

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Identification Number 030410M053

SSID 6032358213

Eligible (AUT)

Student AZOULAY Last

IZCHAK First

I MI

Date of Birth: 04-MAR-2010

Section A: Meeting Information

Pertinent Dates

Type of Meeting

Date of Initial IEP Team Meeting 05-MAY-2015
Date of Present Meeting 31-MAY-2024
Annual Review to be conducted by 01-DEC-2024
Next Three Year Review will be conducted by 30-NOV-2026
Three Year Review or Evaluation was conducted on 01-DEC-2023
Transition to Kindergarten to be conducted by

Initial
Amendment of IEP dated 05-MAR-2024
Annual Review
Three Year Review
Other
Early Start Transition
Expulsion Analysis
Individual Transition Plan

Location of Meeting BRIDGEPORT SCHOOL (NPS)

District Name Los Angeles Unified School Distri

Section B: Student Information

Date of Birth 04-MAR-2010 Age 14 Grade 8
Gender Male
Ethnic Code White
Location of the Psych Folder REGION NORTH
Student has no Psych Folder
Location of the Cum Folder MADISON MS
Student has no Cum Folder
Home Language Hebrew
Student Language Hebrew
Alternate Mode of Communication
Home Address of Student 6133 Whitsett Ave #31
City NORTH HOLLYW CA ZIP Code 91606
Home Telephone (818) 471-9146 Daytime Telephone
Emergency Telephone
School of Attendance Bridgeport School (Nps) Location Code NP0378
School of Residence Madison Ms Location Code 8230
Name of Parent/Guardian
Telephone
Address
City CA ZIP Code
Surrogate Parent Telephone

Attends CURRENT SCHOOL as a result of one of the following Nonpublic School Placement

LRE

Is the student living in a Family Foster Home (FFH)? No
FFH#
Is FFH Provider related to student? No
Relationship
Licensed Children's Institution No
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
If the student is 18 years old or older or is an emancipated minor, does he/she have educational decision-making rights? No

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Los Angeles Unified School District

Student     Date of Birth

Last First MI

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="Language 1"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Category	<input type="text" value="Language"/>			
	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="Behavioral Support"/>	<input type="radio"/>	<input checked="" type="radio"/>	at 3 minutes
Category	<input type="text" value="Language – Pragmatics"/>			
	Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	at 3 minutes
	Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	at 3 minutes
3	<input type="text" value="Language 3"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Category	<input type="text" value="Language – Pragmatics"/>			
	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="Reading"/>	<input type="radio"/>	<input checked="" type="radio"/>	Assignments not completed, regression
Category	<input type="text" value="Reading"/>			
	Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	Assignments not completed, regression
	Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	Assignments not completed, regression
5	<input type="text" value="Writing"/>	<input type="radio"/>	<input checked="" type="radio"/>	Regression
Category	<input type="text" value="Writing"/>			
	Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	Regression
	Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	Regression
6	<input type="text" value="Math"/>	<input type="radio"/>	<input checked="" type="radio"/>	Regression
Category	<input type="text" value="Math"/>			
	Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	Regression
	Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	Regression
7	<input type="text" value="Social skills"/>	<input type="radio"/>	<input checked="" type="radio"/>	Requires 6+ prompts
Category	<input type="text" value="Social Functioning"/>			
	Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	Requires 6+ prompts
	Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	Requires 6+ prompts
8	<input type="text" value="Prevocational"/>	<input type="radio"/>	<input checked="" type="radio"/>	Beings within 3 minutes with 6+ prompts
Category	<input type="text" value="Vocational Education"/>			
	Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	Beings within 3 minutes with 6+ prompts
	Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	Beings within 3 minutes with 6+ prompts
9	<input type="text" value="Language 2"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Category	<input type="text" value="Language – Expressive"/>			
	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"/>
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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Student AZOULAY  
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IZCHAK  
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Date of Birth 04-MAR-2010

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Section E: Present Level of Performance

Performance Area: Language- Language, Expressive + Pragmatics

Category: Language

Assessment/Monitoring Process Used: SLP data and observation

State/District Assessment Results: n/a

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

Summary of Services: Izchak is a 13 year old student at Village Glen School. He receives 60 minutes of weekly language and speech services in a group setting during both regular and extended school year as part of the Village Glen School collaborative model. Therapy has primarily focused on responding to questions, engaging in conversations, and using appropriate word and sentence structure.

Strengths: Izchak is kind, patient, and is always eager to attend speech therapy sessions. Izchak has made substantial progress and has achieved all of his annual language and speech goals this year. He can respond appropriately to When, Where and Why questions related to a variety of speech and language activities in 60% of observed opportunities, given 2-3 verbal/visual cues. He also engages in reciprocal conversations regarding a subject of his communication partner's choice while refraining from introducing non-salient information in 70% of observed opportunities, given 2-3 verbal/visual prompts. Lastly, he uses age appropriate syntax and morphemes (e.g. verb tense, pronoun use, word order, etc.) during structured tasks with 80% accuracy given 2-3 visual/verbal cues.

by Gina Doles, MS, SLP, Village Glen Speech Therapist

Performance Area: Language- Language, Expressive+Pragmatics (continued)

Category: Language

Assessment/Monitoring Process Used: SLP data and observation

State/District Assessment Results: n/a

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

Areas of Needs: Although Izchak has made substantial progress on his language and speech goals, he continues to require support to ensure carryover and generalization of skills while increasing complexity and accuracy with less prompting. Izchak is not yet responding to 'when', 'where', 'why', and 'how' questions with detailed responses given less than 2 verbal or visual prompts. He also does not engage in conversations with adults and peers on a nonpreferred topic with relevant responses, questions, or comments for more than 3 reciprocal exchanges given less than 2 verbal or visual prompts. Lastly, he does not yet use more sophisticated word and sentence structure to expand or combine sentences during structured speech tasks by using coordinating or subordinating conjunctions (i.e., but, yet, so, or, although, in order to, because, unless, etc.) with less than 2 verbal or visual prompts.

Impact: Due to Izchak's difficulties with responding to questions, engaging in conversations, and using appropriate word/sentence structure, he may have difficulties participating in the curriculum.

by Gina Doles, MS, SLP, Village Glen Speech Therapist

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Section E: Present Level of Performance

Performance Area: Health Review

Category: Health

Assessment/Monitoring Process Used: Parent interview; student's observation; school health record review

State/District Assessment Results:

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

**HEALTH SUMMARY:** Health Assessment/information was completed for the re-evaluation IEP with health information obtained from review of electronic school health records and phone conference with father, Avshalom Azoulay. Izchak is a thirteen-year-and-zero-month-old male student in the 7th grade enrolled at Village Glen School (NPS) with an AUT eligibility. Student has a condition that affects mood, thoughts, and/or behavior. Student takes daily four treating medications at home to assist in the management of the medical condition. Student started taking medications six months ago as reported. Student has no known history of serious/chronic illness, injury, accident, surgery, and hospitalization in the past year. Student is in the 50th percentile for height and the 50th percentile for weight for their age group. No allergies to food and medication.

**STRENGTHS:** Student passed LAUSD hearing and vision screenings without correction on 03/03/2023. Student communicates by using words. Student is independent in performing self-help skills in the school setting. Student walks independently without any assistance.

**AREAS OF NEED:** Health is not an area of need.

**IMPACT OF DISABILITY:** Physical health does not impact student's access, participation, and performance in the educational program.

**ACCOMMODATIONS/MODIFICATIONS:** None based on physical health.

Vivian Caro, RN, BSN, Credentialed School Nurse  
LAUSD Special Education Nurse Itinerant 03/06/2023

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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Section E: Present Level of Performance

Performance Area: Language

Category: Language

Assessment/Monitoring Process Used: Informal assessment, observation, language sample

State/District Assessment Results:

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

Izchak is a 13-year-old 7th grader at Village Glen Non-Public School. He participated in a Language and Speech (LAS) assessment per parent request. This assessment is to determine present level of performance and appropriate level of support.

Areas of Strength: Izchak makes comments and asks questions, which are largely observations about his environment and topics of interest. He appears to want to communicate with others and appears to enjoy speaking aloud to share thoughts and ideas. He has a working understanding and use of English sentence structure and grammar.

Areas of Need: Izchak often makes grammatical errors that can be understood in context but at times the errors can also impact the listener's ability to understand his language content (e.g., There's a squirrel is now roping. He's riding and going on the rope). Izchak tends to perseverate on topics, talking about them in a repetitive manner. For example, when talking about a favorite movie, he just described how the characters looked one by one and then repeated himself again starting with the first character's description. He had difficulty answering wh- questions, such as if he would recommend the movie to others or if his parents enjoyed the movie. Izchak also asked questions or made comments that were irrelevant and/or inappropriate and appeared to be part of his perseverating. His questions often seem to be rhetorical. Even if the conversation partner responds to his questions, he continues to just express his own thoughts.

Impact of Disability: Izchak'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.

Joy Lee, M.A., CCC-SLP  
Speech and Language Pathologist  
LAUSD NPS Assessor

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: Reading

Category: Reading

Assessment/Monitoring Process Used: Observation, Informal

State/District Assessment Results:

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

Strengths: With prompting, Izchak has the ability to listen to a text that is being read aloud. He has the ability to read CVC and CVCC words. He demonstrates appropriate letter identification. With prompting, he is able to respond to whether he likes or dislikes a text that is being read.

Areas of Need: Izchak demonstrates difficulty with reading and comprehension above his independent level. He has difficulty reading more than 3 syllable words and does not demonstrate knowledge of grammar concepts. He requires frequent prompting to follow along during lessons.

Impact of Disability: Izchak's eligibility of Autism impacts his ability to attend and attain skills/concepts in reading and language arts, which impedes her involvement and progress in the general education curriculum.

Performance Area: Writing

Category: Writing

Assessment/Monitoring Process Used: Observation, Informal

State/District Assessment Results:

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

Strengths: Izchak has the ability to write his name and utilize different writing instruments appropriately. With prompting, he is able to copy accurately from the board. He has the ability to write CVC words using a word bank to fill in simple sentences. He is able to orally dictate a simple sentence on a preferred topic with guidance.

Areas of Need: Izchak continues to perform below grade level expectations. He requires maximum support to complete writing assignments as he cannot work independently. He has difficulty with spelling, grammar, capitalization, and punctuation.

Impact of Disability: Izchak's eligibility of Autism impacts his ability to attend and attain skills/concepts in language arts, which impedes his involvement and progress in the general education curriculum.

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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: With prompting and support, Izchak is able to add and subtract between digits 0-12 with the use of manipulatives. He has a basic understanding of time of day.

Areas of Need: Izchak demonstrates difficulty with most math concepts and is currently working well below grade level. He requires frequent prompting to stay on task during his math assignments. He has difficulty using and understanding the four operations to solve math problems.

Impact of Disability: Izchak's eligibility of Autism impacts his ability to attend to and retain early math concepts, which impedes 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):

Strengths: Izchak has the ability to greet others and ask them 1 simple question. He is kind and polite towards staff and peers. With maximum support and guidance, he is able to appropriately engage with his peers for up to 2 minutes.

Areas of Need: Izchak has difficulty engaging with his peers in an appropriate manner. He will often script when he is with staff and peers and repeat 'Is Izchak doing good?' or 'Izchak is bad' several times. He will often engage in negative self-talk throughout the day.

Impact of Disability: Izchak's eligibility of Autism impacts his ability to ability in social behavior functioning, which impedes his involvement and progress in the general education curriculum.

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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:** With prompting, Izchak has the ability to follow 1 step directions when they are modeled. With maximum support and prompting, Izchak is able to follow along and copy from the board. He reacts positively towards praise and positive reinforcement.

**Areas of Need:** Izchak has difficulty completing tasks or assignments independently. He requires maximum support to complete simple tasks and to begin his assignments. When dysregulated, he has difficulty following directions. He is often inattentive and requires frequent prompting to follow along during a lesson.

**Impact of Disability:** Izchak's eligibility of Autism impacts his ability to complete vocational tasks, which impedes 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):

**Strengths:** When calm and motivated, Izchak has the ability to follow simple directions. When the activity is preferred, Izchak is able to participate with maximum support and prompting. He is able to respond well to redirections when he is earning a preferred tangible.

**Areas of Need:** When dysregulated, Izchak has difficulty follow directions. He will often make disruptive, off-topic, and repetitive comments. When upset, Izchak will scream, throw himself on the ground, hit his head, and engage in negative self-talk. He requires frequent prompting to have a safe and calm body.

**Impact of Disability:** Izchak's eligibility of Autism impacts his ability to engage in appropriate behaviors, which impedes his involvement and progress in the general education curriculum.



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Section E: Present Level of Performance

Performance Area: Cognition/General Ability (Psychoeducational Evaluation)

Category: General Ability

Assessment/Monitoring Process Used: Review of Records/Interviews/Observations/CAS2/TAPS4/VMI6/MVPT4

State/District Assessment Results:

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

Based on a current assessment results utilizing alternative measures of assessment, as per current LAUSD policy, including alternative, multi-dimensional measurement strategies, teacher reports, cumulative record review, present psycho-educational assessments, interviews, and observations, Izchak's estimated overall general ability presents in the Below Average to Low Average ranges.

Strengths: Results showed the following abilities/skills to be relative strengths for Izchak and in the Average range:

- Visual Processing: The ability to recognize, to track, to remember, and to interpret visual information such as shape, contrast, and size.

Results showed the following abilities/skills to be commensurate with Izchak's overall ability and in the Low Average range:

- Association: The process of acquiring basic units of information in memory, establishing systems for relating these units to each other as in matching same/different, pattern or logical groups. It involves long term memory (as opposed to immediate or short term), and serves as a foundation for the more complex operations of conceptualization, sense of cause-and-effect relationships, sense of part-to-whole relationships, and development of basic organizational relationships.
- Attention: The ability to select and to direct attention, to discriminate among, respond to, to sustain or to shift focus as necessary.

Performance Area: Cognition/General Ability (Psychoeducational Evaluation): cont'd.

Category: General Ability

Assessment/Monitoring Process Used: Record Review/Interviews/Observations/CAS2/TAPS4/VMI6/MVTP4

State/District Assessment Results:

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

Needs: Areas of weakness were found in the following areas:

- Auditory Processing: The perception and use of auditory information including auditory discrimination, memory, sequencing, and integration.
- Conceptualization: The ability to learn new concepts presented in an educational setting, using information in an increasingly complex and fluid manner to combine, rearrange, and use in multi-step operations.
- Expression: Expression is the process of ordering thought in a form that can be understood by others including the ability to effectively communicate ideas through language.
- Phonological Processing: The ability to use and manipulate speech sounds and patterns to make meaning from spoken and written word. These skills include phonological awareness, phonological memory, and rapid automatic naming.
- Sensory Motor: The ability to combine input of sensory information with output of motor activity.

These results mosly corroborate previous assessment findings from April 2018.

Impact of Disability: Issues related with Izchak's Autism (AUT) coupled with significant learning deficits and ADHD-like symptoms appear to impact his routine and successful participation in and access to the curriculum.

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Section E: Present Level of Performance

Performance Area: Social-Emotional (Psychoeducational Evaluation)

Category: Social Emotional

Assessment/Monitoring Process Used: Review of Records/Observations/Interviews/Rating Measures

State/District Assessment Results:

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

Strengths: Socially/emotionally, Izchak presented as a happy, kind and polite adolescent. With any activities that did not require reading (even short text), Izchak was determined and interested in performing well and receiving validation and kudos for doing so. He worked diligently during assessment procedures, yet he required guidance and support through solo activities that students would normally attend to on their own. He demonstrated good eye-contact and his hygiene and attire were appropriate. He was talkative and he thrived with positive feedback and reinforcement. He also requested that his positive actions be shared with his teacher and parents and he looked for rewards for his positive actions. However, when he was informed that he could not receive the items he asked for, it did not seem to impact him negatively, nor did it impact his performance. Izchak's teacher reports that when calm and motivated, Izchak has the ability to follow simple directions. When the activity is preferred, Izchak is able to participate with maximum support and prompting. He is able to respond well to redirections when he is earning a preferred tangible. Izchak's father reported that Izchak has demonstrated significant growth since his enrollment at Village Glen NPS. He is kind and respectful. He is very affectionate and for the most part, he does well at home though his brother is often quite challenging toward him.

Performance Area: Social/Emotional (Psychoeducational Evaluation) cont'd.

Category: Social Emotional

Assessment/Monitoring Process Used: Record Review/Interviews/Observations/Rating Scales

State/District Assessment Results:

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

Needs: Notwithstanding, assessment data reveals that Izchak continues to struggle with the symptoms associated with his documented Autism (AUT) and ADHD-like symptoms coupled with ongoing significant learning difficulties. His teacher reports that when dysregulated, Izchak has difficulty following directions. He will often make disruptive, off-topic, and repetitive comments. When upset, Izchak will scream, throw himself on the ground, hit his head, and engage in negative self-talk. He requires frequent prompting to have a safe and calm body. Academically, he struggles significantly with his expectations irrespective of 1:1 support and instruction where necessary, which is often. He has a difficult time keeping up in class.

Overall, Izchak is cheerful, hardworking preadolescent that is kind and caring. However, due to his significant disabilities related to Autism (AUT), ADHD-like symptoms, learning problems, and limited abilities, he struggles being able to attend to his academic expectations. Furthermore, he also demonstrates emotional deficits as a result of the above that present him as immature.

Impact of Disability: Issues related with Izchak's Autism (AUT) coupled with significant learning deficits and ADHD-like symptoms appear to impact his routine and successful participation in and access to the curriculum.

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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: [ ] [ ]  
 Not Applicable,  Blind or  Partially Sighted

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

or

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

No Longer Eligible (Effective Date): [ ]

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

Final IEP Reason: [ ] Final IEP Effective Date: [ ]

The IEP Team has considered and agrees that the educational needs of the student are not primarily due to:

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

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Section G: Annual Goals and Objectives

Performance Area:  Category:  Annual Goal #:

Izchak will respond to 'when', 'where', 'why', and 'how' questions with detailed responses in 80% of trial opportunities given no more than 2 verbal or visual prompts over 3 consecutive sessions as measured by SLP data and observation.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

Izchak will respond to 'when', 'where', 'why', and 'how' questions with detailed responses in 60% of trial opportunities given no more than 2 verbal or visual prompts over 3 consecutive sessions as measured by SLP data and observation.

Incremental objective #2 related to the goal:

Izchak will respond to 'when', 'where', 'why', and 'how' questions with detailed responses in 70% of trial opportunities given no more than 2 verbal or visual prompts over 3 consecutive sessions as measured by SLP data and observation.

Date to be achieved:   MO/YR

Date to be achieved:   MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR EXCEEDED

3 SUBSTANTIAL PROGRESS (50-99% of goal met)

2 PARTIAL PROGRESS (1-49% of goal met)

1 NO PROGRESS

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

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Meeting Date

Section G: Annual Goals and Objectives

Performance Area:  Category:  Annual Goal #:

To decrease time scripting on the yard, Izchak will participate and interact with peers for 10 minutes with no more than 2 prompts in 3 out of 5 opportunities as measured by staff 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:

To decrease time scripting on the yard, Izchak will participate and interact with peers for 8 minutes with no more than 4 prompts in 1 out of 5 opportunities as measured by staff observations.

Incremental objective #2 related to the goal:

To decrease time scripting on the yard, Izchak will participate and interact with peers for 9 minutes with no more than 3 prompts in 2 out of 5 opportunities as measured by staff observations.

Date to be achieved:   MO/YR

Date to be achieved:   MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR EXCEEDED

3 SUBSTANTIAL PROGRESS (50-99% of goal met)

2 PARTIAL PROGRESS (1-49% of goal met)

1 NO PROGRESS

1st Reporting Period	2nd Reporting Period	3rd Reporting Period	4th Reporting Period (Secondary Only)	Goal Achievement
Date: <input type="text" value="09-JUN-2023"/>	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)

Los Angeles Unified School District

Student   I

Last

First

MI

Date of Birth

Meeting Date

Section G: Annual Goals and Objectives

Performance Area:  Category:  Annual Goal #:

By annual review 2024, Izchak will engage in conversations with adults/peers on a non-preferred topic with relevant responses, questions, or comments for 3+ reciprocal exchanges in 80% of trial opportunities given no more than 2 verbal or visual prompts over 3 consecutive sessions as measured by SLP data and observation.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

Izchak will engage in conversations with adults/peers on a non-preferred topic with relevant responses, questions, or comments for 3+ reciprocal exchanges in 60% of trial opportunities given no more than 2 verbal or visual prompts over 3 consecutive sessions as measured by SLP data and observation.

Incremental objective #2 related to the goal:

Izchak will engage in conversations with adults/peers on a non-preferred topic with relevant responses, questions, or comments for 3+ reciprocal exchanges in 70% of trial opportunities given no more than 2 verbal or visual prompts over 3 consecutive sessions as measured by SLP data and observation.

Date to be achieved:   MO/YR

Date to be achieved:   MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR EXCEEDED

3 SUBSTANTIAL PROGRESS (50-99% of goal met)

2 PARTIAL PROGRESS (1-49% of goal met)

1 NO PROGRESS

1st Reporting Period	2nd Reporting Period	3rd Reporting Period	4th Reporting Period (Secondary Only)	Goal Achievement
Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	
Progress Mark: <input type="text"/> 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 **AZOULAY**  
Last

**IZCHAK** I  
First MI

Date of Birth **04-MAR-2010**

Meeting Date **31-MAY-2024**

Section G: Annual Goals and Objectives

Performance Area: **Reading** Category: **Reading** Annual Goal #: **4**

When a text has been read aloud to him, Izchak will answer WH questions (who, what, where, when, why, and how) to show understanding of the reading as measured by work samples or teacher/staff observations with 70% accuracy in 3 out of 5 opportunities.

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 read a text aloud, Izchak will answer WH questions (who, what, where, when, why, and how) to show understanding of the reading as measured by work samples or teacher/staff observations with 50% accuracy in 1out of 5 opportunities.

Incremental objective #2 related to the goal:

When read a text aloud, Izchak will answer WH questions (who, what, where, when, why, and how) to show understanding of the reading as measured by work samples or teacher/staff observations with 60% accuracy in 2 out of 5 opportunities.

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

Date to be achieved: **August** **2024** 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: <b>09-JUN-2023</b>	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 checked="" type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input checked="" type="checkbox"/> Other requiresupport	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)

Los Angeles Unified School District

Student   I     
Last First MI

Date of Birth

Meeting Date

Section G: Annual Goals and Objectives

Performance Area:  Category:  Annual Goal #:

With visual supports and 1-2 prompts, Izchak will write CVC words, sight words, and high frequency words correctly as measured by work samples or teacher/staff observations with 70% accuracy in 3 out of 5 opportunities.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

With visual supports and 3-4 prompts, Izchak will write CVC words, sight words, and high frequency words correctly as measured by work samples or teacher/staff observations with 50% accuracy in 1 out of 5 opportunities.

Incremental objective #2 related to the goal:

With visual supports and 2-3 prompts, Izchak will write CVC words, sight words, and high frequency words correctly as measured by work samples or teacher/staff observations with 60% accuracy in 2 out of 5 opportunities.

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" value="09-JUN-2023"/>	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)

Los Angeles Unified School District

Student **AZOULAY**  
Last

**IZCHAK**  
First MI

Date of Birth **04-MAR-2010**

Meeting Date **31-MAY-2024**

Section G: Annual Goals and Objectives

Performance Area: **Math** Category: **Math** Annual Goal #: **6**

When provided with visual aids, Izchak will demonstrate the ability to format addition and subtraction math questions with sums larger than 10 with 70% accuracy in 3 out of 5 opportunities.

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 provided with visual aids, Izchak will demonstrate the ability to format addition and subtraction math questions with sums larger than 10 with 50% accuracy in 1 out of 5 opportunities.

Incremental objective #2 related to the goal:

When provided with visual aids, Izchak will demonstrate the ability to format addition and subtraction math questions with sums larger than 10 with 60% accuracy in 2 out of 5 opportunities.

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

Date to be achieved: **August** **2024** 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: <b>09-JUN-2023</b>	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 checked="" type="checkbox"/> Other requiresupport	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)

Los Angeles Unified School District

Student   I     
Last First MI

Date of Birth

Meeting Date

Section G: Annual Goals and Objectives

Performance Area:  Category:  Annual Goal #:

Izchak will refrain from engaging in negative self-talk by having positive conversations with peers or staff with no more than 3 prompts in 3 out of 5 opportunities measured by staff 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:

Izchak will refrain from engaging in negative self-talk by having positive conversations with peers or staff with no more than 5 prompts in 1 out of 5 opportunities measured by staff observations.

Incremental objective #2 related to the goal:

Izchak will refrain from engaging in negative self-talk by having positive conversations with peers or staff with no more than 4 prompts in 2 out of 5 opportunities measured by staff observations.

Date to be achieved:   MO/YR

Date to be achieved:   MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR EXCEEDED	3 SUBSTANTIAL PROGRESS (50-99% of goal met)	2 PARTIAL PROGRESS (1-49% of goal met)	1 NO PROGRESS
<p><b>1st Reporting Period</b> Date: <input type="text" value="09-JUN-2023"/></p> <p>Progress Mark: <input type="text" value="2"/></p> <p>Is progress sufficient to meet annual goal? <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>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</p>	<p><b>2nd Reporting Period</b> Date: <input type="text"/></p> <p>Progress Mark: <input type="text"/></p> <p>Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No</p> <p>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</p>	<p><b>3rd Reporting Period</b> Date: <input type="text"/></p> <p>Progress Mark: <input type="text"/></p> <p>Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No</p> <p>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</p>	<p><b>4th Reporting Period (Secondary Only)</b> Date: <input type="text"/></p> <p>Progress Mark: <input type="text"/></p> <p>Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No</p> <p>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</p>
<p>Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No</p> <p>Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No</p> <p>If "No" please explain: <div style="border: 1px solid black; height: 80px; width: 100%;"></div></p>			

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student **AZOULAY**  
Last

**IZCHAK** I **MI**  
First MI

Date of Birth **04-MAR-2010**

Meeting Date **31-MAY-2024**

Section G: Annual Goals and Objectives

Performance Area: **Pre-vocational** Category: **Vocational Education** Annual Goal #: **8**

With no more than 4 prompts from staff assistance, Izchak will begin his classwork within 1 minute of being assigned and show progress throughout the day in 3 out of 5 opportunities as measured by staff observations.

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

Methods of Evaluation

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

Incremental objective #1 related to the goal:

With no more than 6 prompts from staff assistance, Izchak will begin his classwork within 2 minutes of being assigned and show progress throughout the day in 1 out of 5 opportunities as measured by staff observations.

Incremental objective #2 related to the goal:

With no more than 5 prompts from staff assistance, Izchak will begin his classwork within 2 minutes of being assigned and show progress throughout the day in 2 out of 5 opportunities as measured by staff observations.

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

Date to be achieved: **August** **2024** 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	
<b>1st Reporting Period</b> Date: <b>09-JUN-2023</b>	<b>2nd Reporting Period</b> Date:	<b>3rd Reporting Period</b> Date:	<b>4th Reporting Period (Secondary Only)</b> Date:	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: <div style="border: 1px solid black; height: 80px; width: 100%;"></div>
Progress Mark: <b>2</b>	Progress Mark:	Progress Mark:	Progress Mark:	
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	
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	

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

AZOULAY

Last

IZCHAK

First

I

MI

Date of Birth

04-MAR-2010

Meeting Date

31-MAY-2024

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 California Alternate Assessment in English Language Arts and Math in grades 3-8 and 11 and Science in grades 5, 8, and once in high school.

CAA Subject  
ELA/Math and Science

Designated Supports:

- Test in a separate/smaller setting (non-embedded resource)
- Simplified test directions (non-embedded resource)

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student AZOULAY IZCHAK I MI Last First MI

Date of Birth 04-MAR-2010

Meeting Date 31-MAY-2024

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 computer generated translation?\* Yes No

Select Preferred Language: [dropdown]

\*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.

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... Compensatory education consideration was documented on IEP dated

11-APR-2023 (Inactive) Review - Re-evaluation [dropdown]

Recoupment Services Consideration:

- Checkboxes for: 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. 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

11-APR-2023 (Inactive) Review - Re-evaluation [dropdown]

- 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)

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INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

AZOULAY

IZCHAK

I

Date of Birth

04-MAR-2010

Meeting Date

31-MAY-2024

Last

First

MI

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
Email	AG	16-MAY-2024

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

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 31-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="Avshalom Azoulay"/>	<input type="text" value="AA"/>
Parent/Guardian	<input type="text" value="Anker Nama"/>	<input type="text" value="AN"/>
Student Age 18 - 21 years	<input type="text"/>	<input type="text"/>
Student Under Age 18 years	<input type="text"/>	<input type="text"/>
Surrogate Parent	<input type="text"/>	<input type="text"/>
Foster Parent	<input type="text"/>	<input type="text"/>
Family Foster Home Provider	<input type="text"/>	<input type="text"/>
Administrator	<input type="text"/>	<input type="text"/>
Administrative Designee	<input type="text" value="Christine Kazandjian"/>	<input type="text" value="Christine Kazandjian"/>
Special Education Teacher	<input type="text" value="Brianna Plasencia"/>	<input type="text" value="BP"/>
General Education Teacher	<input type="text"/>	<input type="text"/>
School Psychologist	<input type="text" value="Vedeesh K. Saggar"/>	<input type="text" value="Vedeesh Saggar"/>
School Nurse	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text" value="LAS"/>	<input type="text" value="Roshelle Gen"/>	<input type="text" value="Roshelle Gen"/>
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" value="Irit Drori"/>	<input type="text" value="ID"/>
Sign Language Interpreter	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text" value="Kalee Miller"/>	<input type="text" value="KM"/>
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="Mr. Azoulay (phoned in)"/>	<input type="text"/>
Parent/Guardian	<input type="text"/>	<input type="text"/>
Student Age 18 - 21 years	<input type="text"/>	<input type="text"/>
Student Under Age 18 years	<input type="text"/>	<input type="text"/>
Surrogate Parent	<input type="text"/>	<input type="text"/>
Foster Parent	<input type="text"/>	<input type="text"/>
Family Foster Home Provider	<input type="text"/>	<input type="text"/>
Administrator	<input type="text"/>	<input type="text"/>
Administrative Designee	<input type="text" value="Christine Kazandjian"/>	<input type="text" value="Christine Kazandjian"/>
Special Education Teacher	<input type="text" value="Monica Hall"/>	<input type="text" value="MH"/>
General Education Teacher	<input type="text"/>	<input type="text"/>
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" value="Kalee Miller"/>	<input type="text" value="KM"/>
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"/>	<input type="text"/>
Parent/Guardian	<input type="text"/>	<input type="text"/>
Student Age 18 - 21 years	<input type="text"/>	<input type="text"/>
Student Under Age 18 years	<input type="text"/>	<input type="text"/>
Surrogate Parent	<input type="text"/>	<input type="text"/>
Foster Parent	<input type="text"/>	<input type="text"/>
Family Foster Home Provider	<input type="text"/>	<input type="text"/>
Administrator	<input type="text"/>	<input type="text"/>
Administrative Designee	<input type="text" value="Tasneem Dieguez"/>	<input type="text" value="Tasneem Dieguez"/>
Special Education Teacher	<input type="text" value="Elena Ramirez"/>	<input type="text" value="Elena Ramirez"/>
General Education Teacher	<input type="text"/>	<input type="text"/>
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

Student     
 Last First MI

Date of Birth

Meeting   
 Date

LEAST RESTRICTIVE ENVIRONMENT ANALYSIS

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

Student's Current Placement Type:

<input type="radio"/> General Education Class/General Education Site	<input type="radio"/> Special Day Program/General Education Site
<input type="radio"/> Special Day Program/Special Education Center	<input checked="" 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.

<b>Step A.</b>	Can the supports, services, accommodations and/or modifications in the student's IEP be made available in a general education classroom/setting?	
	<input type="radio"/> Yes <input checked="" type="radio"/> No	If the answer is YES, then a general education classroom/setting is the appropriate placement. If the answer is NO, go to the question below.
	<input type="radio"/> Yes <input checked="" type="radio"/> No	If not currently available, can the required supports, services, accommodations and/or modifications be made available in a general education classroom/setting? If YES, all required supports, services, accommodations and/or modifications must be provided within a reasonable timeline. If the answer is NO, please articulate why in the box below. Then go to Step B.
<input type="text" value="Reviewed data determines that the student continues to require support from special education provided in a small group setting to allow access to the curriculum."/>		

<b>Step B.</b>	Can the supports, services, accommodations and/or modifications in the student's IEP be made available on a general education site in a special day program?	
	<input type="radio"/> Yes <input checked="" type="radio"/> No	If the answer is YES, then a special day program on a general education site is the appropriate placement. If the answer is NO, go to the question below.
	<input type="radio"/> Yes <input checked="" type="radio"/> No	If not currently available, can the required supports, services, accommodations and/or modifications be made available in a special day program on a general education site? If YES, all required supports, services, accommodations and/or modifications must be provided within a reasonable timeline. If the answer is NO, please articulate why in the box below. Then go to Step C.
<input type="text" value="Reviewed data determines that the student continues to require special education supports and services in a small, structured environment to meet needs due to disability, including distractibility and difficulty using coping skills to manage frustration, and to allow maximum progress toward grade level standards."/>		

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

<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 checked="" 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>		

<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.
<div style="border: 1px solid black; height: 80px;"></div>		

<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.
<div style="border: 1px solid black; height: 80px;"></div>		

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

<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):																	
	<table><tr><td><input checked="" type="checkbox"/></td><td>Diminished access to the full range of the curriculum</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Missed general education instruction taught by highly qualified staff</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Rate at which student may earn credits for graduation</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Lack of opportunity for social interaction</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Lack of opportunities for age-appropriate peer role models</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Amount of socialization opportunities with typical peers</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Limited access to peers in student's home community</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Lack of exposure to appropriate behavioral models from peers</td></tr><tr><td><input type="checkbox"/></td><td>Other: <input type="text"/></td></tr></table>	<input checked="" 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 checked="" 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 checked="" 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"/>
<input checked="" 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 checked="" 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 checked="" 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="04-DEC-2023"/>	<input type="text" value="04-DEC-2023"/>
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" value="Alternate Curriculum"/>
Placement	Type of School <input type="text" value="Nonpublic School"/>	<input type="text" value="Nonpublic School"/>
	Name of School <input type="text" value="VILLAGE GLEN SCH (VALLEY) (NPS)"/>	<input type="text" value="BRIDGEPORT SCHOOL (NPS)"/>
Instructional Setting	Setting <input type="text" value="Special Education"/>	<input type="text" value="Special Education"/>
	Program <input type="text" value="NPS"/>	<input type="text" value="NPS"/>
	Special Day Minutes/Wk <input type="text" value="1500"/>	<input type="text" value="1500"/>
	Addresses Goals	<input type="text" value="1(Language),2(Language-Pragmatics),4(Reading),5(Writing),6(Math),7(Social Skills),8(Pre-vocational),9(Behavioral Support)"/>
Additional Factors	Low Incident Support <input type="text" value="None"/>	<input type="text" value="None"/>
	Assistive Technology Support <input type="text" value="No"/>	<input type="text" value="No"/>
	Transportation <input type="text" value="NPS Only - NPS Transportation"/>	<input type="text" value="NPS Only - NPS Transportation"/>
	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="Home to School"/>	
Accommodation, Modifications, Supports	Instructional Accommodations	<input type="text" value="small group instruction, offer choices, assignments broken down into smaller parts, reading material at independent and instruction level, re-teaching, graphic organizers, show examples, preferential seating, extended time on assignments, access to keyboard, calculator access, use of visuals and manipulatives, pre-teaching, breaking math problems into simpler parts, and visual demonstrations, repeated demonstrations, tasks explained in small and sequential manner, instruction in social skills, reinforce appropriate behavior, reduce/minimize distractions, modeling positive social interactions."/>
	Instructional Modifications	<input type="text"/>
	Other Supports, including Non-Academic and Extra-curricular Activities	<input type="text"/>
Preparation for Three Year Review IEP (At the second Annual Review IEP Meeting, the team must discuss and document the decision to conduct or not conduct a three-year comprehensive reassessment.)	Do the Parent and the District (local educational agency) agree that a reassessment is unnecessary? <input checked="" type="radio"/> Yes <input type="radio"/> No	
	If the Parent does not agree, specify the area(s) to be reassessed.	<input type="text"/>
<b>Comments, as appropriate</b>		

<b>Low Incidence Equipment</b>	
<b>Assistive Technology Equipment</b>	
<b>Participation in General Education</b>	<p>The above mentioned NPS school (100% of the school-day) is the least restrictive environment to meet Student's needs at this time due to behavioral needs and limited academic progress. Every effort will be made to re-integrate Student into the general education environment when feasible and appropriate. Areas of consideration for least restrictive environment, i.e. return to regular education setting include but are not limited to: behavior; attendance; and academic progress.</p>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student     
 Last First MI

Date of Birth  Meeting Date

	Effective With This IEP	Future Changes Related To This IEP
<b>Service 1</b>	Start Date: Effective on Signature Date	
<b>10</b>	End Date: 01-DEC-2024	
<b>Language/Speech</b>	Service applies to: ESY	
	Frequency: 1-5	
This service addresses the following <b>goals</b> :	Interval: Weekly	
	Minutes/Interval: 60	
2(Language- Pragmatics)	Minutes/Interval (Pullout from Gen Ed): 0	
1(Language)	Service Delivery Model: Direct Service (Collaborative)*	
	Area: School-Based	
	Responsible Personnel: Nonpublic School Provider (for nonpublic school students only)	

\*

<b>Service 2</b>	Start Date: Effective on Signature Date	
<b>10</b>	End Date: 01-DEC-2024	
<b>Language/Speech</b>	Service applies to: Regular	
	Frequency: 1-5	
This service addresses the following <b>goals</b> :	Interval: Weekly	



2(Language- Pragmatics)	Minutes/Interval:	60	
1(Language)	Minutes/Interval (Pullout from Gen Ed):	0	
	Service Delivery Model:	Direct Service (Collaborative)*	
	Area:	School-Based	
	Responsible Personnel:	Nonpublic School Provider (for nonpublic school students only)	
*			

**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="96"/>	

### Part 4 - Compensatory Education/Recoupment Services Discussion

--

### Part 4 - Additional IEP Team Considerations & Parental Input

--

MEETING DISCUSSION May 31, 2024:

This is an amendment IEP held to correct an error on the end date on the service grid. The parent provided verbal/written consent to convene the IEP meeting, indicating they would not be able to attend the meeting and to send a copy of the IEP for review and signature. Upon completion of the meeting, the parent will be provided the IEP document with the consent page for review and signature. The parent waived the statutory notice requirements and the personal presence of IEP team members who may otherwise be required to attend the meeting. A general education teacher is not required to participate in the meeting as the student's eligibility continues to have an impact in the ability to access the educational program at a District-operated school. The IEP meeting convened at 1:30pm. The IEP team discussed that because the reevaluation IEP was held on December 1, 2023, the date for LAS services should conclude on December 1, 2024. The service grid was updated. The IEP team had no questions or concerns. The IEP meeting concluded at 1:40pm.

MEETING DISCUSSION Mar 5, 2024:

This is a meeting to amend the December 1, 2023, IEP to update Section K testing form to the California Alternate Assessment (CAA). Parent provided verbal/written consent to convene the IEP meeting, indicating they would not be able to attend the meeting and to send a copy of the IEP for review and signature. Upon completion of the meeting, parent will be provided the IEP document with consent page for review and signature. The IEP meeting was convened at 11:30am. The IEP team determined that Izchak's participation in the alternate curriculum indicates he would benefit from participating in the CAA. The IEP team had no questions or comments. The IEP meeting concluded at 11:45am.

\*\*\*\*\*

Parent sent an email prior to the meeting stating they will not make it but we can proceed without them. Team met and discussed how they can help Izchak. We will meet again when the re-evaluation report is completed. This is a re-evaluation IEP to review the progress that Izchak Azoulay has made to and review the progress that he has made since his last IEP and to plan his educational program.

Today's IEP meeting is being held via tele/video conference and in person.

Introductions were made and the Introductory Statements were read aloud.

An IEP was held in April 2023 to review the progress that Izchak had made. The team is meeting today to review the school psychologists assessment and to talk about placement. There was a Hebrew translator provided for the district.

Accommodations/supports discussed. Opportunity for questions/comments.

Meeting Notes:

Dad mentioned that he used to take medication but stopped this past year. He has been struggling. Father also stated that when he is engaged and stimulated, he can do the work and memorize things, such as passages.

The School Psychologist recommends that he should have an OT assessment to help him with accessing the curriculum.

Dad wanted to know how he is performing in Reading, teacher stated that he is performing at a much lower level than he should. He should be reading at a 7th/8th grade but he is reading at a 2nd grade level. When reading at home, he struggles and gets very frustrated. His English level of reading is stronger than Hebrew.

The team started discussing placement options for Izchak and if he should be diploma track or on certificate based at another NPS. With Izchak performing at a 1st grade level in middle school as an eight grader, Izchak needs a lot of modifications that might be more appropriate at another school at his level. The father did not agree with this and wants him at a school that would give him exposure where he can perform at a much higher level.

Meeting was recessed at 2:54pm to look into alternative placements.

Meeting was reconvened December 1st at 10am, dad joined in via telephone. Offer of FAPE has been changed to Bridgeport, starting Monday December 4th.

The student, Izchak Azoulay, maintains his eligibility for special education as a student with Autism (AUT).

VILLAGE GLEN, a nonpublic school (NPS), continues to be an appropriate environment to meet Izchak Azoulay's unique educational needs. Izchak Azoulay continues to require a small, structured, therapeutic learning environment with immediate response behaviors and issues that are impacting him in accessing a District program.

Therefore, Izchak demonstrates the continued need for a highly restrictive educational setting that can be provided by a nonpublic school (NPS). The NPS staff supports Izchak in developing skills that would be beneficial when and if he is ready to transition to a District-operated program, such as making positive choices, completing assignments, staying on task, attending school/class regularly, maintaining appropriate and greater impulse control in preparation for a transition to the lesser restrictive educational environment in the future. Additionally, the NPS staff will continue to lessen the degree of structure and support, fade prompts, and reduce the need for accommodations, as appropriate.

Every effort will be made to reintegrate Izchak into the general education environment when appropriate. Izchak will be considered for a lesser restrictive educational setting when he is able to demonstrate noteworthy and consistent progress in the areas of attendance, academics, and behavior.

The IEP team recommends that Izchak continue to participate in a NPS which provides a small and highly structured therapeutic setting with social, emotional, and behavioral supports.

Izchak will continue to receive related services for Language and Speech for 1-5 Weekly Intervals of 60 minutes as a Direct Service (Single Provider) to be provided by a nonpublic school provider, outside of the classroom, at the nonpublic school, VILLAGE GLEN (NPS) for the Regular School Year (RSY) and the Extended School Year (ESY)

Izchak Azoulay is eligible for Extended School Year (ESY) under Criterion #3 - Based on special circumstances in the area of mental health related factors (history of physical and verbal aggression, elopement, destruction of property) it is necessary for student to participate in ESY as extensive breaks in instruction and provision of services negatively impact student's ability to maintain and achieve progress towards goals.

Parent was offered Parent Counseling and Training. Parent responded favorably and would like that information.

**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>	NPS		<b>Setting:</b>	Special Education					
<b>Eligibility:</b>	Eligible (AUT)		<b>Curriculum:</b>	General Education					
<b>Transportation:</b>	NPS Only - NPS Transportation		<b>Low Incident Support:</b>	None					
<b>Date District Received</b>									
<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	Regular	Weekly	1-5	School-Based	60	Language-Pragmatics, Language	--
10	Language/Speech	Effective on Signature Date	ESY	Weekly	1-5	School-Based	60	Language-Pragmatics, Language	--

**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"/>
Transition Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Extended School Year Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Supplementary Aids and Services (provided in general education classes and other general ed environments)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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

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

**For IEP Team Information**

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

## INDIVIDUALIZED EDUCATION PROGRAM Behavior Intervention Plan

*For Behavior Interfering with Student's Learning or the Learning of His/Her Peers*

**Los Angeles Unified School District**

**(Behavior Intervention Plan, pg. 1 of 3)**

Student **AZOULAY** **IZCHAK** **I** **MI** Date of Birth **04-MAR-2010** Meeting Date **31-MAY-2024**

**1** The behavior impeding learning is: Describe what it looks like:  
  scripting, repetitive questions and comments

**2** It impedes learning because: lack of work production  disrupts other students  requires instruction to stop   
 instructional time is lost  negative interaction with peers   
 other

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

**4** Frequency or intensity or duration of behavior: Frequency (x)  Period  Intensity  Duration (min)   
 Reported by  and/or  observed by

**PREVENTION PART I ENVIRONMENTAL FACTORS AND NECESSARY CHANGES**

**5** What are the predictors for the behavior? (Situations in which the behavior is likely to occur: people, time, place, subject, etc).

<input type="checkbox"/> Disruption in routines <input checked="" type="checkbox"/> Time of day <input checked="" type="checkbox"/> Unstructured time <input checked="" type="checkbox"/> Events from previous environments <input type="checkbox"/> Other Describe: <input type="text"/>	<input type="checkbox"/> Work level higher than student's ability <input checked="" type="checkbox"/> Internal physical/emotional state <input type="checkbox"/> Lack of freedom, choice, desirable activities, friends <input type="checkbox"/> Under stimulation	<input type="checkbox"/> Verbal directives <input type="checkbox"/> Peer conflict <input type="checkbox"/> Room conditions <input type="checkbox"/> Lack of predictability <input type="checkbox"/> Over stimulation <input type="checkbox"/> Specific room arrangement
---	---	--

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

Present in the environment: <input type="checkbox"/> Classroom seating arrangement <input type="checkbox"/> Peer status gained for misbehavior <input checked="" type="checkbox"/> Transition skills <input type="checkbox"/> Re-teaching <input type="checkbox"/> Social skills instruction <input type="checkbox"/> Choices <input type="checkbox"/> Other (Missing/Present): <input type="text"/>	<input type="checkbox"/> Noise levels <input type="checkbox"/> Inappropriate materials (age-appropriate) <input type="checkbox"/> Schedule <input type="checkbox"/> Task structuring <input type="checkbox"/> Consequences not clear to student	<input checked="" type="checkbox"/> Interactions (adult and/or peers) <input checked="" type="checkbox"/> Conflict resolution skills <input type="checkbox"/> Effective communication with parent <input type="checkbox"/> Communications system
---	---	---

### REMOVE STUDENT'S NEED TO USE THE PROBLEM BEHAVIOR

**7** What environmental changes, structure and supports are needed to remove the student's need to use this behavior? (Changes in Time/Space/Materials/Interactions to remove the likelihood of behavior)

Time Changes: Space Changes: Material Changes: Interaction:	<input type="checkbox"/> Give more time on tasks <input type="checkbox"/> Signal transition <input type="checkbox"/> Preferred seating <input type="checkbox"/> Personal space <input type="checkbox"/> Accommodated work <input checked="" type="checkbox"/> High interest materials <input type="checkbox"/> Use specific supportive words <input checked="" type="checkbox"/> Verbally praise student <input type="checkbox"/> Use specific support communications	<input type="checkbox"/> Allow completion in parts <input type="checkbox"/> Provide a break <input type="checkbox"/> Different work areas <input type="checkbox"/> Hands-on learning <input type="checkbox"/> Notebook organizer <input checked="" type="checkbox"/> Cue the student <input checked="" type="checkbox"/> Praise successes <input checked="" type="checkbox"/> Use calm, de-escalating language <input type="checkbox"/> Teach a closure system <input type="checkbox"/> Give less time on tasks <input type="checkbox"/> Study carrels <input type="checkbox"/> Tasks organized <input type="checkbox"/> Enlarged print size books <input checked="" type="checkbox"/> Model <input checked="" type="checkbox"/> Peer Models
--	---	--

Other

Who will establish? <input type="text" value="teacher"/>	Who will monitor? <input type="text" value="teacher and staff"/>	Frequency <input type="text" value="daily as needed"/>
---	---	---

## INDIVIDUALIZED EDUCATION PROGRAM Behavior Intervention Plan

*For Behavior Interfering with Student's Learning or the Learning of His/Her Peers*

**Los Angeles Unified School District**

**(Behavior Intervention Plan, pg. 2 of 3)**

Student     Date of Birth  Meeting Date

ALTERNATIVE PART II FUNCTIONAL FACTORS AND NEW BEHAVIORS TO TEACH AND SUPPORT

**8** Team believes the behavior occurs because: (Function of behavior in terms of getting, protest or avoiding something)

To Get:  Sensory input  Attention (peer)  Attention (staff)

To Avoid:  Tangible (desired item)  Tangible (desired activity)

Sensory input  Attention (peer)  Attention (staff)

Task (too difficult)  Task (too easy)  Task (too long)

Describe:

**9** What team believes the student should do INSTEAD of the problem behavior? (How should the student escape/protest/avoid or get his/her need met in an acceptable way?)

to get sensory input, Izchak will seek more discrete forms of self-stimulatory behaviors and instead, will engage in conversations with peers and staff appropriately.

**10** What teaching Strategies/Necessary Curriculum/Materials are needed?

Better communication skills  Anger management  Communication system  Self-management systems

Following schedules & routines  Learning new social skills  Learning how to negotiate  Learning structured choice

Learning new scripts  Learning notebook organization  Learning to use conflict resolution  Learning to request breaks

Other

Who will establish?  Who will monitor?  Frequency:

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

Physical:  High-fives  Smiles  Handshake

Verbal:  Pat on the back  Recognition of student's str...  Peer recognition

Contingent Access:  Time on the computer  Free time  Listen to music

Preferred activity  Positive phone calls or notes to home Describe:

Tangibles  Certificate sent home  Seating Location

Tokens and Points:  Tokens  Points

Privileges:  Exempt assignment  Extra test points

Other ideas:

Selection of reinforcer based on:

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

By whom?  Frequency

EFFECTIVE REACTION PART III REACTIVE STRATEGIES

**12** What strategies will be employed if the problem behavior occurs again. (1. Prompt student to switch to the replacement behavior, 2. Describe how staff should handle the problem behavior if it occurs again, 3. Positive discussion with student after behavior ends, 4. Any necessary further classroom or school consequences)

1. Prompt Izchak to engage in conversation with peers or staff. 2. Model what Izchak can say/do instead of scripting. 3. Have a positive conversation with him regarding alternative behaviors.

Personnel?

INDIVIDUALIZED EDUCATION PROGRAM  
Behavior Intervention Plan

For Behavior Interfering with Student's Learning or the Learning of His/Her Peers

Los Angeles Unified School District

(Behavior Intervention Plan, pg. 3 of 3)

Student AZOULAY IZCHAK I  
Last First MI

Date of Birth 04-MAR-2010

Meeting Date 31-MAY-2024

OUTCOMES

PART IV

BEHAVIORAL GOALS

13 Behavioral Goal: Goal #: 9

To decrease time scripting on the yard, Izchak will participate and interact with peers for 10 minutes with no more than 2 prompts in 3 out of 5 opportunities as measured by staff observations.

- The above behavioral goal is to:  Increase use of replacement behavior and may also include:  
 Reduce frequency of problem behavior  Develop new general skills that remove student's need to use the problem behavior

Observation and Analysis Conclusion

Are curriculum accommodations or modifications also necessary? Where described?  
\_\_\_\_\_

Yes  No

Are environmental supports/changes necessary?

Yes  No

Is reinforcement of replacement behavior alone enough? (no new teaching is necessary)?

Yes  No

Are both teaching of new replacement behavior AND reinforcement needed?

Yes  No

This BIP to be coordinated with other agency's service plans? Agency?  
\_\_\_\_\_

Yes  No

Person responsible for contact between agencies.  
\_\_\_\_\_

COMMUNICATION

PART V

COMMUNICATION PROVISIONS

14 Manner and content of communication:

- Phone calls  Email  Written notes  
 Daily reports  Daily charting  Behavioral logs  
 Weekly reports  
 Other \_\_\_\_\_

Between? Frequency?  
teacher and parent as needed

**INDIVIDUALIZED EDUCATION PROGRAM  
LANGUAGE AND SPEECH SERVICES CERTIFICATION (LAS CERTIFICATION)**

Los Angeles Unified School District

Attachment B

Student: ZCHAK I. AZOULAY

Date of Birth: 04-MAR-2010

Meeting Date: 31-MAY-2024

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

**Complete Step 1a or 1b**

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

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

**Step 1b. Interventions Not Applicable**

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

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

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

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

- A.** Student has received an assessment by a school psychologist that gives an indication of where the student's general ability lies. (if a language impairment is suspected)

OR

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

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

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

If the above is so, identify the area(s) of difficulty:

- Language disorder
- Articulation disorder
- Fluency disorder
- Voice disorder

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



INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

(ITP, pg. 1 of 3)

Student     
 Last First MI

Date of Birth

Meeting Date

INDIVIDUAL TRANSITION PLAN (ITP)

- Student was invited to IEP meeting:  Yes
- Student received mentoring:<sup>info</sup>  Yes  No
- Student referred and placed in an outside agency:<sup>info</sup>  Yes  No
- If yes, name of agency:
- Student participated in Work Experience Education:<sup>info</sup>  Yes  No
- Student received college awareness preparation:<sup>info</sup>  Yes  No
- Student received career awareness:<sup>info</sup>  Yes  No

Achievement of Transition Activities from Current ITP (not if first ITP)

Area	Completed	If no, indicate reason
Education/Training Activity	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> First ITP	<input type="text"/>
Employment Activity	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> First ITP	<input type="text"/>
Independent Living Skills Activity (as needed)	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A	<input type="text"/>

Section 1: Education/Training

Assessment (at least one assessment must be completed in this area).	Date	Assessment Name and Results: Indicate interests/abilities and area(s) of need (if applicable)
<input type="text" value="Transition Surveys, Checklists, or Informal Questionnaires"/> <input type="text"/> If other? <input type="text"/>	<input type="text" value="11-APR-2023"/>	Based on informal question asked during an interview, Izchak is unsure if he would like to continue his education.
<input type="text"/> <input type="text"/> If other? <input type="text"/>	<input type="text"/>	

Education/Training Postsecondary Goal

Upon completion of high school, the student will:	If other?
<input type="text" value="Other - (textbox)"/>	<input checked="" type="checkbox"/> Izchak is unsure if he would like to continue his education.

Education/Training Activity to Support Goal	Timeline	Person/Agency Responsible
<input type="text" value="transition between tasks independently or with identified supports"/> If other? <input type="text"/>	<input type="text" value="10-APR-2024"/>	<input type="text" value="Student"/> <input type="text"/> <input type="text" value="Special Education Teacher"/> <input type="text"/> <input type="text" value="Parent/Guardian/Family"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Student

Date of Birth

Meeting

Last

First

MI

Date

INDIVIDUAL TRANSITION PLAN (ITP)

Section 2: Employment

Assessment (at least one assessment must be completed in this area).	Date	Assessment Name and Results: Indicate interests/abilities and area(s) of need (if applicable)
<input type="text" value="Transition Surveys, Checklists, or Informal Questionnaires"/> <input type="button" value="v"/> If other? <input type="text"/>	<input type="text" value="11-APR-2023"/>	Based on informal questions asked during an interview, Izchak is unsure of what he would like to do after high school.
<input type="text"/> <input type="button" value="v"/> If other? <input type="text"/>	<input type="text"/>	

Employment Postsecondary Goal

Upon completion of high school, the student will:

If other?

Izchak is unsure of what he would like to do after high school.

Other - (textbox)

Employment Activity to Support Goal	Timeline	Person/Agency Responsible
<input type="text" value="research career interests and write about likes/dislikes and requirements of the job"/> If other? <input type="text"/>	<input type="text" value="10-APR-2024"/>	<input type="text" value="Student"/> <input type="button" value="v"/> <input type="text" value="Special Education Teacher"/> <input type="button" value="v"/> <input type="text" value="Parent/Guardian/Family"/> <input type="button" value="v"/> <input type="text"/> <input type="button" value="v"/> <input type="text"/> <input type="button" value="v"/> <input type="text"/> <input type="button" value="v"/>

Section 3: Independent Living (as needed)

Assessment (at least one assessment must be completed in this area).	Date	Assessment Name and Results: Indicate interests/abilities and area(s) of need (if applicable)
<input type="text" value="Transition Surveys, Checklists, or Informal Questionnaires"/> <input type="button" value="v"/> If other? <input type="text"/>	<input type="text" value="11-APR-2023"/>	Based on informal questions asked during an interview, Izchak would like to continue living at home with his family.
<input type="text"/> <input type="button" value="v"/> If other? <input type="text"/>	<input type="text"/>	

Independent Living Postsecondary Goal

Upon completion of high school, the student will:

If other?

live with family/relatives

Independent Living Activity to Support Goal	Timeline	Person/Agency Responsible
<input type="text" value="practice self management skills (e.g. accepting feedback and making changes, prioritizing tasks, managing time to accomplish goals)"/> If other? <input type="text"/>	<input type="text" value="10-APR-2024"/>	<input type="text" value="Student"/> <input type="button" value="v"/> <input type="text" value="Special Education Teacher"/> <input type="button" value="v"/> <input type="text" value="Parent/Guardian/Family"/> <input type="button" value="v"/> <input type="text"/> <input type="button" value="v"/> <input type="text"/> <input type="button" value="v"/> <input type="text"/> <input type="button" value="v"/>

Student AZOULAY

IZCHAK

I

Date of Birth 04-MAR-2010

Meeting

31-MAY-2024

Last

First

MI

Date

INDIVIDUAL TRANSITION PLAN (IEP)

**Course of study: A multi-year description of student's coursework from current year to anticipated exit year, in order to enable the student to meet their postsecondary goal.**

A course of study (or IGP) was reviewed with parent and student in relation to:

Courses completed:  Yes  No

Courses currently enrolled in:  Yes  No

Courses still needed:  Yes  No

IGP or course of study was provided to the parent or student over age 18 as required:  Yes

Student is working towards:  Certificate of Completion  Diploma

Additional courses/activities discussed that may support post secondary goals (e.g. SLC participation, electives or instruction related to postsecondary goals, community experiences, participation in other school clubs or organizations, etc.) NOTE: these are suggestions and contingent to availability:

Izchak will continue to take the required courses to complete the 7th grade.

**Future Agency Involvement:**

Are there agencies currently or prospectively providing or paying for transition services?  Yes  No

Do you give permission to the District to invite these agencies to the next IEP in which transition services will be reviewed?  Yes  No

Agency Name:

Agency Name:

Agency Name:

- |  |   |
|--|---|
| 1. Does the student's IEP include appropriate measurable postsecondary goals that cover education/training, employment and, as needed, independent living? <i>info</i>   | 1. <input checked="" type="checkbox"/> Yes                        |
| 2. Are the postsecondary goals updated annually? <i>info</i>   | 2. <input checked="" type="checkbox"/> Yes                        |
| 3. Is there evidence that the measurable postsecondary goals were based on age appropriate transition assessment? <i>info</i>  | 3. <input checked="" type="checkbox"/> Yes                        |
| 4. Are there transition services that will reasonably enable the student to meet their postsecondary goals? <i>info</i>  | 4. <input checked="" type="checkbox"/> Yes                        |
| 5. Do the transition services include a course of study that is a multi-year description of coursework from the student's current year to anticipated exit year and that is designed to help the student achieve the identified postsecondary goals? <i>info</i> | 5. <input checked="" type="checkbox"/> Yes                        |
| 6. Is (are) there annual IEP goal(s) related to the student's transition services needs? <i>info</i>   | 6. <input checked="" type="checkbox"/> Yes                        |
| 7. Is there evidence that the student was invited to the IEP team meeting where transition services were discussed? <i>info</i>  | 7. <input checked="" type="checkbox"/> Yes                        |
| 8. If appropriate, is there evidence that a representative of any participating agency was invited to the IEP team meeting with the prior consent of the parent or student who has reached the age of majority? <i>info</i>                                      | 8. <input type="radio"/> Yes <input checked="" type="radio"/> N/A |