

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Identification Number

200136X909

SSID

4299674894

Eligible (AUT)

Student

TAL

Last

ANAELLE

First

Y

MI

Date of Birth:

29-JAN-2017

Section A: Meeting Information

Pertinent Dates

Type of Meeting

Date of Initial IEP Team Meeting

16-DEC-2019

Date of Present Meeting

01-JUN-2023

Annual Review to be conducted by

20-MAR-2024

Next Three Year Review will be conducted by

15-MAY-2025

Three Year Review or Evaluation was conducted on

16-MAY-2022

Transition to Kindergarten to be conducted by

Initial

Amendment of IEP dated

20-MAR-2023

Annual Review

Early Start Transition

Three Year Review

Expulsion Analysis

Other

Individual Transition Plan

Location of Meeting

District Name

Los Angeles Unified School Distri

Section B: Student Information

Date of Birth

29-JAN-2017

Age

6

Grade

0

Gender

Male  Female

Ethnic Code

Decline to State

Location of the Psych Folder

SUPPORT UNIT NORT

Student has no Psych Folder

Location of the Cum Folder

LEMAY ST EL

Student has no Cum Folder

Home Language

English

Student Language

English

Alternate Mode of Communication

Home Address of Student

5303 YARMOUTH AVE APT 114

City

ENCINO

CA

ZIP Code

91316

Home Telephone

(818) 605-7196

Daytime Telephone

Emergency Telephone

School of Attendance

Lemay St El

Location Code

4849

School of Residence

Nestle Ave Charter

Location Code

5452

Name of Parent/Guardian

Telephone

Address

City

CA

ZIP Code

Surogate Parent

Telephone

Attends CURRENT SCHOOL as a result of one of the following

Special Education Placement

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: TAL First: ANAELLE MI: Y Date of Birth: 29-JAN-2017

Section C: Language Acquisition

Language Classification: English Only 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 Social Emotional	<input type="radio"/>	<input checked="" type="radio"/>	Still working on cooperative play for 15 minutes.
Category: Social Emotional			
Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	Needs more time.
Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	Needs more time.
2 Cognitive	<input type="radio"/>	<input checked="" type="radio"/>	Still working to solve problems.
Category: Cognitive Development			
Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	Needs more time.
Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	Needs more time.
3 Pragmatic Language	<input checked="" type="radio"/>	<input type="radio"/>	
Category: Language – Pragmatics			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
4 Language	<input checked="" type="radio"/>	<input type="radio"/>	
Category: Language – Expressive			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
5 Literacy	<input checked="" type="radio"/>	<input type="radio"/>	
Category: Literacy Development			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
6 Mathematics	<input type="radio"/>	<input checked="" type="radio"/>	Still working to count objects to 20.
Category: Math			
Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	Needs more time.
Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	Needs more time.
7	<input type="radio"/>	<input type="radio"/>	
Category:			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	
8	<input type="radio"/>	<input type="radio"/>	
Category:			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	
9	<input type="radio"/>	<input type="radio"/>	
Category:			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	
10	<input type="radio"/>	<input type="radio"/>	
Category:			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	

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Student TAL

ANAELLE

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Meeting Date 01-JUN-2023

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Section E: Present Level of Performance

Performance Area: Expressive Language/Pragmatic Language

Category: Language – Pragmatics

Assessment/Monitoring Process Used: Informal; Obs; Review of Record; Consultation; Prof Judgment

State/District Assessment Results: n/a

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

Service to Date: Anaelle is a 6 year 1 month old student who has been receiving Special Education services since his Initial IEP on December 16, 2019 under the eligibility of Autism (AUT). He is currently enrolled in the SLD (Specific Learning Disability) class at Lemay Elem since the beginning of 2022-2023 school year and is receiving 60 minutes a week of direct speech-language support to address his expressive language and pragmatic skills. Specifically, the therapy sessions have focused on Anaelle's ability to interact (e.g. elicit greetings, participate, share, take turns) with 1-2 peers in 8/10 opportunities with no more than 3 adult prompts in 3/4 sessions during a structured language activity. He has met his annual goal. The therapy sessions have also focused on Anaelle's ability to use 4-5 word utterances to express wants/needs/ideas and answer basic who, what and where questions in structured language activities in 8/10 trials with no more than 2 prompts/cues in 3/4 sessions. He has also met his annual goal.

Areas of Strength: Anaelle is a verbal student who demonstrates the ability to use 4-5 word utterances to express his wants, needs, and ideas with minimal verbal cues (ie 'I need a scissor.' 'I don't have a green crayon.' 'I need help please.'). He also demonstrates the ability to answer 'who,' 'what' and 'where' questions after listening to a short story using 4-5 word utterances with minimal-moderate verbal cues. During therapy sessions, Analle exhibits the ability to interact with 1-2 peers while participating in 1-2 verbal exchanges, elicit greetings, respond to a greeting/farewell, and share his ideas with minimal-moderate verbal cues. He also demonstrates the ability to produce 4-5 word utterances to respond to yes/no questions, to make comments about his surroundings, and to describe various objects using common attributes (ie colors, shapes, sizes) in simple sentences.

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):

Areas of Need: Despite steady progress, Anaelle continues to present delays in his ability to initiate and to maintain numerous verbal exchanges while interacting with his peers. With moderate verbal prompts, Anaelle is emerging in his ability to maintain 1-2 verbal exchanges especially when the interaction is initiated by a peer.

Impact of Disability on Educational Performance: Anaelle's disability of Autism is accompanied by a language disorder that affects his ability to communicate which impacts his involvement and progress in the general education curriculum.

Katherine Duque, M.S. CCC-SLP  
March 17, 2023

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

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Date of Birth

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01-JUN-2023

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Section E: Present Level of Performance

Performance Area:

Reading

Category:

Reading

Assessment/Monitoring Process Used:

Teacher Observations, Work Samples

State/District Assessment Results:

DIBELS

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

Strengths: According to the middle of the year (MOY) DIBELS reading assessment for the 2022-2023 school year administered virtually, Anaelle improved in his overall composite score of 297 to 344. Anaelle is able to identify all 26 letters both uppercase and lowercase and their corresponding sounds.

Areas of Need: Anaelle struggles to isolate the beginning, middle, and final sounds in words. In addition, he struggles to form a word when orally given the isolated sounds. Anaelle struggles to segment words orally. Anaelle also struggles recognizing Kindergarten CVC and sight words.

Impact of Disability: Anaelle's eligibility of Autism impairs his ability to isolate the beginning, middle, and final sounds in words, thus preventing him the ability to isolate and blend sounds in words. This impacts his involvement and progress in the general education curriculum.

Performance Area:

Category:

Assessment/Monitoring Process Used:

State/District Assessment Results:

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

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Section E: Present Level of Performance

Performance Area:

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):

Strengths: Anaelle is able to write his name. With minimal distractions and teacher prompting, Anaelle attempts to copy letters and words from a near point model. Anaelle is continuing to make progress in writing the shapes of letters to create words. Anaelle is also making progress in drawing shapes including a square, circle, and triangle. He enjoys following along during a teacher directed drawing.

Areas of Need: Anaelle has not mastered proper letter formation and spacing between letters and words. Anaelle struggles with writing letters and numbers on his own during a grade-level writing assignment. In almost all instances, adult support is needed for Anaelle to complete letter and word writing assignments.

Impact of Disability: Anaelle's eligibility of Autism impairs his ability to independently write letters and words which impacts his progress in the general education writing curriculum.

Performance Area:

Category:  ▼

Assessment/Monitoring Process Used:

State/District Assessment Results:

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

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Section E: Present Level of Performance

Performance Area:

Math

Category:

Math

Assessment/Monitoring Process Used:

Teacher Observations, Work Samples

State/District Assessment Results:

N/A

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

Strengths: During a group activity, Anaelle can verbally count aloud to 20 and follow along. With minimal distractions and adult support, Anaelle can count objects with one to one correspondence accurately up to 10. Anaelle can identify numbers 1-10. Anaelle is able to write numbers up to 10 independently.

Areas of Need: Anaelle struggles with proper number formation and spacing between numbers. Anaelle struggles to correctly count past 10. After 10 he says 14, 19, 15.... Anaelle has difficulty saying number names out of order when shown on a number chart. Anaelle is still working on counting up to 20 objects accurately.

Impact of Disability: Anaelle's eligibility of Autism impacts his ability to identify numbers and to count objects past 10 with one to one correspondence. This impacts his involvement and progress in the general education math 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):

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

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Last First MI

Section E: Present Level of Performance

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):

Strengths: Anaelle enjoys having leadership roles in the classroom such as the flag and weather monitor. Anaelle enjoys singing songs and doing activities that include movement. Anaelle also enjoys group games and outside play during recess, lunch, and PE. When focused and with teacher support, he is eager to learn and participates during phonics and counting lessons. When it is a preferred book, Anaelle enjoys being read aloud to. He enjoys and participates in art. Anaelle also enjoys sharing items he has created with legos, blocks, and playdough.

Areas of Need: Anaelle has difficulty expressing his emotions when he becomes upset or sad while completing classwork. At times, Anaelle will need an adult's assistance to help him calm down from crying or shouting. Anaelle is easily distracted which impacts his ability to complete his classwork. Redirection is often needed for Anaelle to complete his classwork including writing of numbers and letters. Anaelle is unable to follow multiple step instructions during class activities that includes coloring, cutting, and pasting. Anaelle needs adult support and prompting to complete simple tasks such as taking off his backpack, lining up with the class, walking in line with the class, and washing his hands.

Impact of Disability: Anaelle's eligibility of Autism impacts his ability to remain focused and complete his grade level assignments. This impacts his involvement and progress in the general education curriculum.

Performance Area:

Category:  ▼

Assessment/Monitoring Process Used:

State/District Assessment Results:

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

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Student    Date of Birth  Meeting Date

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First

MI

## Section E: Present Level of Performance

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):

Background: Anaelle is a 6 year 3 month old student who has been receiving Special Education services and support since his Initial IEP on December, 2019 under the Autism eligibility. He was referred for Language and Speech (LAS) evaluation by his mother and their advocate to determine if he requires an Augmentative/Alternative Communication (AAC) system to access his curriculum. AAC evaluation is an extension of assessment of receptive/expressive communication skills. Assessment of receptive/expressive communication skills is included as part of this assessment. Anaelle is currently receiving school-based speech services 60 minutes weekly during Regular school year and 160 minutes monthly during ESY to address 2 goals in the areas of pragmatic language and expressive language. Specifically, the therapy sessions have focused on Anaelle's ability to improve his pragmatic skills by initiating and maintaining 2-3 verbal exchanges with 1-2 peers with 80% accuracy with min verbal cues in 10 consecutive therapy sessions. He did not meet both his incremental and annual goals since the IEP was recently done and became active on March 24, 2023. The therapy sessions also focused on Anaelle's ability to answer 5 simple questions accurately in 80% accuracy in 3 out 5 trials with min verbal cues in 10 consecutive therapy sessions. He also did not meet both his incremental and annual goals.

Areas of Strength: Based on informal observation Anaelle's voice and fluency skills are not related to the suspected area of disability. Based on formal assessments, in the area of articulation, Anaelle exhibits the ability to produce /p, b, t, d, k, g, m, n, f, v, s, z, l, r, w, j, h/, -ing, sh, ch, and dz consistently at the word, phrase and sentence level. The only inconsistent errors were noted on his productions of voiced and voiceless th, although it did not impact his speech intelligibility. Overall, Anaelle's articulation skills are in the average range for a student his chronological age and gender. His speech is intelligible between 95-100% of the time when communicating, depending on how loud he is speaking.

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):

In the area of receptive language, Anaelle was able to recognize various nouns (e.g., house, fruit, animal), verbs (e.g., talking, riding, driving), and adjectives (e.g. small). He was able to indicate the antonym or opposite for items such as girl (boy), happy (sad), and hot (cold). Anaelle also demonstrated the ability to understand the following sentence structures: 1. Simple sentence with copula and predicate adjective or comparative (e.g., This dog is big); 2. Subject and verb in present or present progressive tense (e.g., The baby is drinking milk vs The baby is drinking milk from the bottle). In the area of expressive language, Anaelle is able to name a variety of pictures objects (teddy bear, cookie, fridge, fish, scissors, banana, spoon, elephant), combines three or four words in spontaneous speech, uses a variety of nouns (car, baby, horse, boy, girl, house), verbs (eat, sleep, run, drink, sit), modifiers (little, yellow) and uses present progressive ('She is eating'). Anaelle is able to produce simple sentences vocally in response to visuals typically ranging in 2-4 words in length ie 'Boy is running', 'There is the ball', 'She's eating a cookie'. Pragmatically, Anaelle uses fleeting but appropriate eye contact and enjoys interacting with familiar adults. With minimal verbal prompts, Anaelle is engaged in classroom and language and speech sessions and participates in activities verbally using simple phrases and sentences.

Areas of Need: Anaelle exhibited below age appropriate receptive and expressive language skills on both the standardized and informal assessments. He has a basic receptive vocabulary to identify things in pictures and to follow the routine of the classroom with some prompting. His knowledge is limited to basic concrete things found frequently in his immediate environment. Anaelle's limited verbal expression skills make it difficult for him to participate in oral language activities as well as to ask or answer simple questions.



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Student TAL ANAELLE Y Date of Birth 29-JAN-2017 Meeting Date 01-JUN-2023  
Last First MI

Section E: Present Level of Performance

Performance Area: AAC cont.  
Category: Language Function  
Assessment/Monitoring Process Used:  
State/District Assessment Results:

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

Anaelle's length and complexity of his sentences are not age appropriate. His utterances are usually simple and short that are often lacking age appropriate grammar and detail and frequently will respond with echolalia by repeating what the communicative partner has said instead of answering the question. Anaelle also displays frequent use of echolalia, repeating the last 3-5 words that are said to him, especially when there are no visuals, toys or objects to help him answer questions or tell what is happening.  
  
Impact of Disability: Anaelle's disability of Autism is accompanied by a language disorder that affects his ability to communicate which impacts his involvement and progress in the general education curriculum.  
  
Katherine Duque, M.S. CCC-SLP  
May 31, 2023

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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Los Angeles Unified School District

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Section E: Present Level of Performance

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):

Student's areas of strengths: Anaelle demonstrates functional skills in the areas of postural stability, range of motion, muscle strength and tone. He navigates within the school environment independently and accesses classroom furniture without difficulty. Student demonstrated functional visual spatial and scanning skills to safely navigate and maneuver around the school environment and avoid obstacles such as other students or classroom furniture. Anaelle utilizes a functional right quadropod grasp on utensils. He independently locates school tools and workspace with ease, organizes his desk appropriately when instructed to change writing utensils or put his belongings away, and attends to the boundaries and guidelines when completing coloring, writing, copying, tracing, and cutting tasks, displaying age-appropriate skills and behaviors. Further, Anaelle displays many functional prehension patterns and in-hand manipulation skills to complete a variety of fine motor tasks and he uses classroom tools properly. Anaelle scored within the Average range on the subtest of Fine Motor Integration of the BOT-2 standardized assessment. Per teacher interview and occupational therapy observations, Anaelle also demonstrates that his attention to task and ability to maintain postural stability for seated tasks is adequate in the school setting. Anaelle is independent in the self-help skills he is required to perform in school. Anaelle uses appropriate force when assembling manipulatives and during writing tasks. He does not display gravitational insecurity. He coordinates the use of both hands and tolerates textures commonly used in the school setting. Anaelle presents with functional sensory integration for school participation and access to his educational curriculum.

CONTINUED

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):

CONTINUED

Student's areas of needs: Anaelle has occupational therapy needs in the area of fine motor skills. On the BOT-2, Anaelle scored Below Average on the following subtests: Fine Motor Precision, Manual Dexterity, and Upper-Limb Coordination. Anaelle also scored Below Average in the composite scores of Fine Manual Control and Manual Coordination. This indicates that Anaelle could benefit from occupational therapy services in order to improve his visual motor skills.

Impact of disability on academic and overall performance: Student's disability of autism contributes to weaknesses in the areas of fine motor that affects their ability to use a functional grasp on classroom materials such as writing and coloring tools which impacts their involvement and progress in the general education curriculum.

Hadley Vargas, MSOT, OTR/L  
LAUSD Occupational Therapist

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

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Section E: Present Level of Performance

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):

Student's area of strength-

Teacher and parent responses on rating forms suggest inconsistent strengths and concerns across school, home and community settings. For the Social Competence Scale A- teacher rating resulted in an At-Risk SFL and a High-Risk SFL from parent. Additionally, parent and/or teacher responses resulted in an AT RISK/HIGH RISK rating for peer relations, self-management/compliance, and academic behavior. Responses for these sub scales contributed to the overall AT RISK/HIGH RISK for Social Competence. Variances between respondents may suggest Anaelle displays challenges that may impede socialization, or produce negative social outcomes more frequently in the classroom setting versus the home setting. Responses for Scale B Antisocial Scale resulted in an AVERAGE SFL from both respondents. This consistency between raters suggests that Anaelle does not exhibit any problem behaviors that would produce negative social outcomes in the school, community or home setting.

Despite an AT RISK/HIGH RISK SFL for Scale A, it is important to identify skills or actions identified by both respondents as observed at a higher frequency as emerging strength (if rated a 3). These skills/behaviors include: Makes appropriate transitions between different activities, listens to and carries out directions from parents or supervisors, follows family and community rules, asks for help in an appropriate manner, and controls temper when angry.

The Data suggest Anaelle is capable of demonstrating many of the positive group behaviors that are needed to participate successfully in structured cooperative recreation. Anaelle was observed to respect personal space of others, show interest in and awareness of peers while dancing on carpet in 20/20 of the recorded intervals.

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):

Student's area of needs-

Due to At Risk and High Risk ratings for Social Competence Scale, one or more of the subscale resulting in an At Risk or High Risk Social Functioning level, each line item was compared to identify a possible pattern or trends between home, school and community. Relative areas of concern in relation to Social Competence identified as low occurring skills by both respondents include: offers help to peers when needed, understands problems and needs of peers, invites peers to participate in activities, asks appropriately for clarification of instructions, and interacts with a wide variety of peers.

Impact of Disability-

Student's disability does not impact their involvement and progress in the general education curriculum for this performance area.

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Section F: Eligibility

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

[Empty text box for disability discussion]

For Initial IEP, interventions attempted prior to determining eligibility:

[Empty text box for interventions]

Eligible as a student with the disability of:

Code:

AUT

Autism

- Not Applicable,
- Blind or
- Partially Sighted

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

Code:

[Empty]

[Empty]

- Not Applicable,
- Blind or
- Partially Sighted

Does not meet eligibility criteria for Special Education Services (Initial IEP).

or

No Longer Eligible for Special Education Services (Review IEP).

No Longer Eligible (Effective Date):

[Empty date box]

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

Final IEP Reason:

[Empty reason box]

Final IEP Effective Date:

[Empty date box]

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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Section G: Annual Goals and Objectives

Performance Area:  Category:  Annual Goal #:

Anaelle will improve his pragmatic skills by initiating and maintaining 2-3 verbal exchanges with 1-2 peers with 80% accuracy with min verbal cues in 10 consecutive therapy sessions.

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:

will improve his pragmatic skills by initiating and maintaining 2-3 verbal exchanges with 1-2 peers with 80% accuracy with max verbal and visual cues in 10 consecutive therapy sessions.

Incremental objective #2 related to the goal:

will improve his pragmatic skills by initiating and maintaining 2-3 verbal exchanges with 1-2 peers with 80% accuracy with mod verbal cues in 10 consecutive therapy sessions.

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:							
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:							
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other		If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other		If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other		If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other		If "No" please explain: <input type="text"/>							

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Section G: Annual Goals and Objectives

Performance Area:  Category:  Annual Goal #:

Anaelle will identify and pronounce the initial, medial vowel, and final sounds (phonemes) in 5 three-phoneme (CVC) words with one teacher example as measured by observation in 3 out of 5 trials with 100% 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:

Anaelle will identify and pronounce the initial, medial vowel, and final sounds (phonemes) in 5 three-phoneme (CVC) words with one teacher example as measured by observation in 3 out of 5 trials with 80% accuracy.

Incremental objective #2 related to the goal:

Anaelle will identify and pronounce the initial, medial vowel, and final sounds (phonemes) in 5 three-phoneme (CVC) words with one teacher example as measured by observation in 3 out of 5 trials with 90% 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

EXPLANATION OF MARKS				Goal Achievement
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)	
Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	Date: <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"/>	Progress Mark: <input type="text"/> Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No If "No" please explain: <input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

Date of Birth

Meeting Date

Section G: Annual Goals and Objectives

Performance Area:  Category:  Annual Goal #:

When given letters, words, and sentences from a written model/dictation and maximum teacher prompting to stay focused, Anaelle will use correct letter formation and spacing with 70% accuracy in 4 out of 5 trials as measured by student writing samples.

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 letters, words, and sentences from a written model/dictation and maximum teacher prompting to stay focused, Anaelle will use correct letter formation and spacing with 50% accuracy in 4 out of 5 trials as measured by student writing samples.

Incremental objective #2 related to the goal:

When given letters, words, and sentences from a written model/dictation and maximum teacher prompting to stay focused, Anaelle will use correct letter formation and spacing with 60% accuracy in 4 out of 5 trials as measured by student writing samples.

Date to be achieved:   MO/YR

Date to be achieved:   MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

EXPLANATION OF MARKS				Goal Achievement
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)	
Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	Date: <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"/>	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 #:

When given 5 math problems, with maximum adult support, Anaelle will solve the problems and explain results using concrete objects and/or pictorial representations with 80% accuracy as measured by student work samples/teacher-charted 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:

When given 5 math problems, Anaelle will solve the problems and explain results using concrete objects and/or pictorial representations with 60% accuracy as measured by student work samples/teacher-charted observations.

Incremental objective #2 related to the goal:

When given 5 math problems, Anaelle will solve the problems and explain results using concrete objects and/or pictorial representations with 70% accuracy as measured by student work samples/teacher-charted 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

EXPLANATION OF MARKS				Goal Achievement
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)	
Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	
Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No
Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please explain: <input type="text"/>



INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

Date of Birth

Meeting Date

Section G: Annual Goals and Objectives

Performance Area:  Category:  Annual Goal #:

Anaelle will begin a non-preferred task/ activity with no more than two teacher prompts and 100% accuracy in 3 out of 5 trials.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

Anaelle will begin a non-preferred task/ activity with no more than two teacher prompts and 50% accuracy in 3 out of 4 trials.

Incremental objective #2 related to the goal:

Anaelle will begin a non-preferred task/ activity with no more than two teacher prompts and 60% accuracy in 3 out of 4 trials.

Date to be achieved:   MO/YR

Date to be achieved:   MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

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

1st Reporting Period	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"/> 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 #:

Anaelle will answer 5 simple questions accurately in 80% accuracy in 3 out 5 trials with min verbal cues in 10 consecutive therapy sessions.

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:

will answer 5 simple questions accurately in 80% accuracy in 3 out 5 trials with max verbal and visual cues in 10 consecutive therapy sessions.

Incremental objective #2 related to the goal:

will answer 5 simple questions accurately in 80% accuracy in 3 out 5 trials with mod verbal cues in 10 consecutive therapy sessions.

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 #:

Anaelle will follow novel two step directions with no more than 2 adult prompts in 3 out of 5 trials.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

Anaelle will follow novel two step directions with no more than 2 adult prompts in 3 out of 5 trials.

Incremental objective #2 related to the goal:

Anaelle will follow novel two step directions with no more than 2 adult prompts in 3 out of 5 trials.

Date to be achieved:   MO/YR

Date to be achieved:   MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

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

1st Reporting Period	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"/> 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 #:

In order to improve his visual motor skills, Anaelle will copy 2 lines of written work with proper sizing and spacing with minimum verbal/visual/tactile cues in 4 out of 5 trials.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

In order to improve his visual motor skills, Anaelle will copy 5 words with proper sizing and spacing with moderate verbal/visual/tactile cues in 2 out of 5 trials.

Incremental objective #2 related to the goal:

In order to improve his visual motor skills, Anaelle will copy 7 words with proper sizing and spacing with minimum verbal/visual/tactile cues in 3 out of 5 trials.

Date to be achieved:   MO/YR

Date to be achieved:   MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

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

1st Reporting Period	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 #:

During unstructured time Anaelle will sustain participation with peer for 5 minutes with prompts by adult as needed.

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:

During unstructured time Anaelle will sustain participation with peer for 3 minutes with prompts by adult as needed.

Incremental objective #2 related to the goal:

During unstructured time Anaelle will sustain participation with peer for 4 minutes with prompts by adult as needed.

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" value="06-JUN-2023"/>	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 checked="" 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 checked="" type="checkbox"/> Other <input type="text" value="New goal started 6/1/2023"/>	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

TAL

Last

ANAELLE

First

Y

MI

Date of Birth

29-JAN-2017

Meeting Date

01-JUN-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.

**No assessment tests found.**

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Last: TAL, First: ANAELLE, MI: Y

Date of Birth: 29-JAN-2017

Meeting Date: 01-JUN-2023

Section N: Procedural Safeguards and Follow-up Actions

- Checkboxes for: A Parent's Guide to Special Education Services... The IEP Team Meeting Introductory Statements... 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: [dropdown]

Is the parent/guardian requesting official translation? Yes No Select Preferred Language: Hebrew [dropdown]

Specify the Individual Pages to be translated: [text box]

Special Requests: [text box]

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:

- Checkboxes for: The IEP team has reviewed and discussed whether compensatory education is required due to the COVID-19 pandemic... Student received all of their special education... Student did not receive all of their special education... Student did not receive all of the special education... Compensatory education consideration was documented on IEP dated [dropdown]

Recoupment Services Consideration:

- Checkboxes for: The IEP team has reviewed and discussed student's progress/achievement... Student has made expected progress toward IEP goals... Student experienced learning loss as a result of the school facility closures... Recoupment services consideration was documented on IEP dated [dropdown]

- Radio buttons for: 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 Last: TAL, First: ANAELLE, MI: Y

Date of Birth: 29-JAN-2017

Meeting Date: 01-JUN-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. Row 1: Student, Alma Murillo, 22-MAY-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

Large empty text box for parent concerns and comments.

Signature(s) [ ] [ ] Date [ ]

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

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

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

Signature(s) [ ] [ ] Date 1-JUN-2023





**Parent IEP Experience Survey**  
***Encuesta sobre la experiencia de los padres en el IEP.***

Please take a moment to complete the survey below by scanning the QR code with your smart phone camera. You can also take the survey at this link:

*Por favor tómese un momento para completar la siguiente encuesta escaneando el código QR con la cámara de su teléfono inteligente. También puede realizar la encuesta en este enlace:*

**<http://lausd.PARENT-IEP-EXPERIENCE.alchemer.com/s3/>**

Please ask your school staff if in need of assistance.

*En caso que necesite asistencia, por favor solicitesela al personal de la escuela.*



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="Liya Tal"/>	<input type="text" value="Liya Tal"/>
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" value="Maya Schaeffer"/>	<input type="text" value="Maya Schaeffer"/>
Administrative Designee	<input type="text"/>	<input type="text"/>
Special Education Teacher	<input type="text" value="Dawn Rosenthal"/>	<input type="text" value="Dawn Rosenthal"/>
General Education Teacher	<input type="text" value="Lissette Mertell"/>	<input type="text" value="Lissette Mertell"/>
School Psychologist	<input type="text"/>	<input type="text"/>
School Nurse	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text" value="LAS"/>	<input type="text" value="Katherine Duque"/>	<input type="text" value="Katherine Duque"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Interpreter	<input type="text"/>	<input type="text"/>
Sign Language Interpreter	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Other <input type="text" value="Attorney"/>	<input type="text" value="Melissa Meira Amster"/>	<input type="text" value="Melissa Meira Amster"/>
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

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="Liya Tal"/>	<input type="text" value="Liya Tal"/>
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" value="Maya Schaeffer"/>	<input type="text" value="Maya Schaeffer"/>
Administrative Designee	<input type="text"/>	<input type="text"/>
Special Education Teacher	<input type="text" value="Dawn Rosenthal"/>	<input type="text" value="Dawn Rosenthal"/>
General Education Teacher	<input type="text" value="Lissette Mertell"/>	<input type="text" value="Lissette Mertell"/>
School Psychologist	<input type="text"/>	<input type="text"/>
School Nurse	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text" value="Speech and Language Therapist"/>	<input type="text" value="Katherine Duque"/>	<input type="text" value="Katherine Duque"/>
Related Service Staff <input type="text" value="Occupational Therapist"/>	<input type="text" value="Hadley Vargas"/>	<input type="text" value="Hadley Vargas"/>
Related Service Staff <input type="text" value="Recreational Therapist"/>	<input type="text" value="Elena Orellana"/>	<input type="text" value="Elena Orellana"/>
Interpreter	<input type="text"/>	<input type="text"/>
Sign Language Interpreter	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Other <input type="text" value="Attorney"/>	<input type="text" value="Melissa Meira Amster"/>	<input type="text" value="Melissa Meira Amster"/>
Other	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Last TAL

First ANAELLE

MI Y

Date of Birth 29-JAN-2017

Meeting Date 01-JUN-2023

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.

**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.

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

<b>Step C.</b>	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.

<b>Step D.</b>	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.

<b>Step E.</b>	Can the supports, services, accommodations and/or modifications in the student's IEP be made available in a residential care facility?	
	<input type="radio"/> Yes <input type="radio"/> No	If not currently available, articulate in the IEP what supports, accommodations and/or modifications are required for the student in this setting.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Last TAL

First ANAELLE

MI Y

Date of Birth 29-JAN-2017

Meeting Date 01-JUN-2023

ANNUAL LEAST RESTRICTIVE ENVIRONMENT ANALYSIS (Continued)

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

<b>Step F.</b>	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 checked="" type="checkbox"/>	Lack of opportunity for social interaction
	<input checked="" 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   Y   
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="02-JUN-2023"/>	<input type="text"/>
Eligibility: (from Page 4)		<b>Eligible (AUT)</b>	
	<i>Final IEP Reason</i> <i>Final IEP Effective Date:</i>		
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="LEMAY ST EL"/> <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="SLD"/>	<input type="text"/>
	Special Day Minutes/Wk	<input type="text" value="1595"/>	<input type="text"/>
	Addresses Goals	<input type="text" value="1(Pragmatic Language),2(Reading),3(Writing),4(Math),5(Behavior),7(Expressive Language),7(Behavior)"/>	<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="None"/>	<input type="text"/>
	Extended School Year/Intersession	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="text"/>
Parent Counseling and Training (PCT)	Parent Counseling and Training (PCT)	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="text"/>
	ESY Transportation	<input type="text" value="No"/>	<input type="text"/>
Accommodation, Modifications, Supports	Instructional Accommodations	<input type="text" value="Preferential seating, read aloud test questions, test at the most beneficial time of the day, redirection, small group instruction, allow completion in parts, check for understanding, model as needed, and noise reduction headphones and/or study carrel to block distractions as needed to assist with attention to work. Use of manipulatives and visual aids. Breaking down of assignments into more manageable tasks, praise and rewards, adult prompts and cues to assist student to maintain information and remain focused; exposure to picture icons to help supplement spoken language when communication breakdowns occur"/>	<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 type="radio"/> Yes <input checked="" type="radio"/> No	<input type="text"/>
	If the Parent does not agree, specify the area(s) to be reassessed.	<input type="text" value="full re-assessment at 3 year IEP"/>	<input type="text"/>
Comments, as appropriate			

<b>Low Incidence Equipment</b>	
<b>Assistive Technology Equipment</b>	
<b>Participation in General Education</b>	Anaelle will participate in the General Education setting for Recess, Lunch, Visual Arts, Music, Computer Lab, Library, Drama, and Physical Education.



# INDIVIDUALIZED EDUCATION PROGRAM (IEP)

IEP FAPE Part 2 - Summary of Services

Los Angeles Unified School District

Student Last TAL First ANAELLE MI Y

Date of Birth 29-JAN-2017

Meeting Date 01-JUN-2023

		Effective With This IEP	Future Changes Related To This IEP
<b>Service 1</b>	Start Date:	Effective on Signature Date 02-JUN-2023	
<b>10</b>	End Date:		
<b>Language/Speech</b>	Service applies to:	Regular	
	Frequency:	1-5	
This service addresses the following <b>goals</b> :	Interval:	Weekly	
1 (Pragmatic Language)	Minutes/Interval:	60	
7 (Expressive Language)	Minutes/Interval (Pullout from Gen Ed):	0	
	Service Delivery Model:	Direct Service (Collaborative)*	
	Area:	School-Based	
	Responsible Personnel:	Licensed/Credentialed Provider	
		Special Education Teacher	
		Other Provider(s)	
<b>Service 2</b>	Start Date:	Effective on Signature Date 02-JUN-2023	
<b>40</b>	End Date:		
<b>Recreation Therapy</b>	Service applies to:	Regular	
	Frequency:	1-5	
This service addresses the following <b>goals</b> :	Interval:	Monthly	

\*

8(Social Functioning)	Minutes/Interval:	60	
	Minutes/Interval (Pullout from Gen Ed):	30	
	Service Delivery Model:	Direct Service (Collaborative)*	
	Responsible Personnel:	Other Provider(s)	

<b>Service 3</b>	Start Date:	Effective on Signature Date 02-JUN-2023	
<b>16</b>	End Date:		
<b>Occupational Therapy</b>	Service applies to:	Regular	
	Frequency:	10-40	
This service addresses the following <b>goals</b> :	Interval:	Monthly	
6(Visual motor)	Minutes/Interval:	60	
	Minutes/Interval (Pullout from Gen Ed):	0	
	Service Delivery Model:	Direct Service (Collaborative)*	
	Responsible Personnel:	Licensed/Credentialed Provider	

**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	<input type="text" value="100"/>	

<b>Part 4 - Compensatory Education/Recoupment Services Discussion</b>
---

An FSA agreement, dated 08/15/21 is in place. Anaelle has been provided with compensatory and recoupment services through the agreement documented in the amendment IEP dated 09/15/21. Parents agree that there are no additional compensatory or recoupment services beyond the FSA agreement needed at this time.

## Part 4 - Additional Discussion (This section is optional)

The parent and attorney have requested assessments in the following areas: Recreational Therapy, Occupational Therapy, full Speech and Language re-evaluation including AAC.

We will be holding an amendment IEP meeting to discuss findings and recommendations.

6/1/23 - RT assessment findings were presented; RT services were not being recommended. However, during the course of the conversation, the IEP team discussed some additional concerns identified by the parent attorney, including student walking around at recess and lunch and having limited interactions with peer. RT referenced SLP goal and services are currently supporting initiating and sustaining an interaction with peers. Parent attorney requested a goal in the area of sustaining cooperative play or work for 5 minutes to be addressed RT. IEP team agreed to changing RT recommendations to include collaborative direct services.

**INDIVIDUALIZED EDUCATION PROGRAM (IEP)**

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student     
 Last First MI

Date of Birth  Meeting Date

**FAPE Summary Grid**

<b>Program:</b>	SLD		<b>Setting:</b>	Special Education					
<b>Eligibility:</b>	Eligible (AUT)		<b>Curriculum:</b>	General Education					
<b>Transportation:</b>	None		<b>Low Incident Support:</b>	None					
<b>Date District Received</b>	02-Jun-2023								
<b>Parent Signature:</b>									
Service Code	Service Desc	Start Date	Service Applies To	Interval	Frequency	Area	Total Minutes	Addresses Goal(s)	No Consent
10	Language/Speech	Effective on Signature Date		Weekly	1-5	School-Based	60	Pragmatic Language, Expressive Language	--
16	Occupational Therapy	Effective on Signature Date		Monthly	10-40	~	60	Visual motor	--
40	Recreation Therapy	Effective on Signature Date		Monthly	1-5	~	60	Social Functioning	--

**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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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.**