

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Identification Number 122209M055 SSID 1649092768

Eligible (OHI)

Student ZAFRANI ELIYAH MI
Last First MI

Date of Birth: 22-DEC-2009

Section A: Meeting Information

Pertinent Dates	Type of Meeting
Date of Initial IEP Team Meeting: 14-MAY-2018	<input type="radio"/> Initial <input type="radio"/> Amendment of IEP dated
Date of Present Meeting: 16-NOV-2022	<input type="radio"/> Annual Review <input type="radio"/> Early Start Transition
Annual Review to be conducted by: 04-NOV-2023	<input type="radio"/> Three Year Review <input type="radio"/> Expulsion Analysis
Next Three Year Review will be conducted by: 20-OCT-2024	<input type="radio"/> Other <input type="radio"/> Individual Transition Plan
Three Year Review or Evaluation was conducted on: 21-OCT-2021	
Transition to Kindergarten to be conducted by:	

Location of Meeting: PORTOLA CM District Name: Los Angeles Unified School Dis

Section B: Student Information

Date of Birth: 22-DEC-2009 Age: 12 Grade: 7
 Gender: Male Female Ethnic Code: White
 Location of the Psych Folder: SUPPORT UNIT NOF Student has no Psych Folder:
 Location of the Cum Folder: PORTOLA CM Student has no Cum Folder:
 Home Language: English Student Language: English Alternate Mode of Communication:
 Home Address of Student: 5224 ZELZAH AVE UNIT 201
 City: ENCINO CA ZIP Code: 91316
 Home Telephone: (818) 445-0090 Daytime Telephone:
 School of Attendance: Portola Cm Location Code: 8107
 School of Residence: Portola Cm Location Code: 8107
 Name of Parent/Guardian: Telephone:
 Address: City: CA ZIP Code:
 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

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student
Last First MI

Date of Birth

Section C: Language Acquisition

Language Classification:

Start Date:

Withdrawal by Parent Request: Yes No

Reclassification Date:

ELPAC Performance Level and Performance Descriptor:

Test Date:

Alternate ELPAC Performance Level and Performance Descriptor:

Test Date:

Section D: Goal Achievement from Current IEP

		Achieved		
Goal for: (example - Reading)		Yes	No	If No, explain the reason the goal/objective was not achieved
1	<input type="text" value="Reading"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="excessive absences"/>
Category	<input type="text" value="Reading"/>			
	Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="does not complete assignments"/>
	Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="does not complete assignments"/>
2	<input type="text" value="Written Language"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="does not complete tasks with maximum support"/>
Category	<input type="text" value="Writing"/>			
	Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="does not complete/submit assignments"/>
	Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="does not participate in most assignments"/>
3	<input type="text" value="Mathematics"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="does not complete tasks with maximum support"/>
Category	<input type="text" value="Math"/>			
	Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="does not complete tasks with maximum support"/>
	Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="does not complete tasks with maximum support"/>
4	<input type="text" value="Vocational Education"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="Does not request any prompting"/>
Category	<input type="text" value="Vocational Education"/>			
	Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="or clarification on any assignments."/>
	Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="Does not complete tasks with maximum support"/>
5	<input type="text" value="Behavioral Support"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="Does not act appropriately during non-"/>
Category	<input type="text" value="Behavior Intervention"/>			
	Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="preferred tasks."/>
	Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="Does not complete tasks with maximum support"/>
6	<input type="text" value="ERICS"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="Does not utilize coping skills"/>
Category	<input type="text" value="Social Emotional"/>			
	Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="Does not utilize coping skills"/>
	Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	<input type="text" value="Does not utilize coping skills"/>
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)

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Student ZAFRANI

ELIYAH

Date of Birth 22-DEC-2009

Meeting Date 16-NOV-2022

Last

First

MI

Section E: Present Level of Performance

Performance Area: Reading

Category: Reading

Assessment/Monitoring Process Used: Teacher reports, work samples, observation

State/District Assessment Results: Star Reading Assessment - 09/2022 – SS 823 - Level 1 IRL PP

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

Strengths: Eliyah can read some sight words. He can read and understand sentence starters. He can identify some characters from a short story that is presented to him. With maximum prompts Eliyah can use information gained from a text and discussions to provide a verbal response to literal comprehension questions (e.g., where, who, when).

Needs: Eliyah's attendance, lack of focus and motivation negatively impact his progress in his English class. Teacher reports that Eliyah is missing most of his assignments. Even with maximum one-to-one support, Eliyah refuses to complete assignments. He is often off task in class (eating, taking his phone out/watching videos, talking with peers). He has difficulty with grade-level vocabulary terms and key details in reading prompts. He has difficulty understanding the central theme of a text provided. Eliyah needs to develop his ability to determine a theme or central idea of a text.

Impact Statement: Eliyah's eligibility of Other Health Impairment impacts his ability to understand the central theme of a reading prompt which impacts his participation and involvement in the general education reading curriculum.

Performance Area: Written Language

Category: Writing

Assessment/Monitoring Process Used: Teacher reports, work samples, observation

State/District Assessment Results: 2021-2022 SBAC / ELA / 2414 / Standard Not Met

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

Strengths: English teacher reports that Eliyah completed few assignment in class. He was able to utilize sentence starters to write a poem about himself. When focused, with prompting and adult support, Eliyah can write short, simple sentences. When provided with sentence starters and adult support, Eliyah can provide a simple summary of a text.

Needs: Eliyah does not complete/submit most of his writing assignments. He has difficulty with capitalization, punctuation, and with spelling multisyllabic words. He struggles to independently develop and strengthen his writing as needed by planning, revising, editing, and rewriting focusing on how well audience has been addressed.

Impact Statement: Eliyah's eligibility of Other Health Impairment impacts his ability to develop and strengthen his writing, which impacts his participation and involvement in the general education writing curriculum.

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ELIYAH

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MI

Section E: Present Level of Performance

Performance Area:

Mathematics

Category:

Math

Assessment/Monitoring Process Used:

Teacher reports, work samples, observation

State/District Assessment Results:

2022 SBAC Math: 2279 (Standard Not Met)

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

6th grade math teacher reported Eliyah completed minimal assignments in class and missed many days to receive the math standards provided. 7th grade teacher reports Eliyah completed one quiz during 7th grade with a few only Illustrative Mathematics online activities. Most of the accommodations provided are when he uses the math workbook.

Need: Teacher reports Eliyah is absent to class most days of a school week. When Eliyah comes to class he does not participate or is engage with lessons even with individual prompting from the teacher or support staff by ignoring and refusing his accommodations. Teacher reports Eliyah struggles with his executive functioning to initiate tasks with the provided math standards 7th grade which include scaled drawing and scale factor which addresses multiples and ratios and proportional relationships which include ratio tables and unit rate. Eliyah has not attempted any rational number standards in class which including adding, subtracting, multiplying and dividing of simple and uncommon fractions. Eliyah needs to develop his ability to solve rational number math standards especially fractions to increase math ability and academic success.

IMPACT STATEMENT: Eliyah's Other Health Impairment impacts his ability to solve rational number standards which impacts his participation and involvement in the general education math curriculum.

Performance Area:

Vocational Education

Category:

Vocational Education

Assessment/Monitoring Process Used:

Teacher reports, observation

State/District Assessment Results:

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

Strengths: Teachers report that Eliyah will vocalize his thoughts whether it is appropriate or not. On occasion Eliyah will sit quietly when he chooses not to do anything while in class on occasions he can be disruptive.

Need: Eliyah has difficulty getting on-task even with academic prompts, following instructional procedure and repetition of assignments and tasks. He is missing numerous amounts of assignments in all classes and has been absent 18 days (as of 11/10/2022) throughout the 2022-2023 school year. He also misses random periods throughout the week due to late arrivals and class tardies (61 to date) . Teachers also report Eliyah is supported with maximum individual prompting throughout the school day across all academic classroom settings where he has refused any type of support. Teachers report Eliyah rarely participates on his own nor will he request support on his own, thus impacting his completion of any classwork.

IMPACT STATEMENT: Eliyah's eligibility of Other Health Impairment impacts his ability to ask questions from teachers which impacts his participation and involvement in the general education setting.

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Last

ELIYAH
First

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Section E: Present Level of Performance

Performance Area: Behavioral Support

Category: Behavior Intervention

Assessment/Monitoring Process Used: Teacher reports, dean reports, observation

State/District Assessment Results:

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

Strengths: Eliyah can stay quiet with maximum prompting from teachers and other adults on some occasions. He has some friends in and out of the classroom. Teachers report on rare occasions Eliyah tries to work independently with numerous and consistent prompts from the teacher and other adult aides in the class.

Needs: Eliyah demonstrates inconsiderate behavior. Teachers report he takes out his phone whenever he wants, talks back to teachers and other adults daily, and disrupts the class with numerous verbal confrontations with classmates. In Eliyah's school contact log, there are about 20 various incidents since the beginning of this school year ranging from lack of academic completion, excessive absences and/or tardiness, to disruptive inappropriate behaviors in the classroom and problems with peers. His continuous lack of care for school is evident with his dismal attendance record, his lack of academic achievement, and his inappropriate behaviors in the classroom. Eliyah needs to address these behaviors in order to achieve academic success.

Impact Statement: Eliyah's eligibility of Other Health Impairment impairs his ability to act appropriately in the classroom which impacts his completion of assignments 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 E: Present Level of Performance

Performance Area: Health
Category: Health
Assessment/Monitoring Process Used: Conference with Parent, Review of Health Records
State/District Assessment Results:

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

Strengths: Eliyah passed the LAUSD hearing test on 11/04/2022, and the LAUSD vision screening on 04/17/2018. Mother reported that Eliyah had no serious illness, allergies, injury, accident, surgery, or hospitalization in the past year. Mother also reported that Eliyah does not take medication on a daily basis.
Areas of Need: Physical health is not an area of need at this time.
Impact of Disability: Physical health does not impact the student's participation, performance, and access in the educational program.
Accommodation/Modification: None in the area of physical health at this time.
H. Golshan, BSN, RN, CSN
November 4, 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]

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

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Student ZAFRANI

ELIYAH

Last

First

MI

Date of Birth 22-DEC-2009

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Section E: Present Level of Performance

Performance Area:

Social Emotional

Category:

Social Emotional

Assessment/Monitoring Process
Used:

Observation/Consultation

State/District Assessment Results:

N/A

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

Elijah is a 7th grade student at Portola M.S. and has ERICS services for 120 minutes/month. Elijah's current social emotional goal is: ZAFRANI ELIYAH will apply goal setting skills (e.g., evaluating choices, monitoring progress, identifying obstacles, changing course of action) to increase academic or social success in 4 out of 5 trials per week with minimal adult support as measured by observations and review of records. Elijah has not achieved his goal.

Strengths: Elijah has the ability to be friendly and engage in reciprocal conversation. In sessions, he denies feeling sad or depressed and agrees that it would be a good idea to improve his grades. Elijah reports that he has a few friends at school and many friends outside of school. He shares that he has good relationships with family members and enjoys traveling with them. Elijah has shared that he enjoys cooking and may want to become a chef.

Areas of Need: Elijah has missed several counseling sessions due to his absences. When he attends sessions, he agrees that it would be a good idea to improve his grades, but does not use any of the skills, tools, or coping strategies taught in session. Elijah's teachers report that he is absent to class most days of a school week, and when he attends class he does not participate or engage in lessons, even with individual prompting from the teacher or support staff. Elijah is often eating, taking his phone out/watching videos, and talking to peers during class. According to teachers, Elijah ignores and refuses his accommodations, and does not ask for help. Even with one-to-one support, Elijah refuses to complete assignments and is missing most of his assignments. On his last progress report, he had all 'Fails' except for Art class. Socially, Elijah has alienated himself from a friend group by teasing and putting peers down. Referrals to the school dean indicate that he has had on-going problems with truancies, exhibiting inconsiderate behavior, harassing a peer, using obscenity, and having problems with peer relationships.

Performance Area:

Social Emotional (continued)

Category:

Social Emotional

Assessment/Monitoring Process
Used:

Observation/Consultation

State/District Assessment Results:

N/A

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

Elijah has difficulty accepting responsibility for his behaviors. Due to Elijah's lack of motivation, oppositional behaviors, and acting-out behaviors he would benefit from further ERICS services.

Impact of the Disability: Elijah's Other Health Impairment (OHI) due to ADHD characteristics, as well as his social-emotional issues, affect his motivation, ability to use effective work habits, and ability to display socially-appropriate behaviors on a consistent basis.

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Date of Birth [22-DEC-2009]

Meeting Date [16-NOV-2022]

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: [OHI] [Other Health Impairment]

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

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

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Student
Last First MI

Date of Birth

Meeting Date

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

Eliyah will determine a central idea of an informational text and how it is presented through particular details with moderate support and prompting as measured by work samples in 3 out of 4 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:

Eliyah will determine a central idea of an informational text and how it is presented through particular details with maximum support and prompting as measured by work samples in 3 out of 4 trials with 60% accuracy.

Incremental objective #2 related to the goal:

Eliyah will determine a central idea of an informational text and how it is presented through particular details with maximum support and prompting as measured by work samples in 3 out of 4 trials with 70% accuracy.

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)

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Date of Birth

Meeting Date

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

With moderate teacher prompts (no more than 3) Eliyah can get positive attention from teacher, staff and peers by appropriately raising his hand and asking for clarification of task to complete task in parts and eventually complete assignment to earn preferred activity with 80% accuracy 4 consecutive weeks as measured by teacher observations.

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:

With maximum teacher prompts (no more than 5) Eliyah can get positive attention from teacher, staff and peers by appropriately raising his hand and asking for clarification of task to complete task in parts and eventually complete assignment to earn preferred activity with 60% accuracy 4 consecutive weeks as measured by teacher observations.

Incremental objective #2 related to the goal:

With maximum teacher prompts (no more than 4) Eliyah can get positive attention from teacher, staff and peers by appropriately raising his hand and asking for clarification of task to complete task in parts and eventually complete assignment to earn preferred activity with 70% accuracy 4 consecutive weeks as measured by teacher observations.

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"/>

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Meeting Date

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

With some guidance and support from peers and adults, Eliyah will develop and strengthen writing as needed by planning, revising, editing, rewriting, or trying a new approach, focusing on how well audience and purpose have been addressed with moderate prompting (e.g. graphic organizers, sentence starters) as measured by student work samples in 3 out of 4 trials with 75% 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:

With some guidance and support from peers and adults, Eliyah will develop and strengthen writing as needed by planning, revising, editing, rewriting, or trying a new approach, focusing on how well audience and purpose have been addressed with maximum prompting (e.g. graphic organizers, sentence starters) as measured by student work samples in 3 out of 4 trials with 65% accuracy.

Incremental objective #2 related to the goal:

With some guidance and support from peers and adults, Eliyah will develop and strengthen writing as needed by planning, revising, editing, rewriting, or trying a new approach, focusing on how well audience and purpose have been addressed with maximum prompting (e.g. graphic organizers, sentence starters) as measured by student work samples in 3 out of 4 trials with 70% accuracy.

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
 Last First MI

Date of Birth

Meeting Date

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

With moderate teacher prompts/support Eliyah will demonstrate self-advocacy through skills taught by the teacher (ex. raising the hand) by requesting for teacher prompts both visual and verbal for clarification on assignments when needed in 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:

With maximum teacher prompts/support Eliyah will demonstrate self-advocacy through skills taught by the teacher (ex. raising the hand) by requesting for teacher prompts both visual and verbal for clarification on assignments when needed in 5 trials with 40% accuracy.

Incremental objective #2 related to the goal:

With maximum teacher prompts/support Eliyah will demonstrate self-advocacy through skills taught by the teacher (ex. raising the hand) by requesting for teacher prompts both visual and verbal for clarification on assignments when needed in 5 trials with 60% accuracy.

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
 Last First MI

Date of Birth

Meeting Date

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

ELIYAH will apply goal setting skills (e.g., evaluating choices, monitoring progress, identifying obstacles, changing course of action) to increase academic or social success in 4 out of 5 trials per week with moderate adult support as measured by observations and review of records.

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:

ELIYAH will apply goal setting skills (e.g., evaluating choices, monitoring progress, identifying obstacles, changing course of action) to increase academic or social success in 2 out of 5 trials per week with maximum adult support as measured by observations and review of records.

Incremental objective #2 related to the goal:

ELIYAH will apply goal setting skills (e.g., evaluating choices, monitoring progress, identifying obstacles, changing course of action) to increase academic or social success in 3 out of 5 trials per week with maximum adult support as measured by observations and review of records.

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
 Last First MI

Date of Birth

Meeting Date

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

ZAFRANI ELIYAH will solve real-world and mathematical problems involving the four operations with rational numbers with moderate supports and accommodations as measured by work samples in 4 out of 5 trials with 70% 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:

ZAFRANI ELIYAH will solve real-world and mathematical problems involving the four operations with rational numbers with maximum prompts and supports as measured by work samples in 3 out of 4 trials with 60% accuracy.

Incremental objective #2 related to the goal:

ZAFRANI ELIYAH will solve real-world and mathematical problems involving the four operations with rational numbers with maximum prompting and accommodations as measured by work samples in 3 out of 4 trials with 70% accuracy.

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
Last

First

MI

Date of Birth

Meeting Date

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.

<p>Student will participate in Regular State and District Assessments. <i>(Designated Supports and/or Accommodations identified below are applicable)</i></p>	<p>CAASPP Subject ELA and Math</p>
--	---

Designated Supports:

- Test in a separate/smaller setting
- Read aloud by an adult in English (for math items and ELA items except for reading passages)
- Simplified or paraphrased test directions (non-embedded designated support)

Accommodations:

- Multiplication table for single digits 1-9 (paper-based; not allowed for Grade 3; non-embedded accommodation)
- Text-to-Speech software enabled for ELA reading passages (embedded accommodation).

<p>Student will participate in Regular State and District Assessments. <i>(Designated Supports and/or Accommodations identified below are applicable)</i></p>	<p>CAST Subject Science</p>
--	--

Designated Supports:

- Test in a separate/smaller setting (non-embedded support)
- Simplified Test Directions (non-embedded support)

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Last ZAFRANI

First ELIYAH

MI

Date of Birth 22-DEC-2009

Meeting Date 16-NOV-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:

All Pages

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.

Pandemic Learning Loss Consideration of Compensatory and/or Recoupment Services

Compensatory Education Consideration:

The IEP team has reviewed and discussed whether compensatory education is required due to the COVID-19 pandemic. The IEP team has determined:

- Student received all of their special education and related aids and services required by their IEP. Compensatory education is not required.
Student did not receive all of their special education and related aids and services required by their IEP. Compensatory education offer details are documented in FAPE 2- Summary of Services.
Student did not receive all of the special education and related aids and services required by their IEP. However, no compensatory education was warranted for the reasons documented by the IEP team in FAPE Part 2 Part 4.
Compensatory education consideration was documented on IEP dated

Recoupment Services 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 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 services are recommended.
Student experienced learning loss as a result of the school facility closures caused by the COVID-19 pandemic and recoupment services are necessary. The IEP team discussed recoupment services to address past learning loss. Recoupment services offer details are included in FAPE Part 2, Part 4 of the IEP (including completion of a service grid, as necessary).
Recoupment services 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 ZAFRANI ELIYAH MI Last First MI

Date of Birth 22-DEC-2009

Meeting Date 16-NOV-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 notifications to G Moran, G MORAN, and L. Hirsch.

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-NOV-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="Meital Zafrani"/>	<input type="text" value="Meital Zafrani"/>
Parent/Guardian	<input type="text" value="Efraim Zafrani"/>	<input type="text" value="Efraim Zafrani"/>
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="Lynda Hirsch"/>	<input type="text" value="Lynda Hirsch"/>
Special Education Teacher	<input type="text" value="Francis Padua"/>	<input type="text" value="Francis Padua"/>
General Education Teacher	<input type="text" value="Katherine Beck"/>	<input type="text" value="Katherine Beck"/>
School Psychologist	<input type="text"/>	<input type="text"/>
School Nurse	<input type="text" value="Haley Golshan"/>	<input type="text" value="Haley Golshan"/>
Related Service Staff <input type="text" value="ERICS"/>	<input type="text" value="Lesley Rouah"/>	<input type="text" value="Lesley Rouah"/>
Related Service Staff <input type="text" value="7th grade Counselor"/>	<input type="text" value="Dreena Castillo"/>	<input type="text" value="Dreena Castillo"/>
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 ZAFRANI
Last

ELIYAH
First

MI

Date of Birth 22-DEC-2009

Meeting Date 16-NOV-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 checked="" 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?

Yes 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.

Yes 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.

Eliyah needs a more restrictive learning environment and higher level of supports of an ED room to access the general education curriculum.

Step B. Can the supports, services, accommodations and/or modifications in the student's IEP be made available on a general education site in a special day program?

Yes 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.

Yes 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.

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>	

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 checked="" 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
 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"/>
Eligibility: (from Page 4)		Eligible (OHI)	
	Final IEP Reason Final IEP Effective Date:		
Curriculum		<input type="text" value="General Education"/>	<input type="text"/>
Placement	Type of School	<input type="text" value="District Non-Resident School"/>	<input type="text"/>
	Name of School	<input type="text" value="VISTA MS"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Instructional Setting	Setting	<input type="text" value="Special Education"/>	<input type="text"/>
	Program	<input type="text" value="ED"/>	<input type="text"/>
	Special Day Minutes/Wk	<input type="text" value="1391"/>	<input type="text"/>
	Addresses Goals	<input type="text" value="1(Reading),2(Written Language),4(Vocational Education),5(Behavioral Support),6(Social Emotional),3(Mathematics)"/>	<input type="text"/>
Additional Factors	Low Incident Support	<input type="text" value="None"/>	<input type="text"/>
	Assistive Technology Support	<input type="text" value="No"/>	<input type="text"/>
	Transportation	<input type="text" value="Home to School"/>	<input type="text"/>
	Extended School Year/Intersession	<input checked="" type="radio"/> Yes <input type="radio"/> No	
	Parent Counseling and Training (PCT)	<input checked="" type="radio"/> Yes <input type="radio"/> No	
	ESY Transportation	<input type="text" value="School to School"/>	
Accommodation, Modifications, Supports	Instructional Accommodations	<input type="text" value="Preferential seating in class(up front) near a peer model, reclarification, reteach, remove distractions, frequent checks for understanding, extra time to complete assignments, breaking assignments into smaller parts and allow for completion in parts, alternative measures of assessing, allow student to print rather than use Chromebook for most assignments (to limit access to games)"/>	<input type="text"/>
	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	
Assistive Technology Equipment	
Participation in General Education	PE, Elective

General education Art teacher reports: Elijah completed a project when he first enrolled in the class however he has not turned in anything since. He does not do any work in class and will not clean up his the supplies he uses in class. He has been disrespectful to the teacher and has 'made fun' of other students in the class who are students with disabilities. This impacted another student to report to their parent, who in turn reported this behavior to the school. Elijah does not follow school rules, including peer conflict, disrespect towards authority, tardies to classes, and uses his phone whenever he wants, The phone has become such a concern that parent has agreed to keep Elijah's phone at home moving forward. Elijah will be allowed to use an office phone as needed. Portola support staff has changed his classes (from more less restrictive to more), offered ongoing academic and emotional support/guidance including restorative justice practices however these have been unsuccessful to date (refer to social adjustment report/referrals). Team agrees Elijah needs a more restrictive learning environment at this time to access the ge curriculum. ERICS provider agrees , Elijah is not using any of the tools he is offered in ERICS counseling. Parent is frustrated as well. Elijah continues to fall farther behind academically.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student ZAFRANI

ELIYAH

MI

Date of Birth 22-DEC-2009

Meeting Date 16-NOV-2022

Last

First

FAPE Summary Grid

Program:	ED	Setting:	Special Education						
Eligibility:	Eligible (OHI)	Curriculum:	General Education						
Transportation:	Home to School	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
80	Psychological Services (ERICS)	Effective on Signature Date	Regular	Monthly	1-5	~	120	Social Emotional	--

Alternative Remote/Distance Learning Services During Emergency Conditions

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

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

	Teacher-posted lessons, asynchronous (online or other media)	Virtual class meetings, synchronous	Personalized learning tools (virtual or paper packets, as available)	Scheduled teacher appointments (virtual or in-person, as available)	Scheduled email check-ins (parent or student)	Virtual office hours (drop-in; parent or student)
Specialized Academic Instruction and Related Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Extended School Year Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Supplementary Aids and Services (provided in general education classes and other general ed environments)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" 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 **ZAFRANI** **ELIYAH** **MI** Date of Birth **22-DEC-2009** Meeting Date **16-NOV-2022**

The behavior impeding learning is: Describe what it looks like:
1 other argumentative with teacher/staff, excessive absences, shuts d

It impedes learning because: lack of work production disrupts other students requires instruction to stop
2 instructional time is lost negative interaction with peers
other aggression,non-compliant w/authority

The need for a Behavior Intervention Plan: early stage intervention moderate serious extreme

Frequency or intensity or duration of behavior: Frequency (x) Period Intensity Duration (min)

4 6 daily high 20
 Reported by teachers and staff and/or observed by teachers and staff

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: unmotivated, apathetic, doesn't have interest in school

Observation Analysis 6

What supports the student using the problem behavior? (What is missing in the environment/curriculum or what is in the environment/curriculum that needs changing?)

Present in the environment: 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

Intervention 7

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? teachers Who will monitor? teachers and staff Frequency daily

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 **ZAFRANI** **ELIYAH**
Last First MI

Date of Birth **22-DEC-2009** Meeting Date **16-NOV-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:

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?)

Eliyah can get positive attention from teacher, staff and peers by appropriately raising his hand and asking for clarification of task to complete task in parts and eventually complete assignment to earn preferred activity.

10

What teaching Strategies/Necessary Curriculum/Materials are needed?

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

Who will establish? Who will monitor? Frequency:

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: Preferred activity Describe: Other
- Positive phone calls or notes to home Certificate sent home Seating Location
- Tokens and Points: Tokens Points
- Privileges: Exempt assignment Extra test points

Other ideas:

Selection of reinforcer based on:

reinforcer for using replacement behavior reinforcer for general increase in positive behaviors

By whom? Frequency

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)

Prompt Eliyah to switch to the replacement behavior. Describe how staff should handle the problem behavior if it occurs again. Positive discussion with Eliyah after behavior ends. Discuss with Eliyah any necessary further classroom or school consequences.

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 ZAFRANI ELIYAH MI
Last First MI

Date of Birth 22-DEC-2009

Meeting Date 16-NOV-2022

OUTCOMES

PART IV

BEHAVIORAL GOALS

13 Behavioral Goal: Goal #: 5

With moderate teacher prompts (no more than 3) Eliyah can get positive attention from teacher, staff and peers by appropriately raising his hand and asking for clarification of task to complete task in parts and eventually complete assignment to earn preferred activity with 80% accuracy 4 consecutive weeks as measured by teacher observations.

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 Written notes
 Daily reports Daily charting Behavioral logs
 Weekly reports
 Other

Between? teachers and parent Frequency? weekly