligibility of autism. At this IEP meeting, the team recommended further assessment in the areas of language and speech and occupational therapy. Noa has no prior history of therapeutic intervention.
Strengths: Noa's speech sound development is appropriate for her age and linguistic background. Per parent report, Noa is estimated to be 80% intelligible to familiar listeners. Per interpreter report, Noa was 100% intelligible to an unfamiliar listener. Noa demonstrates intentional communication skills and is able to engage in joint attention and nonverbal turn-taking. She is able to use language for a variety of pragmatic purposes, including greeting, requesting, labeling, and responding. Noa demonstrates good receptive language skills. She is able to identify objects and actions in pictures, follow multiple-step directions, and shows knowledge of basic concepts. Noa also demonstrates good expressive language skills. She is able to use sentences of appropriate length and content and can respond to simple wh- questions about pictures. Results from the Alberta Language Development Questionnaire (ALDeQ) indicate Noa's language development is consistent with that of children with typical language development. Results from a non-word repetition task (NWRT) revealed Noa's performance was within the average range when compared to same-age peers. Overall, Noa demonstrates adequate language skills for her age. Voice and fluency are not areas of concern at this time.
Needs: None at this time.
Impact of Disability: None at this time.
Komal Sidhu, M.A., CCC-SLP
Speech-Language Pathologist

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: Fine Motor

Category: Fine Motor

Assessment/Monitoring Process Used: Clinical obs, interview, DP3

State/District Assessment Results:

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

Student's areas of strengths: Noa exhibits appropriate biomechanical abilities to physically access a classroom and campus environment though she was rated in the below average range on the DP3 physical scale. Noa has appropriate basic visual perceptual skills to track and scan for items of interest, and target areas for object placement. Noa has appropriate fine motor skills able to turn pages of a book, string beads, place coins in a slot, and open containers. Noa was able to produce prewriting lines to include a vertical line, circle, and circle within a circle. Noa has the underlying sensory and motor skills to access the environment and continue developing self-help and social skills. Noa has appropriate processing of tactile, vestibular and proprioceptive input.

Student's areas of need: Noa used a fistled grasp to make prewriting lines. She at first used a correct grasp on scissors then incorrectly switched to an inverted palmer grasp pattern. Noa has needs in the area of fine motor skills for classroom tool use.

Impact of student's disability on academic and overall performance: Noa's deficits in fine motor skills may negatively impact her ability to utilize classroom tools and utensils.

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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Meeting Date 16-MAY-2022

Section E: Present Level of Performance

Performance Area: Health

Category: Health

Assessment/Monitoring Process Used: Parent Interview; Audio & Vision

State/District Assessment Results:

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

Information copied from initial IEP:
 Due to the pandemic, assessments are being conducted remotely and/or in person. The provision of in-person health assessments is subject to existing public health and safety conditions. Health information is gathered from a review of health records and a conference with the parent/guardian. Vision and hearing information are the most current documented in the health record.
 Health Summary: Noa was assessed for Initial IEP on 1/27/2022. Mother reported no significant full-term gestational history. Noa was healthy at birth and her post-natal period was not medically involved. She went home with mother in good condition without any medical equipment. Noa reportedly sat at 6 months, crawled at 8 months, walked at 18 months, and first word at 15 months. She is toilet trained. There is no report of hospitalization, surgery, allergies, or any significant chronic health condition, and she is not on any prescription medication. She is reportedly current with her immunization.

Strength: Noa is in good physical health. She is alert and active, and she ambulates independently without any assistive device. Noa has a good appetite and eats regular table food. She self-feeds with fingers/utensils and drinks with sippy/straw cup. Noa communicates her needs with single words and by pointing and pulling mom to what she wants. She passed vision screening using Spot Screener on 1/27/2022 and passed LAUSD Audio screening using play audiometry on 1/27/2022.

Areas of Need: None with physical health.
 Impact of Disability: Noa's health does not impact her participation, performance, and access in her educational program.
 Accommodation/Modifications: None needed at this time.
 Fariba Akhiary, RN 1/27/2022

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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Meeting Date 16-MAY-2022

Section E: Present Level of Performance

Performance Area: Cognition

Category: Cognitive Development ▼

Assessment/Monitoring Process Used: Alternative assessment, review of records, observations and interviews

State/District Assessment Results: n/a

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

Information copied from initial IEP:

Noa's current functioning in cognition/general ability is estimated to be in the below average range. The assessment was completed in English and Hebrew. Noa was significantly self-directed only participating and responding to items of her choosing. The results were based on her performance on the MSEL and information gathered via observation and interview on the DP3.

Strengths: Mother reports on DP-3 Average scores for cognitive functioning for Noa. She was able to correctly places objects between, under, and over other objects, draw a cross, explain the difference between living and nonliving thing, understand number concepts to six, and answer simple questions about a short story. Noa's profile as examined on the MSEL reflects relative strengths in visual reception and receptive language (well below average scores) tasks as Noa was more interested in these items. She matched shapes and pictures, sorted categories, identified details, colors, size, length and answered a few general knowledge questions.

Areas of need/challenge were identified in fine motor and expressive language as well as visual reception and receptive language. She struggled to follow activities through to completion like screwing a nut and bolt, imitating a block design, following two-step unrelated commands and answering what to do when questions.

Educational Impact: A general ability/cognition impact was not fully determined at this time.

Performance Area: School Readiness

Category: Cognitive Development ▼

Assessment/Monitoring Process Used: Alternative assessment, review of records, observations and interviews

State/District Assessment Results: n/a

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

Information copied from initial IEP:

Overall, Noa's current functioning in school readiness is developing as expected given the student's chronological age and school experience to date, based on performance on the Mullen Scales of Early Learning (MSEL) and information gathered via observation and interview on the Developmental Profile 3rd Edition (DP3).

Noa demonstrates strengths in General Fund of information, pre-mathematics, pre-reading and pre-mathematic skills. She is reported and observed to give her identifying information, body parts, colors, identify at least one number, label pictures and copy pre-writing strokes.

Areas of need/challenge were identified because in the school environment and during assessment all of these skills were only seen on Noa's terms. She struggles to see activities through to completion or to start them. She will ignore request when not preferred. This will solicit physical behaviors of head and body banging for Noa.

Educational Impact: An academic performance/school readiness impact was identified at this time. Noa school readiness skills are developing as expected given her limited school experience. However, she may need support

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Meeting Date 16-MAY-2022

Section E: Present Level of Performance

Performance Area: Communication

Category: Communication

Assessment/Monitoring Process Used: Alternative assessment, review of records, observations and interviews

State/District Assessment Results: n/a

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

Information copied from initial IEP:

Noa's language skills on MSEL in the well below average range, while mother is reporting average skills. On the ASRS mother and teacher reports social skills in the delayed range.

Based on the rater's responses on the Developmental Profile 3, Noa evidences the following strengths: She is able to use 50 different words when speaking, sings or says two songs or nursery rhyme, understands nonverbal gestures, tells a story by looking at pictures in a book, and gives first and last name when asked to. On the MSEL relative strengths were seen in her receptive language skills fell within the well below average range. Noa demonstrated the ability to identify comparative concepts, colors, lengths, and sizes.

Noa evidences the following needs/challenges: Noa's expressive language skills did not yield a t-score she struggled answer what questions, verbal analogies and oral vocabulary. In the school environment it is reported that she only speaks when she chooses and a lot of it is repetitive. Her social use of language is also impaired.

Educational Impact: A communication impact was identified at this time.

Performance Area: Motor Abilities

Category: Physical Development

Assessment/Monitoring Process Used: Alternative assessment, review of records, observations and interviews

State/District Assessment Results: n/a

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

Information copied from initial IEP:

Overall, Noa's motor abilities are found to be in the below average to well below average range.

Based on the rater's responses on the Developmental Profile 3, Noa evidences the following strengths: She was able to stack 8 objects (blocks), copy a vertical line, walk up and down stairs alternating feet, catch a ball thrown by an adult 5 feet away, and build a 3 block bridge.

Noa evidences the following needs/challenges: On the MSEL Noa struggled to screw a nut and bolt, and snip with scissors. She still holds her crayon with an immature fistful grasp. During the assessment it was observed that Noa retreats to the floor often and softly banged her head on the child size coach when not allowed to engage in her preferred tasks. This is reported also in the home and school environment. However the head and body banging is reported much more significant.

Educational Impact: A motor impact was identified at this time.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

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Date of Birth 21-APR-2017

Meeting Date 16-MAY-2022

Section E: Present Level of Performance

Performance Area: Social Emotional

Category: Social Emotional Development ▼

Assessment/Monitoring Process Used: Alternative assessment, review of records, observations and interviews

State/District Assessment Results: n/a

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

Information copied from initial IEP:

Overall, Noa's social-emotional skills are found to be in the well below average range.

Based on observations, informal interviews and the rater's responses on formal rating scales, Noa evidences the following strengths: Noa evidences some appropriate skills within social emotional functioning. Noa is identified to engage in essential social skills that include communicative intent. Parent notes that Noa knows what 'my' means, responds more readily to the instructions and commands of a familiar adult, express desire for playtime with a peer and names a familiar friend. During assessment she participated in preferred activities extended periods of time and allowed others in her play.

Noa evidences the following needs/challenges: Noa was evaluated using standardized assessments, parent/teacher interviews and observation from this examiner. Parent's and teacher's reports on ASRS behavior ratings revealed that she is exhibiting associated features characteristic of Autism Spectrum Disorder, Noa has symptoms directly related to the DSM-5 diagnostic criteria for this disorder. Parent and Teacher BASC-3 note concerns with atypical behaviors. During assessment Noa had some difficulty consistently following adult directions and participate in non-preferred activities. Concerns were established in language use for social contact. At this time Noa's behaviors appear consistent with Characteristics of Autistic-like behaviors, displaying weaknesses in socialization, poor social communication, unusual behaviors, stemming behaviors of rocking and sensory sensitivity, stereotype behaviors. Noa has low frustration tolerance which she displays physically in self-injurious behaviors. Noa head bangs in an aggressive manor. It is also noted that she finds comfort in being close to the ground on the floor. During the assessment Noa's joint attention and eye contact was inconsistent and she had on instance of head banging when not allowed to continue a preferred activity. Noa appears to evidence significant impairments in the area of social-emotional skills.

Educational Impact: A social emotional impact was identified at this time.

Performance Area: Adaptive Skills

Category: Adaptive Behaviors ▼

Assessment/Monitoring Process Used: Alternative assessment, review of records, observations and interviews

State/District Assessment Results: n/a

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

Information copied from initial IEP:

Overall, Noa's self-help/adaptive behaviors are found to be in the average range.

Based on observations, informal interviews and the rater's responses on formal rating scales, Noa's evidences the following strengths: She is able to independently and correctly puts 3 things away, take off a pullover T-shirt without help, put on shoes (not necessarily on the right foot), urinate in the toilet without adult assistance, and wash her face and hands, and dries them acceptably.

Noa is not evidences any significant needs/challenges at this time

Educational Impact: A self-help/adaptive behavior impact was not identified at this time

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Section F: Eligibility

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

Health, general ability, academics, speech and language, social emotional, self-help, motor

For Initial IEP, interventions attempted prior to determining eligibility:

Private preschool

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

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

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Student Date of Birth Meeting Date
 Last First MI

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

When feeling mad, angry, sad, upset or frustrated, Noa will use calming techniques (i.e deep breathing, counting to 5, smelling a flower, asking for a hug) to self-regulate then once calm will use a simple phrase to express her feelings and emotions (i.e 'I am mad' 'Stop, I do not like that') to others 4 out of 5 opportunities during 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
- Observation
- Other
- Norm Referenced
- Portfolio
-
- Criterion Referenced
- Work Samples
- Curriculum Based
- Informal

Incremental objective #1 related to the goal:

When feeling mad, angry, sad, upset or frustrated, Noa will use calming techniques (i.e deep breathing, counting to 5, smelling a flower, asking for a hug) to self-regulate then once calm will use a simple phrase to express her feelings and emotions (i.e 'I am mad' 'Stop, I do not like that') to others 2 out of 5 opportunities during a school week.

Incremental objective #2 related to the goal:

When feeling mad, angry, sad, upset or frustrated, Noa will use calming techniques (i.e deep breathing, counting to 5, smelling a flower, asking for a hug) to self-regulate then once calm will use a simple phrase to express her feelings and emotions (i.e 'I am mad' 'Stop, I do not like that') to others 3 out of 5 opportunities during a school week.

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"/>	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"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

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Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

Demonstrating improved fine motor skills Noa will use an efficient grasp (dynamic tripod, quadrupod, neat pincer, interdigit, etc.) when completing writing activities 90% of the time with 1-2 verbal/visual cues.

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:

Demonstrating improved fine motor skills Noa will use an efficient grasp (dynamic tripod, quadrupod, neat pincer, interdigit, etc.) when completing writing activities 60% of the time with moderate assistance.

Incremental objective #2 related to the goal:

Demonstrating improved fine motor skills Noa will use an efficient grasp (dynamic tripod, quadrupod, neat pincer, interdigit, etc.) when completing writing activities 70% of the time with minimal assistance.

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"/>	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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Student
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Date of Birth

Meeting Date

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

Demonstrating improved fine motor skills Noa will correct hold scissors for cutting straight and curved line 90% of the time with 1-2 verbal/visual cues.

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:

Demonstrating improved fine motor skills Noa will correct hold scissors for cutting straight and curved line 70% of the time with minimal assistance.

Incremental objective #2 related to the goal:

Demonstrating improved fine motor skills Noa will correct hold scissors for cutting straight and curved line 80% of the time with 3-4 verbal/visual cues.

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"/>	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"/> 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"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Date of Birth Meeting Date
 Last First MI

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

When Noa needs help in the class or on the playground, she will approach an adult for assistance, and will use her words to explain what she needs in 4 of 5 occurrences.

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:

When Noa appears frustrated and is approached by a classroom adult, she will use her words to explain what she needs, with adult prompts, in 3 of 5 occurrences.

Incremental objective #2 related to the goal:

When Noa needs help in the class or on the playground, she will approach an adult for assistance, and will use her words to explain what she needs, with adult prompts, in 3 of 5 occurrences.

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"/>	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"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Date of Birth Meeting Date
 Last First MI

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

When given lower and upper case letters, Noa will identify letters with 80% accuracy in 3 consecutive trials as measured by teacher-made tests/teacher charted observation.

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:

When given lower and upper case letters, Noa will identify letters with 50% accuracy in 3 consecutive trials as measured by teacher-made tests/teacher-charted observation.

Incremental objective #2 related to the goal:

When given lower and upper case letters, Noa will identify letters with 65% accuracy in 3 consecutive trials as measured by teacher-made tests/teacher-charted observation.

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

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR EXCEEDED 3 SUBSTANTIAL PROGRESS (50-99% of goal met) 2 PARTIAL PROGRESS (1-49% of goal met) 1 NO PROGRESS

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

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

When given up to twenty objects, Noa will count, recognize, represent, name, order the number of objects with 80% accuracy in 2 of 3 trials, as measured by teacher-made tests/teacher-charted data.

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:

When given up to ten objects, Noa will count, recognize, represent, name, order the number of objects with 80% accuracy in 2 of 3 trials, as measured by teacher-made tests/teacher-charted data.

Incremental objective #2 related to the goal:

When given up to fifteen objects, Noa will count, recognize, represent, name, order the number of objects with 80% accuracy in 2 of 3 trials, as measured by teacher-made tests/teacher-charted data.

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

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR EXCEEDED 3 SUBSTANTIAL PROGRESS (50-99% of goal met) 2 PARTIAL PROGRESS (1-49% of goal met) 1 NO PROGRESS

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

NOA
First

B
MI

Date of Birth 21-APR-2017

Meeting Date 16-MAY-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.

DRDP-A - (Adaptations identified below are applicable)

Adaptations:

- Functional positioning
- Visual support

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student
Last First MI

Date of Birth

Meeting 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 VOLCHUCK NOA B Last First MI

Date of Birth 21-APR-2017

Meeting Date 16-MAY-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. Row 1: Other, R. Sperling, 27-APR-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)

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)

Signature(s)

Date 16-MAY-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.

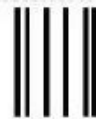
A. Regarding your child's current IEP:	Yes	No	Does Not Apply
1. I am satisfied with the IEP meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I feel that the IEP accurately reflects the decisions made at the IEP meeting.	<input type="checkbox"/>	<input type="checkbox"/>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

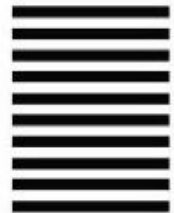


NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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="Shoval Volchuck (via Zoom)"/>	<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="Tanyka Nelson-Robinson"/>	<input type="text" value="Tanyka Nelson-Robinson"/>
Special Education Teacher	<input type="text" value="Romy Sperling"/>	<input type="text" value="Romy Sperling"/>
General Education Teacher	<input type="text" value="Rina Duarte"/>	<input type="text" value="Rina Duarte"/>
School Psychologist	<input type="text"/>	<input type="text"/>
School Nurse	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text" value="language and speech"/>	<input type="text" value="Komal Sidhu"/>	<input type="text" value="Komal Sidhu"/>
Related Service Staff <input type="text" value="occupational therapy"/>	<input type="text" value="Alfred Paul Debler"/>	<input type="text" value="Alfred Debler"/>
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" value="Family Support"/>	<input type="text" value="Gali Boaziz (via Zoom)"/>	<input type="text"/>
Other <input type="text" value="Agency Interpreter- Hebrew"/>	<input type="text" value="Nadav Halevy (via Zoom)"/>	<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 VOLCHUCK
Last

NOA
First

B
MI

Date of Birth 21-APR-2017

Meeting Date 16-MAY-2022

LEAST RESTRICTIVE ENVIRONMENT ANALYSIS

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

Student's Current Placement Type:

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

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

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

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

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

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student **VOLCHUCK**
Last

NOA
First

B
MI

Date of **21-APR-2017**
Birth

Meeting **16-MAY-2022**
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.

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.

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.

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 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
 Last First MI

Date of Birth Meeting Date

		Effective With this IEP	Future Changes Related to this IEP
	As of Date:	<input type="text"/>	<input type="text" value="16-MAY-2022"/>
Eligibility: (from Page 4)		Eligible (AUT)	
	Final IEP Reason Final IEP Effective Date:		
Curriculum		<input type="text" value="General Education"/>	<input type="text" value="General Education"/>
Placement	Type of School	<input type="text" value="Preschooler Non-LAUSD/Not Headstart"/>	<input type="text" value="District Resident School"/>
	Name of School	<input type="text" value="SP ED INF/PRE (1989)"/> <input type="text" value="EMELITA ST EL"/>	<input type="text" value="EMELITA ST EL"/>
Instructional Setting	Setting	<input type="text" value="DIS Only - Preschooler"/>	<input type="text" value="General Education"/>
	Program	<input type="text" value="GE"/>	<input type="text" value="GE"/>
	Special Day Minutes/Wk	<input type="text"/>	<input type="text"/>
	Addresses Goals	<input type="text" value="1(Behavioral Support),2(Fine motor),3(Fine Motor),4(Social Emotional),5(Literacy Development),6(Math development)"/>	<input type="text" value="1(Behavioral Support),2(Fine motor),3(Fine Motor),4(Social Emotional),5(Literacy Development),6(Math development)"/>
Additional Factors	Low Incident Support	<input type="text" value="None"/>	<input type="text" value="None"/>
	Assistive Technology Support	<input type="text" value="No"/>	<input type="text" value="No"/>
	Transportation	<input type="text" value="None"/>	<input type="text" value="None"/>
	Extended School Year/Intersession	<input type="radio"/> Yes <input checked="" type="radio"/> No	
	Parent Counseling and Training (PCT)	<input checked="" type="radio"/> Yes <input type="radio"/> No	
	ESY Transportation	<input type="text"/>	
Accommodation, Modifications, Supports	Instructional Accommodations	<input type="text" value="Check for understanding before and during tasks; provide signals, scripts, and models for improved communication; facilitate peer interactions; break tasks into small steps; prompt to stay on task; provide visuals with instruction; provide opportunities for hands-on learning"/>	<input type="text" value="Check for understanding before and during tasks; provide signals, scripts, and models for improved communication; facilitate peer interactions; break tasks into small steps; prompt to stay on task; provide visuals with instruction; provide opportunities for hands-on learning"/>
	Instructional Modifications	<input type="text"/>	<input type="text"/>
	Other Supports, including Non-Academic and Extra-curricular Activities	<input type="text"/>	<input type="text"/>
Preparation for Three Year Review IEP (At the second Annual Review IEP Meeting, the team must discuss and document the decision to conduct or not conduct a three-year comprehensive reassessment.)	Do the Parent and the District (local educational agency) agree that a reassessment is unnecessary?	<input checked="" type="radio"/> Yes <input type="radio"/> No	
	If the Parent does not agree, specify the area(s) to be reassessed.	<input type="text"/>	<input type="text"/>
Comments, as appropriate			
Low Incidence Equipment	<input type="text"/>		

Assistive Technology Equipment	
Participation in General Education	

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student **VOLCHUCK** **NOA** **B**
 Last First MI

Date of Birth **21-APR-2017**

Meeting Date **16-MAY-2022**

		Effective With This IEP	Future Changes Related To This IEP
Service 1	Start Date:	Effective on Signature Date	01-AUG-2022
47	End Date:	10-JUN-2022	28-OCT-2022
Behavior Intervention Consultation (BIC)	Service applies to:	Regular	Regular
	Frequency:	1-5	1-5
This service addresses the following goals:	Interval:	Yearly	Yearly
1(Behavioral Support)	Minutes/Interval:	240	300
	Minutes/Interval (Pullout from Gen Ed):	0	0
	Service Delivery Model:	Collaborative Behavioral Services*	Collaborative Behavioral Services
	Responsible Personnel:	District Assigned Qualified Provider	District Assigned Qualified Provider
		General Education Teacher	General Education Teacher
	*		
Service 2	Start Date:	Effective with Future Changes	15-AUG-2022
RSP	End Date:		
RSP	Service applies to:		Regular
	Frequency:		1-5
This service addresses the following goals:	Interval:		Weekly
4(Social Emotional) 5(Literacy Development) 6(Math development)	Minutes/Interval:		60
	Minutes/Interval (Pullout from Gen Ed):		0
	Service Delivery Model:		RSP: Collaborative Teaching and Planning**
	RSP Area:	Multiple Academic Areas	

Service Delivery Model:	Direct Service (Collaborative)*	Direct Service (Collaborative)
Responsible Personnel:	Licensed/Credentialed Provider	Licensed/Credentialed Provider
	Resource Specialist Teacher	Resource Specialist Teacher
	General Education Teacher	General Education Teacher
	Other Provider(s)	Other Provider(s)

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	2	

Part 4 - Additional Discussion (This section is optional)

FOR THE REMAINDER OF THE 2021-2022 SCHOOL YEAR:

The IEP team discussed a range of programs and recommends the PAL-CC class at Lemay El. as the program appropriate to provide FAPE. A 'Preschooler Non LAUSD/Not Headstart' and SpEd INF/PRE is solely listed on the placement page as the 'type of school' and 'name of school' to show that parent does not want to access the recommended program to provide FAPE. Parent wishes to continue Noa at (Or Hachaim Academy: 6021 Laurel Cyn. Blvd., North Hollywood, CA 91606, (818) 505-1668) community preschool at their expense. The district offers a PKIT (Preschool Kindergarten Itinerant Teacher) for 120 minutes monthly (see service grid) at Or Hachaim Academy community preschool. PKIT service is a consultative service provided by a special education teacher in collaboration with the preschool staff to support the implementation of the student's IEP in the general education preschool program.

For the remainder of the 2021-2022 school year: Behavior Intervention Consultation is offered at this time for 240 min (4 hours) to help Noa with behavior in the preschool setting.

Behavior Intervention Consultation (BIC) is offered for up 600 minutes over a 2-6 week period. BIC will be provided by a special education teacher who is trained in positive behavior. The program will provide consultation on instructional strategies to classroom teacher and staff re; physical environment, program organization and/or social emotional skill building as needed.

Data collection and documentation of progress will be completed. BIC will collaborate with student's classroom team and teacher and provide review of progress.

FOR THE 2022-2023 SCHOOL YEAR:

Based on Noa's strengths and needs, it is recommended that she attend a general education kindergarten with support from the Resource Specialist Teacher, Occupational Therapy, and the behavior support team as per the services grid above.

Provision of all supports and services recommended for the 2022-2023 school year are incumbent upon enrollment in an LAUSD school. Parent is aware that FAPE is upon enrollment in a public school

Behavior Intervention Consultation is offered for 300 min to help Noa transition from preschool into a LAUSD Kindergarten classroom.

Behavior Intervention Consultation (BIC) is offered for up 300 minutes over a 2-4 week period. BIC will be provided by a special education teacher who is trained in positive behavior. The program will provide consultation on instructional strategies to classroom teacher and staff re; physical environment, program organization and/or social emotional skill building as needed. BIC will collaborate with student's classroom team and teacher and provide review of progress.

Participants attended the IEP meeting via Zoom. Because of this, some signatures were not able to be retrieved on the IEP documents.

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:	GE		Setting:	DIS Only - Preschooler					
Eligibility:	Eligible (AUT)		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
47	Behavior Intervention Consultation (BIC)	Effective on Signature Date	Regular	Yearly	1-5	~	240	Behavioral Support	--
47	Behavior Intervention Consultation (BIC)	Future Changes 01-Aug-2022	Regular	Yearly	1-5	~	300	Behavioral Support	--
16	Occupational Therapy	Effective on Signature Date	Regular	Weekly	1	~	30	Fine motor, Fine Motor	--
16	Occupational Therapy	Future Changes 19-Dec-2022	Regular	Monthly	1-5	~	60	Fine motor, Fine Motor	--
26	Pre-Kdg. Itinerant	Effective on Signature Date	Regular	Monthly	1-5	~	120	Social Emotional, Literacy Development, Math development	--
RSP	RSP	Effective with Future Changes 15-Aug-2022	Regular	Weekly	1-5	RSP- Multiple Academic Areas	60	Social Emotional, Literacy Development, Math development	--

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"/>
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 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 **VOLCHUCK** **NOA** **B** **MI** **Last** **First** **MI** **Date of Birth** 21-APR-2017 **Meeting Date** 16-MAY-2022

1 The behavior impeding learning is: Describe what it looks like:
off task behavior flopping to floor, crying out, refusal, bangs back against wall
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)
5 daily medium 2
 Reported by PRIVATE SCHOOL STAFF & FAMILY and/or observed by Intake TSF & Assessors

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), size, etc.)
Missing in the environment: Peer status gained for misbehavior Inappropriate materials (age-appropriate) Conflict resolution skills
 Transition skills Schedule Effective communication with parent
 Re-teaching Task structuring 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? Classroom Teacher Who will monitor? Classroom Teaching Team Frequency As Needed

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 VOLCHUCK NOA B

Date of Birth 21-APR-2017

Meeting Date 16-MAY-2022

Last First MI

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:

Observation Analysis 9

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?)

To get the attention of a teacher, Noa will follow the classroom rules, receiving praise at each occurrence.

To get to do a desired task, Noa will first do a teacher selected task to earn preferred play time.

10

What teaching Strategies/Necessary Curriculum/Materials are needed?

- Better communication skills, Following schedules & routines, Learning new scripts, 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? Classroom Teacher Who will monitor? Classroom Teaching Team Frequency: As Needed

Intervention 11

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

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

Other ideas: Selection of reinforcer based on: student preferences
reinforcer for using replacement behavior, reinforcer for general increase in positive behaviors
By whom? Classroom Teacher Frequency: As needed

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 Noa is engaging in challenging behaviors or refusing teacher directions, she will be prompted to utilize her coping skills (use visuals as reminders). She will be redirected to a calm area or prompted to ask for a break, with her preferred choice as incentive when calmed down and settled. Praise should be given at each occurrence of utilizing coping skills.

Personnel? Classroom Teaching Team

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 VOLCHUCK NOA B
Last First MI

Date of Birth 21-APR-2017

Meeting Date 16-MAY-2022

OUTCOMES

PART IV

BEHAVIORAL GOALS

13 Behavioral Goal: Goal #: 1

When feeling mad, angry, sad, upset or frustrated, Noa will use calming techniques (i.e deep breathing, counting to 5, smelling a flower, asking for a hug) to self-regulate then once calm will use a simple phrase to express her feelings and emotions (i.e 'I am mad' 'Stop, I do not like that') to others 4 out of 5 opportunities during a school week.

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?
FAPE 1

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
 Daily reports Daily charting
 Weekly reports
 Other

Written notes
 Behavioral logs

Between? Classroom Teaching Team Frequency? As Needed