

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Identification Number 200305X941 SSID

Eligible (AUT)

Student SHILON MILI MI
Last First MI

Date of Birth: 19-AUG-2019

Section A: Meeting Information

Pertinent Dates	Type of Meeting
Date of Initial IEP Team Meeting: 24-JAN-2023	<input checked="" type="radio"/> Initial <input type="radio"/> Amendment of IEP dated
Date of Present Meeting: 24-JAN-2023	<input type="radio"/> Annual Review <input type="radio"/> Early Start Transition
Annual Review to be conducted by: 24-JAN-2024	<input type="radio"/> Three Year Review <input type="radio"/> Expulsion Analysis
Next Three Year Review will be conducted by: 01-MAY-2024	<input type="radio"/> Other <input type="radio"/> Individual Transition Plan
Three Year Review or Evaluation was conducted on: 24-JAN-2023	
Transition to Kindergarten to be conducted by: 01-MAY-2024	
Location of Meeting: SP ED INF/PRE (1017)	District Name: Los Angeles Unified School Dis

Section B: Student Information

Date of Birth: 19-AUG-2019 Age: 3 Grade: -1

Gender: Male Female 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: 7155 ROYER AVE

City: WEST HILLS CA ZIP Code: 91307

Home Telephone: (747) 977-2300 Daytime Telephone: Emergency Telephone:

School of Attendance: Sp Ed Inf/Pre (1017) Location Code: 1017

School of Residence: Enadia Way Location Code: 3610

Name of Parent/Guardian: Meital & Henri Shilon 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:

Out of the home placement made by: Regional Center Superior Court Department of Mental Health Department of Children's Services 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)

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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

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"/>	n/a - initial IEP
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"/>

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Date of Birth 19-AUG-2019

Meeting Date 24-JAN-2023

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):

Health information for initial health assessment is gathered from interview with parent/guardian on 12/6/2022. Health Summary: Mother reports a normal pregnancy with no complications. Student was born full term and weighed 6.6 lbs. She was born healthy and was discharged home with her mother in good health. Developmental milestones as reported by parent: she crawled at 9 months, walked at 14 months, first words at 24 months. She is not toilet trained. Allergies: None known. Medication: None. On regular diet and able to chew and swallow food with no difficulty. Strengths: Student is in stable health with no history of serious illness, injury, accident, surgery and hospitalization. She is not taking any medication on a daily routine basis. She is alert, active and ambulatory. She eats a regular diet, is able to feed herself with fingers/utensils and can drink from a sippy cup. Mili passed her LAUSD audio and vision screening on 12/6/2022. Areas of Need: Health is not an area of need. Impact of Disability: Health does not affect student's participation, performance and access in the educational program. Accommodations/Modifications: None at this time. Fariba Akhiary, RN 12/6/2022 1/24/23 At the IEP meeting, mother added that Mili is a picky eater and eats only about 6 foods. RSperling

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: Sensorimotor

Category: Sensorimotor ▼

Assessment/Monitoring Process Used: clinical obs, parent interview, record review, SPM2-home

State/District Assessment Results: n/a

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

Student's areas of strengths: Mili exhibited fair muscle tone as she demonstrated functional strength with active range of motion to retrieve different play items from different levels, i.e. from a seated position or from the floor or when she carries an object across the room. She demonstrated the ability to maintain an upright posture when moving from sitting to standing. Mili demonstrated the ability to move within the classroom setting, walk across the school campus for assessment, etc. At this time, she presented with functional neuromuscular skills of postural control, stability, strength, endurance, and balance and equilibrium reactions to access an educational setting. She demonstrated some fine motor/visual perceptual skills to access an educational setting. For example a pincer grasp on a coin to insert into a bank and a 3 finger grasp on cube to make a tower. Mili has emerging visual motor skills for pre-writing skills, as she demonstrated an emerging tripod grasp on grasp to imitate a vertical line and circular scribble. She is presenting some self-help skills needed to access an educational setting. Mili can help put away toys, hold a squeezey drink to bring to mouth, etc During assessment, Mili demonstrated functional motor planning skills for 1 step concrete fine motor tasks. She participates in some sensory experiences, such as tactile (theraputty), she was not fearful to walk up/down steps to assessment room (vestibular), and she did not handle objects/materials with too much pressure (proprioception), etc.

Student's areas of need: Mili demonstrated overall differences in sensory processing as she scored in the Moderate Difficulties range for the SPM-2 School form and Severe Difficulties range for the Home form for Sensory Total. She is known to seek input such as use of pacifier to maintain organization and would need alternatives within a school setting. She can be fidgety while seated and may require the alternative to stand for tabletop tasks. Mili can be under-responsive to proprioceptive input (body awareness) as she would bump into furniture.

Performance Area: Sensorimotor

Category: Sensorimotor ▼

Assessment/Monitoring Process Used: continued...SPM-2 school form, and referenced HELP

State/District Assessment Results: n/a

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

Mili's arousal level and engagement can fluctuate as she is self-directed and object focused for preferred activities. She required moderate verbal and visual cues to engage in adult directed concrete 1 step tasks and does not sustain a sitting position to complete a task. She will also refuse to participate in an adult directed task by ignoring request and/or throws object. She may benefit from intense vestibular and proprioceptive input to improve organization as she has limited motor planning skills for adult directed tasks. Sensory strategies to be considered to improve access and participation within a school setting.

Impact of student's disability on academic and overall performance: Mili demonstrates differences in sensory processing that can affect motor planning that may impact her ability to be involved and progress in the general education curriculum.

Catherine Torres, OTR/L
LAUSD School Occupational Therapist

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Section E: Present Level of Performance

Performance Area:

Communication

Category:

Communication

Assessment/Monitoring Process
Used:

play-based language assessment, clinical observation, parent interview

State/District Assessment Results:

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

Background: Mili, a 3 year 3-month-old girl was referred to LAUSD for an initial speech and language evaluation by parent and her preschool teacher and director due to concerns regarding Mili's speech and language as she has a limited vocabulary and needs assistance in communicating her wants and needs.

Areas of Strength: Mili was able to identify some common objects, gives toys on request, understands prepositions 'in' and 'on', follows simple/routine one-step directions, and locates familiar objects in and response to 'where' question (e.g., baby doll). She was also able to identify actions in pictures and exhibits emerging skills in identifying object function. Mili was able to identify body parts (e.g., eyes, nose, hands, feet). Mili communicated using vocalizations, gestures, words/word approximations, jargon, pointing and physical manipulation (e.g., pulling). Mother reports she has approximately 10+ words in her expressive vocabulary and that she predominantly utilizes one-word utterances. She does use some learned phrases such as 'I love you' and 'thank you'. Mili's pre-communication behaviors included limited joint attention as everything was on her own terms, understanding of cause and effect, goal directed behavior and intent to communicate on her own terms. She did demonstrate non-verbal turn taking with mother's lead and prompting. She was able to label limited objects and pictures utilizing word approximations and would follow some models to label items. She labeled some body parts (e.g., eyes, mouth, ears) in Hebrew and two colors [blue and orange] one in Hebrew and one in English. , Mili's mother reports that she will request typically by pulling and pointing and will also utilize some word approximations such as 'to drink' in Hebrew [itot/lishtot]. In order to call attention, Mili will call for her mother in Hebrew ['ima'] or use physical manipulation (e.g., pulling).

--continued below

Performance Area:

Communication continued

Category:

Communication

Assessment/Monitoring Process
Used:

State/District Assessment Results:

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

Areas of Need: She is not yet able to follow two-step related commands, is not yet identifying colors or shapes and did not show identification of clothing items during the assessment; however, mother reports that she does know some clothing items. She inconsistently responded to her name being called and also required prompting to attend when her name was called. She is not yet able to count and is not yet able to state her name, age or gender. At this time, Mili does not demonstrate the ability to label a variety of objects or pictures and does not ask or answer simple wh-questions (e.g., what, what doing, where). Mili was extremely self-directed and exhibited minimal joint attention throughout the entire assessment as everything was on her own terms. During the assessment, she did not exhibit interactive play. She did exhibit functional pretend play skills; however, they were repetitive in nature and was also guided by adults [e.g., mother and assessors]. Additionally, Mili was observed to be rigid and let her mother enter her play limitedly. Per parent report, Mili has sensory sensitivities such as sensitive to loud noises, prefers to be barefoot, tactically defensive when mother tries to brush and do her hair, will not eat wet foods and is very sensitive to smells. She also has extreme fascinations with escalators, turning lights off, and lines up toys and puzzle pieces. Mother additionally states that Mili is not aware of common dangers and will pull her own hair at times when upset. She was also observed to jump up and down when excited or upset. Furthermore, Mili predominantly demonstrated fleeting and brief eye contact with some instances of avoiding eye contact throughout the assessment.

Impact of Disability on Academic and Overall Educational Performance: Based on clinical observation, play-based language assessments, standardized language assessment and parental interview, Mili presents with difficulties in the areas of receptive, expressive and pragmatic language. Language and speech support are warranted at this time.

--Natalie Rubinstein, M.A., CCC-SLP
Speech-Language Pathologist

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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):

Overall, Mili's current functioning in cognition/general ability is estimated to be in the well below average range based on performance on the MSEL and information gathered via observation and interview on the DP3. It is important to notes that Mili was self-directed, had limited joint attention and difficulty following directions given.

Mili's profile as examined on the MSEL reflects relative strengths in visual reception, fine motor and receptive language skills. She was able to discriminate forms on a form board, match and sort objects, nest cups, stack blocks as well as places pennies in a slot, screw and unscrew a nut and bolt and string three beads.

Areas of need/challenge were identified in receptive language, expressive language, visual reception and fine motor skills. She struggled with all aspects of the MSEL. She had difficulty with matching shape and pictures, imitating block designs, copying pre-writing strokes, responding to her name (consistently), naming and labeling a variety of objects and pictures.

Educational Impact: A general ability/cognition impact was identified 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):

Overall, Mili's current functioning in school readiness is developing not 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).

Mili demonstrates relative strengths in pre-writing skills. As reported by parent and observed during assessment experiment with her grasp on a crayon and scribbles on a page. Splinter skills for recognizing body parts and distinguishing at least three shapes on a puzzle are noted.

Areas of need/challenge were identified in general fund of information, pre-mathematic, pre-reading skills.

Educational Impact: An academic performance/school readiness impact was identified at this time. Mili's school readiness skills are not developing as expected given her limited school experience

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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):

Based on observations, informal interviews and the parent's responses on formal rating scales, Mili evidences the following relative strengths: Parent's responses on the Developmental Profile 3 (DP 3), indicate that Mili finds an object from spoken instructions, keeps busy and content for at least 15 minutes doing something independently, knows what 'my' means and responds more readily to the instructions and commands of a familiar adult. During the assessment session she showed that back and forth play skills appear to be emerging. It is noted with much redirection, encouragement, prompting, and modeling, Mili was able to perform some tasks presented by the examiners and parent. Mili's pretend play skills are functional but were very repetitive in nature.

Mili evidences the following needs/challenges: She demonstrates difficulty sustaining attention, limited social awareness, limited safety awareness, and play skills. Parent and teacher responses on the BASC-3, resulted in clinically significant behaviors for Withdrawal and Functional Communication scales. Social Skills were consistently At-Risk. Overall, concerns are also seen in her Attention, Adaptability and Depression. Parent and teacher responses on the Autism Spectrum Rating Scale (ASRS) indicate that Mili is exhibiting many of the associated features characteristic of Autism Spectrum Disorder. Throughout the assessment session, Mili was self-directed, rigid in play as well as showing difficulty with transitions and following directions. She required excessive prompting, redirection, and encouragement to attend to, comply with, and participate in structured activities. Mili was inconsistent in responding to her name. Her eye contact was fleeting and brief. She was also noted to avoid eye contact at times as well. Mili jumps up and down, when excited and upset. Throughout the assessment session, Mili needed prompts and cues to respond to social overtures. Based on overall testing results autistic-like characteristics are noted for Mili.

Educational Impact: A social emotional impact was identified at this time, which affects Mili's ability to access the preschool curriculum.

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):

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

Based on observations, informal interviews and the rater's responses on formal rating scales, Mili evidences the following strengths: She uses a spoon without help and very little spilling, uses a fork for eating solid foods independently and correctly puts 3 things away and takes off a pullover T-shirt without help.

Mili evidences the following needs/challenges: she struggles to remove shoes or socks without help, drinks from a child-sized cup without assistance, undo at least two fasteners (e.g. snaps, Velcro), put on shoes (not necessarily on the right foot) or urinate in the toilet without adult assistance. Parent and school report a food aversion as she doesn't really eat just drinks bottles and sucks her pacifier. The Composite VABS-3 score for parent and teacher indicate delays in her adaptive behaviors in the home and community.

Educational Impact: A self-help/adaptive behavior impact was 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- 5 days 8:00-3:00

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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 Last First MI

Date of Birth

Meeting Date

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

When given a classroom task Mili will continue to work until completion, requesting/signaling for help or a break when needed, on 4 out of 5 occasions during a school day.

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 a classroom task with teacher guidance, Mili will continue to work for 3 minutes at a time, requesting/signaling for help or a break when needed, on 3 out of 5 occasions during a school day.

Incremental objective #2 related to the goal:

When given a classroom task with teacher guidance, Mili will continue to work for 5 minutes at a time, requesting/signaling for help or a break when needed, on 3 out of 5 occasions during a school day.

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"/>

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Date of Birth

Meeting Date

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

With adult prompts, Mili will use comparative words related to number, size, shape, color, or texture, when describing an object or event in the classroom on at least 3 occasions during a school day.

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 adult prompts, Mili will identify items based on size, shape, or color, (Get the big bear, Which crayon is red?, Point to the circle, etc.) on at least 3 occasions during a school day.

Incremental objective #2 related to the goal:

With adult prompts, Mili will use size, shape, and color words to describe a classroom object on at least 3 occasions during a school day.

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"/>

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Meeting Date 24-JAN-2023

Section G: Annual Goals and Objectives

Performance Area: Language Devel Category: Language Developme Annual Goal #: 3

Mili will join in (e.g., gestures, word approximations, words) nursery rhymes, songs, and fingerplays, on 4 occasions, 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:

Mili will identify and discriminate familiar sounds when adult sings a song or reads a story (e.g., associates the sound 'beep beep beep' with the horn on the bus), on 4 occasions, during a school week.

Incremental objective #2 related to the goal:

Mili will imitate words and gestures in familiar nursery rhymes, songs, and fingerplays, on 4 occasions, during a school week.

Date to be achieved: May 2023 MO/YR

Date to be achieved: Septembe 2023 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
 Last First MI

Date of Birth

Meeting Date

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

Mili will play alongside another child, with at least 3 interactions (sharing toys/materials, taking turns, verbal exchanges, etc.), for at least 5 minutes, on 4 occasions during a school day.

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:

Mili will play alongside another child, with at least 1 interaction (sharing toys/materials, taking turns, verbal exchanges, etc.), with adult support, for at least 5 minutes, on 4 occasions during a school day.

Incremental objective #2 related to the goal:

Mili will play alongside another child, with at least 2 interactions (sharing toys/materials, taking turns, verbal exchanges, etc.), with adult support, for at least 5 minutes, on 4 occasions during a school day.

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 SHILON MILI MI
Last First MI

Date of Birth 19-AUG-2019

Meeting Date 24-JAN-2023

Section G: Annual Goals and Objectives

Performance Area: Sensorimotor Category: Praxis Annual Goal #: 5

With the use of sensory strategies for improved sensory processing and motor planning, Mili will initiate, sequence and complete a 2- step adult - directed task (cut/paste, color/cut, etc) with 70% accuracy, when given minimal tactile prompts and verbal 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
- progress report
- Criterion Referenced
- Work Samples
- Curriculum Based
- Informal

Incremental objective #1 related to the goal:

With the use of sensory strategies for improved sensory processing and motor planning, Mili will initiate, sequence and complete a 2- step adult - directed task (cut/paste, color/cut, etc) with 50% accuracy, when given moderate tactile prompts and verbal cues.

Incremental objective #2 related to the goal:

With the use of sensory strategies for improved sensory processing and motor planning, Mili will initiate, sequence and complete a 2- step adult - directed task (cut/paste, color/cut, etc) with 60% accuracy, when given minimal tactile prompts and verbal cues.

Date to be achieved: May 2023 MO/YR

Date to be achieved: Septembe 2023 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 SHILON MILI MI
Last First MI

Date of Birth 19-AUG-2019

Meeting Date 24-JAN-2023

Section G: Annual Goals and Objectives

Performance Area: Communication Category: Communication Annual Goal #: 6

Mili will utilize multi-modal communication including words, word approximations, pointing, gestures, signs, and/or picture support to label and request items, objects and pictures with 70% accuracy given moderate-minimal models and minimal verbal and visual prompts and 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:

Mili will utilize multi-modal communication including words, word approximations, pointing, gestures, signs, and/or picture support to label and request items, objects and pictures with 50% accuracy given maximal models and maximal verbal and visual prompts and cues.

Incremental objective #2 related to the goal:

Mili will utilize multi-modal communication including words, word approximations, pointing, gestures, signs, and/or picture support to label and request items, objects and pictures with 60% accuracy given moderate models and moderate verbal and visual prompts and cues.

Date to be achieved: May 2023 MO/YR

Date to be achieved: September 2023 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:	2nd Reporting Period Date:	3rd Reporting Period Date:	4th Reporting Period (Secondary Only) Date:	Goal Achievement
Progress Mark:	Progress Mark:	Progress Mark:	Progress Mark:	Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No
Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please explain:

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

SHILON

MILI

Last

First

MI

Date of Birth

19-AUG-2019

Meeting Date

24-JAN-2023

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:

- Alternative response mode
- Functional positioning
- Visual support

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student SHILON MILI MI Last First MI

Date of Birth 19-AUG-2019

Meeting Date 24-JAN-2023

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 SHILON MILI MI Last First MI

Date of Birth 19-AUG-2019

Meeting Date 24-JAN-2023

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 Other, Email, Email notifications to R. Sperling on 06-DEC-2022, 12-DEC-2022, and 24-JAN-2023.

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 22-FEB-2023

- 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 15-FEB-2023

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 Shilon (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="Romy Sperling"/>	<input type="text" value="Romy Sperling"/>
Special Education Teacher	<input type="text" value="Joanne Cho"/>	<input type="text" value="Joanne Cho"/>
General Education Teacher	<input type="text" value="Dawn Brannon"/>	<input type="text" value="Dawn Brannon"/>
School Psychologist	<input type="text" value="Tanyka Nelson-Robinson"/>	<input type="text" value="Tanyka Nelson-Robinson"/>
School Nurse	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text" value="Language and Speech"/>	<input type="text" value="Natalie Rubinstein"/>	<input type="text" value="Natalie Rubinstein"/>
Related Service Staff <input type="text" value="Occupational Therapy"/>	<input type="text" value="Alfred Paul Debler MA, OTR/L"/>	<input type="text" value="Alfred Debler"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Interpreter	<input type="text" value="Mendy Cohen (via Zoom)"/>	<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="Pvt. School Director"/>	<input type="text" value="Valerie Segall (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"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Reconvened Meeting Date

07-FEB-2023

Student SHILON MILI MI
Last First MI

Date of Birth 19-AUG-2019

Meeting Date 24-JAN-2023

Section R: Names and Signatures (Signatures on File)

Team Member	Print Name	Signature
Parent/Guardian	Meital Shilon (via Zoom)	
Parent/Guardian		
Student Age 18 - 21 years		
Student Under Age 18 years		
Surrogate Parent		
Foster Parent		
Family Foster Home Provider		
Administrator		
Administrative Designee	Romy Sperling	<i>Romy Sperling</i>
Special Education Teacher	Joanne Cho	Joanne Cho
General Education Teacher	Diana Bocanegra	<i>Diana Bocanegra</i>
School Psychologist	Tanyka Nelson-Robinson	Tanyka Nelson-Robinson
School Nurse		
Related Service Staff		
Related Service Staff Language and Speech	Natalie Rubinstein	Natalie Rubinstein
Related Service Staff Occupational Therapy	Alfred Paul Debler MA, OTR/L	Alfred Debler
Interpreter		
Sign Language Interpreter		
Agency Representative		
Agency Representative		
Agency Representative		
Other Executive Dir.- Ilan Ramon Day School	Kimberley Freund (via Zoom)	
Other Early Childhood Dir. - Ilan Ramon Day S	Valerie Segall (via Zoom)	
Other		
Other		

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student SHILON MILI MI Last First MI

Date of Birth 19-AUG-2019

Meeting Date 24-JAN-2023

LEAST RESTRICTIVE ENVIRONMENT ANALYSIS

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

Student's Current Placement Type:

Form with radio buttons for placement types: General Education Class, Special Day Program, Home/Hospital, etc.

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.

Step A: Can the supports, services, accommodations and/or modifications in the student's IEP be made available in a general education classroom/setting? Includes Yes/No options and a text box for justification.

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? Includes Yes/No options and a text box for justification.

Student
Last First MI

Date of Birth

Meeting Date

ANNUAL LEAST RESTRICTIVE ENVIRONMENT ANALYSIS (Continued)

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

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

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

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

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student SHILON
Last

MILI
First

MI

Date of Birth 19-AUG-2019

Meeting Date 24-JAN-2023

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" value="22-FEB-2023"/>	<input type="text" value="14-AUG-2023"/>
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="District Non-Resident School"/>	<input type="text" value="District Non-Resident School"/>
	Name of School	<input type="text" value="LOCKHURST DR CEL"/>	<input type="text" value="LOCKHURST DR CEL"/>
Instructional Setting	Setting	<input type="text" value="Special Education"/>	<input type="text" value="General Education"/>
	Program	<input type="text" value="PAL"/>	<input type="text" value="UTK/CC"/>
	Special Day Minutes/Wk	<input type="text" value="1350"/>	<input type="text"/>
	Addresses Goals	<input type="text" value="1(Social Emotional),2(Cognitive Devel),3(Language Devel),4(Social Emotional),5(Sensorimotor),6(Communication)"/>	<input type="text" value="1(Social Emotional),2(Cognitive Devel),3(Language Devel),4(Social Emotional),5(Sensorimotor),6(Communication)"/>
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="Home to School"/>	<input type="text" value="Home to School"/>
	Extended School Year/Intersession	<input checked="" type="radio"/> Yes <input type="radio"/> No	
Parent Counseling and Training (PCT)	Parent Counseling and Training (PCT)	<input checked="" type="radio"/> Yes <input type="radio"/> No	
	ESY Transportation	<input type="text" value="Home to School"/>	
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**

--

**Assistive Technology
Equipment**

--

**Participation in
General Education**

--

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

		Effective With This IEP	Future Changes Related To This IEP
Service 1	Start Date:	Effective on Signature Date 22-FEB-2023	
16	End Date:		
Occupational Therapy	Service applies to:	Regular	
	Frequency:	1-5	
This service addresses the following goals:	Interval:	Weekly	
<input type="text" value="5(Sensorimotor)"/>	Minutes/Interval:	30	
	Minutes/Interval (Pullout from Gen Ed):	0	
	Service Delivery Model:	Direct Service (Collaborative)*	
	Responsible Personnel:	Licensed/Credentialed Provider	
		Special Education Teacher	
		Other Provider(s)	
		*	
Service 2	Start Date:	Effective with Future Changes 22-FEB-2023	14-AUG-2023
10	End Date:		
Language/Speech	Service applies to:		Regular
	Frequency:		10-40
This service addresses the following goals:	Interval:		Yearly

6(Communication)	Minutes/Interval:	900
	Minutes/Interval (Pullout from Gen Ed):	0
	Service Delivery Model:	Direct Service (Collaborative)**
	Area:	School-Based
	Responsible Personnel:	Licensed/Credentialed Provider
		Special Education Teacher
		General Education Teacher

**

Service 3	Start Date:	Effective on Signature Date 22-FEB-2023
16	End Date:	
Occupational Therapy	Service applies to:	ESY
	Frequency:	1-5
This service addresses the following goals:	Interval:	Yearly

5(Sensorimotor)	Minutes/Interval:	60
	Minutes/Interval (Pullout from Gen Ed):	0
	Service Delivery Model:	Direct Service (Collaborative)*
	Responsible Personnel:	Licensed/Credentialed Provider
		Special Education Teacher
		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

85

Part 4 - Compensatory Education/Recoupment Services Discussion

n/a - initial preschool IEP

Part 4 - Additional Discussion (This section is optional)

FAPE OFFER FOR THE REMAINDER OF THE 22-23 SCHOOL YEAR (INCLUDING ESY):

A range of program options was discussed. Based upon Mili's current needs, the IEP team recommends a Preschool for All Learners classroom (PAL). The PAL is an educationally-based specialized program that operates 4 hours and 30 minutes 5 days a week. The preschool curriculum is delivered through evidenced-based practices. Mili's goals, included in the IEP, will be supported by a multidisciplinary on-site team comprised of an early childhood special education teacher, district special education assistants, and a speech-language pathologist. The Speech Language Pathologist will provide 2 hours of support in the classroom each week.

FAPE OFFER FOR THE 23-24 SCHOOL YEAR:

Based on Mili's needs, the IEP team recommends the Universal Transition Kindergarten (UTK) and Collaborative Class (CC). The UTK/CC is an educationally based inclusive program that operates 6 hours a day, 5 days a week. The preschool curriculum is delivered through evidence-based practices. For the 2023-2024 school year, students must be born on or in between September 2, 2018 - September 1, 2019.

Mili's goals, included in the IEP, will be supported by a collaborative team comprised of a credentialed teacher, an early childhood special education teacher, special education assistant, and a general education classroom assistant. If any additional related services are needed to access this program, they are noted above.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student SHILON MILI MI
Last First MI

Date of Birth 19-AUG-2019

Meeting Date 24-JAN-2023

FAPE Summary Grid

Program:	PAL	Setting:	Special Education
Eligibility:	Eligible (AUT)	Curriculum:	General Education
Transportation:	Home to School	Low Incident Support:	None
Date District Received	22-Feb-2023		
Parent Signature:			

Service Code	Service Desc	Start Date	Service Applies To	Interval	Frequency	Area	Total Minutes	Addresses Goal(s)	No Consent
10	Language/Speech	Effective with Future Changes 14-Aug-2023	Regular	Yearly	10-40	School-Based	900	Communication	--
16	Occupational Therapy	Effective on Signature Date	Regular	Weekly	1-5	~	30	Sensorimotor	--
16	Occupational Therapy	Effective on Signature Date	ESY	Yearly	1-5	~	60	Sensorimotor	--

Alternative Remote/Distance Learning Services During Emergency Conditions

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

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

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

Los Angeles Unified School District

Attachment B

Student: Date
of
Birth: Meeting
Date:

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

Complete Step 1a or 1b

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

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

Step 1b. Interventions Not Applicable

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

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

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

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

- A.** Student has received an assessment by a school psychologist that gives an indication of where the student's general ability lies. (if a language impairment is suspected)
- OR**
- B.** A Psychological Assessment is not required if the suspected area of disability is voice, fluency or articulation.
- Student has received a health assessment that rules out whether an inability to communicate effectively is a result of a health or sensory condition.
- A credentialed or licensed speech therapist has conducted a comprehensive evaluation, including assessment in the student's primary language, that consists of multiple measures of assessment, including but not limited to standardized test instruments (or alternate forms of assessment if necessary), formal speech/language sample, parent interview or checklist, teacher interview or checklist, and observation in various communication settings.

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

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

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

