

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Identification Number 200016X881

SSID 2647140221

Eligible (SLD)

Student GOLDSTEIN
Last

NEIL
First

MI

Date of Birth: 07-JAN-2013

Section A: Meeting Information

Pertinent Dates	Type of Meeting
Date of Initial IEP Team Meeting: 06-JUN-2018	<input type="radio"/> Initial <input checked="" type="radio"/> Amendment of IEP dated 26-OCT-2023 <input type="radio"/> Annual Review <input type="radio"/> Three Year Review <input type="radio"/> Other <input type="radio"/> Early Start Transition <input type="radio"/> Expulsion Analysis <input type="radio"/> Individual Transition Plan
Date of Present Meeting: 02-MAY-2024	
Annual Review to be conducted by: 24-MAY-2024	
Next Three Year Review will be conducted by: 10-JUN-2024	
Three Year Review or Evaluation was conducted on: 11-JUN-2021	
Transition to Kindergarten to be conducted by:	
Location of Meeting: NESTLE AVE CHARTER	District Name: Los Angeles Unified School Distri

Section B: Student Information

Date of Birth: 07-JAN-2013	Age: 11	Grade: 5
Gender: <input checked="" type="radio"/> Male <input type="radio"/> Female	Ethnic Code: White	
Location of the Psych Folder: SPED SVC CTR-NORT	Student has no Psych Folder: <input type="checkbox"/>	
Location of the Cum Folder: NESTLE AVE CHARTI	Student has no Cum Folder: <input type="checkbox"/>	
Home Language: Hebrew	Student Language: Hebrew	Alternate Mode of Communication:
Home Address of Student: 17949 MAGNOLIA BLVD APT 9		
City: ENCINO CA	ZIP Code: 91316	
Home Telephone: (702) 326-5447	Daytime Telephone:	Emergency Telephone:
School of Attendance: Nestle Ave Charter	Location Code: 5452	
School of Residence: Nestle Ave Charter	Location Code: 5452	
Name of Parent/Guardian:	Telephone:	
Address:		
City:	ZIP Code:	
Surogate Parent:	Telephone:	
Attends CURRENT SCHOOL as a result of one of the following:	Attends School of Residence	
Is the student living in a Family Foster Home (FFH)? <input type="radio"/> No <input type="radio"/> Yes FFH#: Is FFH Provider related to student? <input type="radio"/> No <input type="radio"/> Yes Relationship: Licensed Children's Institution <input type="radio"/> No <input type="radio"/> Yes LCI Name: LCI#: Out of the home placement made by <input type="radio"/> Regional Center <input type="radio"/> Department of Mental Health <input type="radio"/> Department of Children's Services <input type="radio"/> Superior Court <input type="radio"/> Other Child's family living within LAUSD's boundaries? <input type="radio"/> No <input type="radio"/> Yes If the student is 18 years old or older or is an emancipated minor, does he/she have educational decision-making rights? <input type="radio"/> No <input type="radio"/> Yes		

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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

		Achieved		
Goal for: (example - Reading)		Yes	No	If No, explain the reason the goal/objective was not achieved
1	<input type="text" value="Reading"/>	<input type="radio"/>	<input checked="" type="radio"/>	4th grade multi-syllabication words too difficult
Category	<input type="text" value="Reading"/> ▼			
	Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
	Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
2	<input type="text" value="writing"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Category	<input type="text" value="Writing"/> ▼			
	Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
	Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
3	<input type="text" value="math"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Category	<input type="text" value="Math"/> ▼			
	Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
	Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
4	<input type="text" value="eld"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Category	<input type="text" value="English Language Development"/> ▼			
	Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
	Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
5	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	
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"/>	
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"/>	
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"/>	
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"/>	
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"/>	
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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Section E: Present Level of Performance

Performance Area: Reading

Category: Reading

Assessment/Monitoring Process Used:

State/District Assessment Results: DIBLES Fluency 65 well below Maze 0

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

Strengths: Neil enjoys looking at stories and guessing the theme and possible story outcomes. He is able to use the Table of Contents to locate chapters. Neil enjoys playing Kahoot and remembers the locations of several answers.

Needs: Neil's low attention skills impacts his reading progress. Neil tries to read too fast and guesses words instead of decoding. Neil struggles with words from a 2nd grade text. He skips words and does not realize that he has missed words or sometimes even complete sentences. Neil does not follow along while a peer reads. Neil is looking around the classroom, talking to others, playing with toys, pretending to be somewhere else. He is missing 90% of his educational academics due to disruptions he makes in the classroom for himself and his peers. He rushes throughout his tasks.

Impact: Neil's eligibility of Specific Learning Disability (SLD) and his difficulty staying on task, in his seat, and working to learn subject material, impacts his ability to learn, comprehend, and summarize grade specific lessons.

Performance Area: Writing

Category: Writing

Assessment/Monitoring Process Used: classroom writing samples

State/District Assessment Results:

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

Strengths: No strengths have been identified. He continues to require support to print letters properly and on lines with spacing.

Needs: Writing skills are extremely low due to spelling skills and his ability to speak in longer compound sentences of more than 5 words. Neil has the ability to dictate what he wants to say, but does not have the attention and ability to stay on task long enough to get his thoughts on paper. He continues to have difficulty with speech-to-text due to his pronunciation and clarity of thoughts. Neil does not form letters correctly, uses capital and lowercase in single words, does not use punctuation properly, and does not keep his writing between the margins.

Impact: Neil's eligibility of Specific Learning Disability (SLD) and his difficulty staying on task, in his seat, and working to learn subject material, impacts his ability to learn, comprehend, and summarize grade specific lessons.

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Section E: Present Level of Performance

Performance Area:

Math

Category:

Math

Assessment/Monitoring Process Used:

classroom assignments and quizzes

State/District Assessment Results:

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

Strengths: Neil is able to add single and multi-digit numbers with regrouping. Neil can occasionally identify the correct time on a analog clock.

Needs: Neil does not subtract with regrouping correctly. He does not remember his multiplication facts and can not multi0ply a double-digit number by one digit. Neil does not remember how to add or subtract fractions nor does he remember the steps to identify equal fractions. Neil has difficulty counting money, using division, and understanding words problems.

Impact: Neil's eligibility of Specific Learning Disability (SLD) and his difficulty staying on task, in his seat, and working to learn subject material, impacts his ability to learn,comprehend, and summarize grade specific lessons.

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):

Strength: Neil is able to make his wants and needs understood.
Needs: no needs at this time.
Impact: NA

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 F: Eligibility

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

[Empty text box for disability discussion]

For Initial IEP, interventions attempted prior to determining eligibility:

[Empty text box for interventions]

Eligible as a student with the disability of:

Code: SLD Specific Learning Disability
[Not Applicable, Blind or Partially Sighted]

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

Code: [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:

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

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Meeting Date

Section G: Annual Goals and Objectives

Performance Area: Category: Annual Goal #:

GOLDSTEIN NEIL will summarize a story, drama, or poem orally or in writing using voice to text as measured weekly in 1 out of 3 trials with 75% accuracy.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

GOLDSTEIN NEIL will summarize a story, drama, or poem orally or in writing using voice to text as measured weekly in 1 out of 4 trials with 65% accuracy.

Incremental objective #2 related to the goal:

GOLDSTEIN NEIL will summarize a story, drama, or poem orally or in writing with voice to text as measured weekly in 1 out of 4 trials with 70% accuracy.

Date to be achieved: MO/YR

Date to be achieved: MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

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" value="06-MAR-2024"/>	Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	
Progress Mark: <input type="text" value="2"/>	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 checked="" type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please explain: <input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

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Student **GOLDSTEIN** **NEIL** **MI**
 Last First MI

Date of Birth **07-JAN-2013**

Meeting Date **02-MAY-2024**

Section G: Annual Goals and Objectives

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

GOLDSTEIN NEIL will write a multi-paragraph narrative composition that develops real or imagined situations with a narrator and/or characters in which a sequence of events unfolds, provides a conclusion, and uses a variety of transitional words, phrases, and clauses with adult assist as measured monthly in 2 out of 3 trials with 70% accuracy.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

GOLDSTEIN NEIL will write a multi-paragraph narrative composition that develops real or imagined situations with a narrator and/or characters in which a sequence of events unfolds, provides a conclusion, and uses a variety of transitional words, phrases, and clauses with adult assist. as measured monthly in 1 out of 3 trials with 55% accuracy.

Incremental objective #2 related to the goal:

GOLDSTEIN NEIL will write a multi-paragraph narrative composition that develops real or imagined situations with a narrator and/or characters in which a sequence of events unfolds, provides a conclusion, and uses a variety of transitional words, phrases, and clauses with adult assist. as measured monthly in 1 out of 3 trials with 65% accuracy.

Date to be achieved: **September** **2023** MO/YR

Date to be achieved: **January** **2024** MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

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: 06-MAR-2024	Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>		
Progress Mark: <input type="text" value="2"/>	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 checked="" type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No	
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other	If "No" please explain: <input type="text"/>	

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 set of very large (e.g., millions) or very small (e.g., thousandths) numbers, GOLDSTEIN NEIL will estimate/round/manipulate those numbers with 75% accuracy in 2 of 3 trials as measured by student work samples/criterion assessment.

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 set of very large (e.g., millions) numbers, GOLDSTEIN NEIL will estimate/round/manipulate those numbers with 65% accuracy in 2 of 3 trials as measured by student work samples/criterion assessment.

Incremental objective #2 related to the goal:

When given a set of very small (e.g., thousandths) numbers, GOLDSTEIN NEIL will estimate/round/manipulate those numbers with 70% accuracy in 2 of 3 trials as measured by student work samples/criterion assessment.

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					
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" value="06-MAR-2024"/>	Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>		
Progress Mark: <input type="text" value="2"/>	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 checked="" 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: <div style="border: 1px solid black; height: 100px; width: 100%;"></div>	

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

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Student GOLDSTEIN NEIL MI Last First MI

Date of Birth 07-JAN-2013

Meeting Date 02-MAY-2024

Section G: Annual Goals and Objectives

Performance Area: ELD Category: English Language Devel Annual Goal #: 4

Student has reclassified per BUL-6890.4: Reclassification Procedures for Emergent Bilinguals with Disabilities.

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:

Student has reclassified per BUL-6890.4: Reclassification Procedures for Emergent Bilinguals with Disabilities.

Incremental objective #2 related to the goal:

Student has reclassified per BUL-6890.4: Reclassification Procedures for Emergent Bilinguals with Disabilities.

Date to be achieved: September 2023 MO/YR

Date to be achieved: January 2024 MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

Table with 5 columns: 4 GOAL MET OR EXCEEDED, 3 SUBSTANTIAL PROGRESS (50-99% of goal met), 2 PARTIAL PROGRESS (1-49% of goal met), 1 NO PROGRESS, and Goal Achievement. Rows include reporting periods, progress marks, and achievement status.

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Section K: Participation in State and District-wide Assessments

Assessments administered will conform to those assessments determined for each grade by the California Department of Education and/or the Los Angeles Unified School District.

Student will participate in Regular State and District Assessments. <i>(Designated Supports and/or Accommodations identified below are applicable)</i>	CAASPP Subject ELA and Math
Designated Supports: <ul style="list-style-type: none"> - Text-to-speech software enabled (for math items and ELA items except for reading passages) - Test in a separate/smaller setting 	
Accommodations: <ul style="list-style-type: none"> - Text-to-Speech software enabled for ELA reading passages (embedded accommodation). - Multiplication table for single digits 1-9 (paper-based; not allowed for Grade 3; non-embedded accommodation) 	
Student will participate in Regular State and District Assessments. <i>(Designated Supports and/or Accommodations identified below are applicable)</i>	CAST Subject Science
Designated Supports: <ul style="list-style-type: none"> - Test in a separate/smaller setting (non-embedded support) - Simplified Test Directions (non-embedded support) - Text-to-Speech (embedded support) 	
Student will participate in Regular State and District Assessments. <i>(Designated Supports and/or Accommodations identified below are applicable)</i>	ELPAC Subject Speaking
Designated Supports: <ul style="list-style-type: none"> - Simplified or paraphrased test directions (non-embedded designated support) - Designated interface assistant only for one-on-one administration (non-embedded support) - Mouse pointer (size and color)(embedded support) - Pause or replay the audio during the administration of test questions (speaking domain only—summarize an academic presentation only) 	
Student will participate in Regular State and District Assessments. <i>(Designated Supports and/or Accommodations identified below are applicable)</i>	ELPAC Subject Listening
Designated Supports: <ul style="list-style-type: none"> - Student test location is altered so the student is tested in a setting different from that made available for most students, which also includes most beneficial time, special lighting, or acoustics, and adaptive furniture 	
Student will participate in Regular State and District Assessments. <i>(Designated Supports and/or Accommodations identified below are applicable)</i>	ELPAC Subject Writing
Designated Supports: <ul style="list-style-type: none"> - Mouse pointer (size and color)(embedded support) - Designated interface assistant only for one-on-one administration (non-embedded support) 	
Student will participate in Regular State and District Assessments. <i>(Designated Supports and/or Accommodations identified below are applicable)</i>	ELPAC Subject Reading
Designated Supports: <ul style="list-style-type: none"> - Designated interface assistant only for one-on-one administration (non-embedded support) - Noise buffers 	

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Date of Birth 07-JAN-2013

Meeting

Date 02-MAY-2024

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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 computer generated translation?* Yes No

Select Preferred Language:

*Computer generated translation provides access to an immediate written translation of the IEP but translated content has not been fully vetted by a District translator. Any computer generated translation IEP documentation should not be considered an official IEP document. While this service is offered and available to assist parents/guardians to participate in IEP development, it is not a substitute for formal written translation services by a District translator. Parents/Guardians who elect access to computer generated written IEP translation are still able to receive oral interpretation and/or a formal translation of the IEP at any time. Only formal translations will be considered official IEP documentation.

Is the parent/guardian requesting official translation? Yes No

Select Preferred Language: Hebrew

Specify the Individual Pages to be translated:

all

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 GOLDSTEIN NEIL MI

Date of Birth 07-JAN-2013

Meeting Date 02-MAY-2024

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

Method Whom When

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 02-MAY-2024

- 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)

Signature(s)

Date 2-MAY-2024



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 tómesese 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="Haim Goldstein"/>	<input type="text" value="by phone"/>
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="Michael DeMay"/>	<input type="text" value="Michael DeMay"/>
Administrative Designee	<input type="text"/>	<input type="text"/>
Special Education Teacher	<input type="text" value="Russell Wise"/>	<input type="text" value="RW"/>
General Education Teacher	<input type="text" value="Sergio Perez"/>	<input type="text" value="SP"/>
School Psychologist	<input type="text"/>	<input type="text"/>
School Nurse	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Interpreter	<input type="text"/>	<input type="text"/>
Sign Language Interpreter	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

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="Haim Goldstein"/>	<input type="text" value="Haim Goldstein"/>
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="Aleen Andonian"/>	<input type="text" value="Aleen Andonian"/>
Administrative Designee	<input type="text"/>	<input type="text"/>
Special Education Teacher	<input type="text" value="Badewa Williams"/>	<input type="text" value="Badewa Williams"/>
General Education Teacher	<input type="text" value="Sergio Perez"/>	<input type="text" value="Sergio Perez"/>
School Psychologist	<input type="text"/>	<input type="text"/>
School Nurse	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Interpreter	<input type="text"/>	<input type="text"/>
Sign Language Interpreter	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Other <input type="text" value="EB Representative"/>	<input type="text" value="Bree Cloward"/>	<input type="text" value="Bree Cloward"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student GOLDSTEIN NEIL MI Last First MI

Date of Birth 07-JAN-2013

Meeting Date 02-MAY-2024

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.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

Last

First

MI

Date of Birth

Meeting

Date

ANNUAL LEAST RESTRICTIVE ENVIRONMENT ANALYSIS (Continued)

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

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

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

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

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Last GOLDSTEIN

First NEIL

MI

Date of Birth 07-JAN-2013

Meeting Date

02-MAY-2024

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 checked="" 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="02-MAY-2024"/>	<input type="text"/>
Eligibility: (from Page 4)	Eligible (SLD)	
	<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 Resident School"/>	<input type="text"/>
	Name of School <input type="text" value="NESTLE AVE CHARTER"/>	<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="1200"/>	<input type="text"/>
	Addresses Goals <input type="text" value="1(Reading),2(Writing),3(math),4(ELD)"/>	<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	
Parent Counseling and Training (PCT)	<input type="radio"/> Yes <input checked="" type="radio"/> No	
	ESY Transportation <input type="text" value="School to School"/>	
Accommodation, Modifications, Supports	Instructional Accommodations <input type="text" value="small group, adult proximity to prompt, break tasks down to one problem at a time, graph paper"/>	<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	
	If the Parent does not agree, specify the area(s) to be reassessed. <input type="text" value="Psychoeducation, Academics, Health"/>	<input type="text"/>
Comments, as appropriate		
Low Incidence Equipment	<input type="text"/>	
Assistive Technology Equipment	<input type="text"/>	

**Participation in
General Education**

Neil will participate with General Education peers for PE, arts activities, assemblies, field trips, recess, lunch, and other occasions as determined by the teacher.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student GOLDSTEIN NEIL MI
Last First MI

Date of Birth 07-JAN-2013 Meeting Date 02-MAY-2024

	Effective With This IEP	Future Changes Related To This IEP
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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	75	

Part 4 - Compensatory Education/Recoupment Services Discussion

--

Part 4 - Additional IEP Team Considerations & Parental Input

The IEP team considered Least Restrictive Environment (LRE) setting options of general education only, gen. ed. with Resource Services (RSP), or Specific Learning Disability (SLD) Special Day Program and determined that the SLD program continues to best support Neil's academic needs.

10/26/23- Parent participated in person. Meeting began with Introductory statement being read and team members introductions. A discussion was held regarding reclassification and the IEP team determined that the student no longer needs ELD services See Attachment C in IEP Management section

5/2/2024 Amendment was held to update testing accommodations.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student MI
 Last First MI

Date of Birth Meeting Date

FAPE Summary Grid

Program:	SLD	Setting:	Special Education						
Eligibility:	Eligible (SLD)	Curriculum:	General Education						
Transportation:	None	Low Incident Support:	None						
Date District Received	02-May-2024								
Parent Signature:									
Service Code	Service Desc	Start Date	Service Applies To	Interval	Frequency	Area	Total Minutes	Addresses Goal(s)	No Consent

Alternative Remote/Distance Learning Services During Emergency Conditions

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

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

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

As soon as practicable following the determination that instruction or services, or both, cannot be provided either at the school or in person for more than 10 days due to a qualifying state of emergency, the parent will be notified as to the specific means by which the student's IEP will be provided, in light of the emergency circumstances present at that time. The IEP will be provided by alternative means as necessitated during the period of emergency conditions, only.

Comments above do not constitute a change to the District's offer of FAPE or IEP. Because the nature of any future emergency cannot be known in advance, the specific means by which the IEP shall be provided in a future emergency will be determined at the time, in light of the circumstances.

For IEP Team Information

By clicking this box the IEP team has reviewed the FAPE Summary Page to ensure that it reflects the IEP Team decisions.