

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Identification Number 030410M052 SSID 6699709708

Eligible (AUT)

Student AZOULAY CHAIM (DAVI) Y MI Last First MI

Date of Birth: 04-MAR-2010

Section A: Meeting Information

Table with 2 columns: Pertinent Dates and Type of Meeting. Includes fields for meeting dates and meeting types like Annual Review, Three Year Review, etc.

Location of Meeting: BRIDGEPORT SCHOOL (NPS) District Name: Los Angeles Unified School Distri

Section B: Student Information

Student information fields including Date of Birth, Gender, Ethnic Code, Home Address, City, Telephone, School of Attendance, etc.

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

Placement and family information questions: Is the student living in a Family Foster Home (FFH)?, Licensed Children's Institution, etc.

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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

Goal for: (example - Reading)	Achieved		If No, explain the reason the goal/objective was not achieved
	Yes	No	
1 <input type="text" value="Language and Speech"/>	<input type="radio"/>	<input checked="" type="radio"/>	needs more prompts
Category <input type="text" value="Language – Pragmatics"/>			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input type="radio"/>	<input checked="" type="radio"/>	needs more prompts
2 <input type="text" value="Behavioral Support"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Category <input type="text" value="Behavior Intervention"/>			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
3 <input type="text" value="Community"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Category <input type="text" value="Vocational Education"/>			
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="Social Skills"/>	<input type="radio"/>	<input checked="" type="radio"/>	Requiring 3 prompts at 80% accuracy
Category <input type="text" value="Communication"/>			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
5 <input type="text" value="Functional Writing"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Category <input type="text" value="Writing"/>			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
6 <input type="text" value="Vocational"/>	<input type="radio"/>	<input checked="" type="radio"/>	Requiring 2 prompts at 80% accuracy
Category <input type="text" value="Math"/>			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
7 <input type="text" value="Functional Math"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Category <input type="text" value="Math"/>			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
8 <input type="text" value="Functional Reading"/>	<input type="radio"/>	<input checked="" type="radio"/>	Requiring 2 prompts at 80% accuracy
Category <input type="text" value="Reading"/>			
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	<input type="text"/>
9 <input type="text"/>	<input type="radio"/>	<input type="radio"/>	
Category <input type="text"/>			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
10 <input type="text"/>	<input type="radio"/>	<input type="radio"/>	
Category <input type="text"/>			
Objective 1 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Objective 2 met	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student AZOULAY

CHAIM (DAVI

Y

Date of Birth 04-MAR-2010

Meeting Date 30-SEP-2024

Last

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Section E: Present Level of Performance

Performance Area: Functional Reading

Category: Reading

Assessment/Monitoring Process Used: Work Samples, Observations

State/District Assessment Results:

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

Strengths: David can answer comprehension detail questions including identifying details or facts in literary and informational text with moderate prompting. David can read 50 fry words. When working with a staff member, individually, he will read aloud when asked. He benefits with pictures and discussion of the story. Currently, David is using the Unique curriculum to answer questions from a short story. He uses picture supports to answer comprehension questions. With reminders, David will read aloud slowly and clearly. When attentive, minimal prompting is required for David to participate in a reading activity.
Need: David would benefit from answering comprehension questions on reading at his level. This will also help in increasing his vocabulary by seeing/reading vocabulary words in context. When not attentive to the activity (upset, tired, sleeping, etc), David requires moderate prompting to engage in activity.
Impact of Disability: David's autism impairs his ability to comprehend material he has read in the area of Functional Reading, which impacts his involvement and progress in the general education curriculum to such a degree that his instruction is based on alternate achievement standards using alternate curriculum.

Performance Area: Functional Writing

Category: Writing

Assessment/Monitoring Process Used: Work Samples, Observations

State/District Assessment Results:

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

Strengths: David met his previous goal, 'When given a picture or a topic of interest, David will write a paragraph (3-4 complete sentences) using correct capitalization, spelling and punctuation in his sentences with 90% accuracy in 4 out of 5 trials with 2-3 prompts.' David can dictate a sentence while using descriptive words (adjectives) to describe a narrative experience and copy from a written sentence on paper using correct capitalization, spelling, and punctuation in his sentences. It is important to note that David does not currently take homework home or study for weekly spelling tests. David benefits with maximum prompts (4 or more) to copy a sentence from a separate piece of paper. When attentive, minimal prompting is required for David to participate in a writing activity.
Need: David would benefit from writing a sequenced paragraph (3-4 sentences) about a picture or about a topic provided by the teacher. This will encourage David to focus and pay attention during readings. When not attentive to the activity (upset, tired, sleeping, etc), David requires moderate prompting to engage in activity.
Impact of Disability: David's autism impairs his ability to write descriptive sentences in the area of Functional Writing, which impacts his involvement and progress in the general education curriculum to such a degree that his instruction is based on alternate achievement standards using alternate curriculum.

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Section E: Present Level of Performance

Performance Area:

Functional Math

Category:

Math

Assessment/Monitoring Process Used:

Work Samples, Observations

State/District Assessment Results:

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

Strengths: David is able to identify only nickels when asked the names of coins and is currently learning how much each coin is worth. With prompts, David completes his assigned work in math class. When given a pattern of word problems to add, David is able to use a calculator to solve the problems with moderate prompting. David met his previous goal, 'David will add or subtract a single digit number without a calculator with 100% accuracy and with only 1 prompt in 4 out of 5 trials.' When attentive, minimal prompting is required for David to participate in a math activity.

Need: David should work on using the 'Dollar Over Method' to be able to purchase items with the proper amount of money up to \$10.00. This will help him be able to make purchases while out in the community. David requires moderate prompting to engage in activity.

Impact of Disability: David's autism impairs his ability to complete addition and subtraction word problems in the area of Functional Math, which impacts his involvement and progress in the general education curriculum to such a degree that his instruction is based on alternate achievement standards using alternate curriculum.

Performance Area:

Vocational Education

Category:

Vocational Education

Assessment/Monitoring Process Used:

Work Samples, Observations

State/District Assessment Results:

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

Strengths: David has made progress towards completing a multi-step assignment. When needed, he will not always ask for assistance from staff. He is able to complete a classroom job with assistance. David has made improvements at staying with the group while transitioning from activities around campus (Art, Music, PE, assemblies, etc). David transitions well to his bus at dismissal. He has been exploring various jobs in his classroom and is currently determining his likes/dislikes of possible jobs. He met his previous goal, he can now complete a classroom job with 80% accuracy. When attentive, minimal prompting is required for David to participate in a vocational activity.

Need: David should continue to work on remaining focused on tasks while following multiple step directions. He should work on completing a 4-5 step vocational job with visual cues with up to 2 prompts.

Impact of Disability: David's autism impairs his ability to classroom jobs in the area of Vocational Education, which impacts his involvement and progress in the general education curriculum to such a degree that his instruction is based on alternate achievement standards using alternate curriculum.

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Section E: Present Level of Performance

Performance Area: Social Skills

Category: Social Functioning

Assessment/Monitoring Process Used: Observations

State/District Assessment Results:

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

Strengths: David enjoys greeting his peers and staff. He would appropriately ask a friend for a high five. He enjoys drawing and talking to friends about common interests. During recess time he loves to play and run around with friends and 90% of the time would have nice hands during these activities based on observations made during the last year. David is able to use phrases to ask a peer/staff for a material by requesting using the phrase 'can I use your ...' (i.e. paper, marker, pen, pencil). David made progress towards engaging in a reciprocal turn-taking conversation with a peer about a related topic in 4 out of 5 exchanges. He can now use phrases to ask a peer/staff for a material by requesting using the phrase 'can I use your ...' (i.e. paper, marker, pen, pencil) with 80% accuracy in 4 out of 5 opportunities with 3-4 prompts.
Need: Although David has improved at having reciprocal conversation, he should continue to work on this with topics that are chosen by other peers and staff. He has lots of ideas to share, but struggles to listen to others as he tries to get his ideas out.
Impact of Disability: David's autism impairs his ability to request materials in the area of Social Skills/Communication which impacts his involvement and progress in the general education curriculum to such a degree that his instruction is based on alternate achievement standards using alternate curriculum.

Performance Area: Community

Category: Activities of Daily Living

Assessment/Monitoring Process Used: Observations

State/District Assessment Results:

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

Strengths: David has participated in CBI with his class and is able to remain with the group with minimal prompting. While transitioning from activities around campus (Art, Music, PE, assemblies, etc) he is able to stay with the class. David can identify dollars and coins with just 1-2 prompts. When attentive, minimal prompting is required for David to participate in an activity. He met his previous goal, 'David will make a shopping list for his wants and needs before going to the store (clothing store, grocery store) with 90% accuracy with only 1 prompt in 4 out of 5 opportunities.'
Need: David would benefit from being more attentive during shared community situations, in order to improve his awareness during social activities. While in the community, David should work on following the proper purchasing sequence (present item, wait for price, pay for item, etc.), to increase his awareness during shared community activities.
Impact of Disability: David's autism impairs his ability to use the dollar-over method in the area of Vocational Education 2, which impacts his involvement and progress in the general education curriculum to such a degree that his instruction is based on alternate achievement standards using alternate curriculum.

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Section E: Present Level of Performance

Performance Area:

Behavior Support

Category:

Behavior Intervention



Assessment/Monitoring Process Used:

Observations

State/District Assessment Results:

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

Strengths: When David is participating, David is able to interact with staff and peers during class instruction. He follows verbal instructions and responds to questions from staff/peers. David can attend to a worksheet, lesson, or to complete an assignment with only 1-2 prompts. He can work without maximum support and a token economy system. He can sit and complete an activity without leaving class and hurting others. He is currently accessing the curriculum and seeks approval from staff in doing his work. When attentive, minimal prompting is required for David to participate in an activity. He was able to meet his goal, 'David will raise his hand and wait to be called on by the teacher when he has a statement or question in class with 90% accuracy and with only 1 prompt in five trials, as evidenced by teacher data collection.'

Need: David enjoys participating in class activities/instruction, but should work on improving his actual participation during instructional time. When not attentive to the activity (upset, tired, sleeping, etc), David requires moderate prompting to engage in activity.

Impact of Disability: David's autism impairs his ability to sit and attend a lesson in the area of Behavior Support, which impacts his involvement and progress in the general education curriculum to such a degree that his instruction is based on alternate achievement standards using alternate curriculum.

Performance Area:

[Empty text box]

Category:

[Empty dropdown menu]

Assessment/Monitoring Process Used:

[Empty text box]

State/District Assessment Results:

[Empty text box]

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

[Empty text box]

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Section E: Present Level of Performance

Performance Area: Pragmatic Language

Category: Language - Pragmatics

Assessment/Monitoring Process Used:

State/District Assessment Results:

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

Summary of Services: Chaim, who goes by David at school, is a 14 year and 6-month-old student who attends the Bridgeport program at the Help Group, Sherman Oaks. David receives 60 minutes of language and speech services delivered in a collaborative model. The concern lies in the area of pragmatic language.
Area of Strengths: David is a friendly and creative boy who attends language and speech sessions with support. He enjoys drawing and music. When alert, David is eager to participate in group discussions and the tasks at hand. His communication skills include greeting/bidding farewell, making requests, seeking/gaining attention, protesting/refusing, commenting, and answering simple yes/no questions. He follows routine 2-3 step commands and uses simple sentences and phrases. He answers basic 'what' questions and usually communicates using utterances 2-5 words in length. After reading a passage, David answers reading comprehension questions pertaining to the given content. David has made progress towards her goal to make related comments and/or ask on-topic questions.

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):

Area of Needs: David continues to benefit from language and speech services to participate during social activities. David continues to exhibit delayed receptive language skills as well as delayed expressive and pragmatic language skills. David requires prompts to engage in social activities (i.e game, conversation). In order to be an active participant with peers/staff, she is given moderate prompts/cues in order to remain engaged in group activities for an extended amount of time. David has a lot of language however he requires prompts in order to share his thoughts and/or ask questions on class. He requires prompts to draw his attention back to the tasks at hand. David requires prompts to stay awake throughout the sessions. Limited alertness impacts his performance towards his LAS goal.
Impact of Disability: David's challenges in the areas of pragmatic skills and language second to his eligibility of Autism adversely impact his ability to communicate his wants, needs, and ideas effectively, which further impact his ability to participate in classroom activities, interact with peers, and access curriculum.
Written by: Patricia Pangan M.S., CCC-SLP
The Help Group, Sherman Oaks

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Section E: Present Level of Performance

Performance Area: Health
Category: Health
Assessment/Monitoring Process Used: Physical health assessment, Welligent record review
State/District Assessment Results:

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

Health Summary: Chaim (David) is a fourteen-year-old student at Bridgeport NPS. The student was seen at the school site, and welligent health records were reviewed. There is no documentation of any chronic illness, serious injuries, accident, or hospitalization in the welligent. Also, there is no documentation of medication taking at the school.

Strengths: Chaim passed the school site vision screening using a spot vision screener on 09/18/2024. Also, he passed the lauds hearing screening on 10/19/2023. Chaim is independent with feeding and toileting and is ambulatory without assistance.

Areas of Need: Physical health is not an area of need.

Impact of Disability: Chaim's physical health does not impact his involvement and progress in the educational program.

Accommodation/ Modifications: None related to health.

Grace Ogbunamiri, RN. 09/30/2024.

Performance Area:
Category:
Assessment/Monitoring Process Used:
State/District Assessment Results:

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

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Section F: Eligibility

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

[Empty text box for disability discussion]

For Initial IEP, interventions attempted prior to determining eligibility:

[Empty text box for interventions]

Eligible as a student with the disability of:

Code: 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:

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

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Meeting Date **30-SEP-2024**

Section G: Annual Goals and Objectives

Performance Area: **Functional Reading** Category: **Reading** Annual Goal #: **1**

At his reading level, David will be able to answer wh- comprehension (who, what, where, when, how) questions at 80% accuracy in 4 out of 5 trials with 2 prompts as measured by teacher 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:

At his reading level, David will be able to answer wh- comprehension (who, what, where, when, how) questions at 60% accuracy in 3 out of 5 trials with 3 prompts as measured by teacher observation.

Incremental objective #2 related to the goal:

At his reading level, David will be able to answer wh- comprehension (who, what, where, when, how) questions at 70% accuracy in 3 out of 5 trials with 3 prompts as measured by teacher observation.

Date to be achieved: **January** **2025** MO/YR

Date to be achieved: **May** **2025** 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 **30-SEP-2024**

Section G: Annual Goals and Objectives

Performance Area: **Behavioral Support** Category: **Behavior Intervention** Annual Goal #: **7**

David will increase his participation during class activities and refrain from off task behavior (upset, tired, sleeping, etc) with 80% accuracy in 4 out of 5 opportunities and no more than 2 prompts as measured by teacher observation and data collection.

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:

David will increase his participation during class activities and refrain from off task behavior (upset, tired, sleeping, etc) with 60% accuracy in 2 out of 5 opportunities and no more than 4 prompts as measured by teacher observation and data collection.

Incremental objective #2 related to the goal:

David will increase his participation during class activities and refrain from off task behavior (upset, tired, sleeping, etc) with 70% accuracy in 3 out of 5 opportunities and no more than 3 prompts as measured by teacher observation and data collection.

Date to be achieved: **January** **2025** MO/YR

Date to be achieved: **May** **2025** MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

EXPLANATION OF MARKS					
4 GOAL MET OR EXCEEDED	3 SUBSTANTIAL PROGRESS (50-99% of goal met)	2 PARTIAL PROGRESS (1-49% of goal met)	1 NO PROGRESS		
1st Reporting Period	2nd Reporting Period	3rd Reporting Period	4th Reporting Period (Secondary Only)	Goal Achievement	
Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>		
Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Progress Mark: <input type="text"/>	Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No	
Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No	Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No	
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	If "No" please explain: <input type="text"/>	

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Section G: Annual Goals and Objectives

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

David will be able to write a sequenced paragraph (3-4 sentences; first, then, after, finally) about a picture or about a topic provided by the teacher with no more than 3 verbal prompts in 4 out of 5 opportunities with 80% accuracy measured by work samples and teacher 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:

David will be able to write a sequenced paragraph (3-4 sentences; first, then, after, finally) about a picture or about a topic provided by the teacher with no more than 5 verbal prompts in 3 out of 5 opportunities with 60% accuracy measured by work samples and teacher observation.

Incremental objective #2 related to the goal:

David will be able to write a sequenced paragraph (3-4 sentences; first, then, after, finally) about a picture or about a topic provided by the teacher with no more than 4 verbal prompts in 3 out of 5 opportunities with 70% accuracy measured by work samples and teacher observation.

Date to be achieved: **January** **2025** MO/YR

Date to be achieved: **May** **2025** MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR EXCEEDED				3 SUBSTANTIAL PROGRESS (50-99% of goal met)				2 PARTIAL PROGRESS (1-49% of goal met)				1 NO PROGRESS			
1st Reporting Period		2nd Reporting Period		3rd Reporting Period		4th Reporting Period (Secondary Only)		Goal Achievement							
Date: <input type="text"/>		Date: <input type="text"/>		Date: <input type="text"/>		Date: <input type="text"/>									
Progress Mark: <input type="text"/>		Progress Mark: <input type="text"/>		Progress Mark: <input type="text"/>		Progress Mark: <input type="text"/>		Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No							
Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No		Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No		Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No		Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No		Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No							
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>		If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>		If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>		If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>		If "No" please explain: <input type="text"/>							

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student **AZOULAY** **CHAIM (DAVI** **Y**
 Last First MI

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

Meeting Date **30-SEP-2024**

Section G: Annual Goals and Objectives

Performance Area: **Functional Math** Category: **Math** Annual Goal #: **3**

David will be able to use the Dollar Over Method up to \$10.00 at 80% accuracy in 4 out of 5 opportunities with 3 prompts as measured by work samples and teacher 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:

David will be able to use the Dollar Over Method up to \$5.00 at 60% accuracy in 3 out of 5 opportunities with 5 prompts as measured by work samples and teacher observation.

Incremental objective #2 related to the goal:

David will be able to use the Dollar Over Method up to \$7.00 at 70% accuracy in 3 out of 5 opportunities with 4 prompts as measured by work samples and teacher observation.

Date to be achieved: **January** **2025** MO/YR

Date to be achieved: **May** **2025** MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

4 GOAL MET OR EXCEEDED				3 SUBSTANTIAL PROGRESS (50-99% of goal met)				2 PARTIAL PROGRESS (1-49% of goal met)				1 NO PROGRESS			
1st Reporting Period		2nd Reporting Period		3rd Reporting Period		4th Reporting Period (Secondary Only)		Goal Achievement							
Date: <input type="text"/>		Date: <input type="text"/>		Date: <input type="text"/>		Date: <input type="text"/>									
Progress Mark: <input type="text"/>		Progress Mark: <input type="text"/>		Progress Mark: <input type="text"/>		Progress Mark: <input type="text"/>		Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No							
Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No		Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No		Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No		Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No		Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No							
If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>		If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>		If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>		If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>		If "No" please explain: <input type="text"/>							

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student **AZOULAY** **CHAIM (DAVI** **Y**
 Last First MI

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

Meeting Date **30-SEP-2024**

Section G: Annual Goals and Objectives

Performance Area: **Vocational Ed.** Category: **Vocational Education** Annual Goal #: **4**

David will be able to complete a 4-5 step vocational task (sweeping, wiping tables, taking out the trash, etc) at 80% accuracy in 4 out of 5 opportunities with 2 prompts, as measured by work samples and teacher 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:

David will be able to complete a 4-5 step vocational task (sweeping, wiping tables, taking out the trash, etc) at 60% accuracy in 3 out of 5 opportunities with 2 prompts, as measured by work samples and teacher observation.

Incremental objective #2 related to the goal:

David will be able to complete a 4-5 step vocational task (sweeping, wiping tables, taking out the trash, etc) at 70% accuracy in 3 out of 5 opportunities with 3 prompts, as measured by work samples and teacher observation.

Date to be achieved: **January** **2025** MO/YR

Date to be achieved: **May** **2025** 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** **CHAIM (DAVI** **Y**
Last **First** **MI**

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

Meeting Date **30-SEP-2024**

Section G: Annual Goals and Objectives

Performance Area: **Community** Category: **Activities of Daily Livin** Annual Goal #: **5**

Jonathan will be able to follow the proper purchasing sequence while making purchases (waiting for price, paying amount, waiting for change and receipt, then gathering purchased item) at 80% accuracy in 4 out of 5 opportunities with 2 prompts, as measured by work samples and teacher 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:

Jonathan will be able to follow the proper purchasing sequence while making purchases (waiting for price, paying amount, waiting for change and receipt, then gathering purchased item) at 60% accuracy in 3 out of 5 opportunities with 4 prompts, as measured by work samples and teacher observation.

Incremental objective #2 related to the goal:

Jonathan will be able to follow the proper purchasing sequence while making purchases (waiting for price, paying amount, waiting for change and receipt, then gathering purchased item) at 70% accuracy in 3 out of 5 opportunities with 3 prompts, as measured by work samples and teacher observation.

Date to be achieved: **January** **2025** MO/YR

Date to be achieved: **May** **2025** MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

EXPLANATION OF MARKS				Goal Achievement
<i>4 GOAL MET OR EXCEEDED</i>	<i>3 SUBSTANTIAL PROGRESS (50-99% of goal met)</i>	<i>2 PARTIAL PROGRESS (1-49% of goal met)</i>	<i>1 NO PROGRESS</i>	
1st Reporting Period Date: <input type="text"/>	2nd Reporting Period Date: <input type="text"/>	3rd Reporting Period Date: <input type="text"/>	4th Reporting Period (Secondary Only) Date: <input type="text"/>	
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** **CHAIM (DAVI** **Y**
 Last First MI

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

Meeting Date **30-SEP-2024**

Section G: Annual Goals and Objectives

Performance Area: **Social Skills** Category: **Social Functioning** Annual Goal #: **6**

David will engage in a reciprocal turn-taking (4-5 exchanges) conversation (topic chosen by peer/staff) by asking questions or by providing responses or comments related to the topic in 4 out of 5 opportunities, with no more than 2 prompts within daily 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:

David will engage in a reciprocal turn-taking (2-3 exchanges) conversation (topic chosen by peer/staff) by asking questions or by providing responses or comments related to the topic in 3 out of 5 opportunities, with no more than 3 prompts within daily opportunities.

Incremental objective #2 related to the goal:

David will engage in a reciprocal turn-taking (4-5 exchanges) conversation (topic chosen by peer/staff) by asking questions or by providing responses or comments related to the topic in 3 out of 5 opportunities, with no more than 3 prompts within daily opportunities.

Date to be achieved: **January** **2025** MO/YR

Date to be achieved: **May** **2025** MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

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

1st Reporting Period Date:	2nd Reporting Period Date:	3rd Reporting Period Date:	4th Reporting Period (Secondary Only) Date:	Goal Achievement
Progress Mark: <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	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	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	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	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** **CHAIM (DAVI** **Y**
 Last First MI

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

Meeting Date **30-SEP-2024**

Section G: Annual Goals and Objectives

Performance Area: **Pragmatics** Category: **Language – Pragmatics** Annual Goal #: **8**

David will improve ability to tune into people, environment and topic as demonstrated by responding with relevant information (i.e making connected comments and/or asking/answering on-topic questions) given no more than 2 verbal/visual prompts in 4/5 opportunities across 3 consecutive sessions as measured by therapist and 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:

David will improve ability to tune into people, environment and topic as demonstrated by responding with relevant information (i.e making connected comments and/or asking/answering on-topic questions) given no more than 4 verbal/visual prompts in 4/5 opportunities across 3 consecutive sessions as measured by therapist and staff observations.

Incremental objective #2 related to the goal:

David will improve ability to tune into people, environment and topic as demonstrated by responding with relevant information (i.e making connected comments and/or asking/answering on-topic questions) given no more than 3 verbal/visual prompts in 4/5 opportunities across 3 consecutive sessions as measured by therapist and staff observations.

Date to be achieved: **February** **2025** MO/YR

Date to be achieved: **July** **2025** MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

EXPLANATION OF MARKS				Goal Achievement
<i>4 GOAL MET OR EXCEEDED</i>	<i>3 SUBSTANTIAL PROGRESS (50-99% of goal met)</i>	<i>2 PARTIAL PROGRESS (1-49% of goal met)</i>	<i>1 NO PROGRESS</i>	
1st Reporting Period Date: <input type="text"/>	2nd Reporting Period Date: <input type="text"/>	3rd Reporting Period Date: <input type="text"/>	4th Reporting Period (Secondary Only) Date: <input type="text"/>	
Progress Mark: <input type="text"/> Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	Progress Mark: <input type="text"/> Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	Progress Mark: <input type="text"/> Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	Progress Mark: <input type="text"/> Is progress sufficient to meet annual goal? <input type="radio"/> Yes <input type="radio"/> No If "No" please comment: <input type="checkbox"/> Needs More Time <input type="checkbox"/> Excess Absence/Tardy <input type="checkbox"/> Assignments Not Completed <input type="checkbox"/> Need to review/revise Goal <input type="checkbox"/> Other <input type="text"/>	Objective 1 Met: <input type="radio"/> Yes <input type="radio"/> No Objective 2 Met: <input type="radio"/> Yes <input type="radio"/> No If "No" please explain: <input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student
 Last First MI

Date of Birth

Meeting Date

Section 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.

District Assessments	
How will the student participate in District Assessments?	
<input type="checkbox"/>	Full Participation
<input type="checkbox"/>	Partial Exemption from specific assessment(s). Indicate the exempt assessment and an appropriate replacement assessment below:
Exempt Assessment	Replacement Assessment
<input type="text" value=""/>	<input type="text" value=""/>
<input type="checkbox"/>	Accommodations:

CAA - California Alternate Assessments for ELA, mathematics and science

ELA

	Designated Support	Accommodations
Embedded		
Non-Embedded	1. Separate setting - Testing location, including time of assessment, lighting, acoustics, and furniture, may be altered. 2. Simplified test directions - Simplified or paraphrased test directions are provided to the student by the test administrator or examiner.	

Math

	Designated Support	Accommodations
Embedded		
Non-Embedded	1. Separate setting - Testing location, including time of assessment, lighting, acoustics, and furniture, may be altered. 2. Simplified test directions - Simplified or paraphrased test directions are provided to the student by the test administrator or examiner.	

Science

	Designated Support	Accommodations
Embedded		
Non-Embedded	1. Separate setting - Testing location, including time of assessment, lighting, acoustics, and furniture, may be altered. 2. Simplified test directions - Simplified or paraphrased test directions are provided to the student by the test administrator or examiner.	

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student AZOULAY
Last

CHAIM (DAVI
First

Y
MI

Date of Birth 04-MAR-2010

Meeting Date 30-SEP-2024

Section N: Procedural Safeguards and Follow-up Actions

- A Parent's Guide to Special Education Services including Procedural Rights & Safeguards was provided to the parent in his/her primary language.
- The IEP Team Meeting Introductory Statements were read aloud at the beginning of the IEP Team meeting.
- The parent/guardian was informed of his/her right to a written translation of the IEP.

Is the parent/guardian requesting computer generated translation?* Yes No

Select Preferred Language:

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

Is the parent/guardian requesting official translation? Yes No Select Preferred Language:

Specify the Individual Pages to be translated:

Special Requests:

For students who are 17 years old, the student and parent(s)/guardian(s) have been informed that the educational decision-making rights will transfer to the student at 18 years of age, unless the court has determined otherwise.

Pandemic Learning Loss Consideration of Compensatory and/or Recoupment Services

Compensatory Education Consideration:

- The IEP team has reviewed and discussed whether compensatory education is required due to the COVID-19 pandemic. The IEP team has determined:
 - Student received all of their special education and related aids and services required by their IEP. Compensatory education is not required.
 - Student did not receive all of their special education and related aids and services required by their IEP. Compensatory education offer details are documented in FAPE 2- Summary of Services.
 - Student did not receive all of the special education and related aids and services required by their IEP. However, no compensatory education was warranted for the reasons documented by the IEP team in FAPE Part 2 Part 4.
 - Compensatory education consideration was documented on IEP dated

Recoupment Services Consideration:

- The IEP team has reviewed and discussed student's progress/achievement and considered factors that may have impacted student's learning during the school facility closures as a result of the COVID-19 pandemic. The IEP team has determined:
 - Student has made expected progress toward IEP goals and/or progress is in alignment with expectations of progress/goal achievement. No recoupment services are recommended.
 - Student experienced learning loss as a result of the school facility closures caused by the COVID-19 pandemic and recoupment services are necessary. The IEP team discussed recoupment services to address past learning loss. Recoupment services offer details are included in FAPE Part 2, Part 4 of the IEP (including completion of a service grid, as necessary).
 - Recoupment services consideration was documented on IEP dated

- Preschool Only Consideration (Transition IEP)
- 30-Day IEP Consideration (Out-of-District)
- Student attends private school within district boundaries and resides outside of district boundaries (Eligibility Determination Only)

THIS SPACE DELIBERATELY LEFT BLANK.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

AZOULAY

CHAIM (DAVI

Y

Date of Birth

04-MAR-2010

Meeting Date

30-SEP-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	17-SEP-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 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 30-SEP-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 tómese un momento para completar la siguiente encuesta escaneando el código QR con la cámara de su teléfono inteligente. También puede realizar la encuesta en este enlace:

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

Please ask your school staff if in need of assistance.
En caso que necesite asistencia, por favor solicitesela al personal de la escuela.



INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Reconvened Meeting Date

Student
 Last First MI

Date of Birth

Meeting Date

Section R: Names and Signatures (Signatures on File)

Team Member	Print Name	Signature
Parent/Guardian	<input type="text"/>	<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="Dimitri Watson"/>	<input type="text" value="Dimitri Watson"/>
Special Education Teacher	<input type="text" value="Carlos Gudino"/>	<input type="text" value="Carlos Gudino"/>
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" value="NPS LAS Provider"/>	<input type="text" value="Patricia Pangan"/>	<input type="text" value="Patricia Pangan"/>
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="Orly Benun (01:30pm - 01:45pm)"/>	<input type="text" value="Orly"/>
Sign Language Interpreter	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Other <input type="text" value="NPS Administrator"/>	<input type="text" value="Elena Ramirez"/>	<input type="text" value="Elena Ramirez"/>
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

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.

Step A.	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.
<p>The student requires a small learning environment/campus with immediate response to distractions, social and academic frustrations. Therefore, the student demonstrates the continued need for a highly restrictive educational setting that can be provided by a nonpublic school (NPS). Additionally, the NPS staff will continue to lessen the degree of structure and support, fade prompts, and reduce the need for accommodations, as appropriate.</p>		

Step B.	Can the supports, services, accommodations and/or modifications in the student's IEP be made available on a general education site in a special day program?	
	<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.
<p>The student requires a small learning environment/campus with immediate response to distractions, social and academic frustrations. Therefore, the student demonstrates the continued need for a highly restrictive educational setting that can be provided by a nonpublic school (NPS). Additionally, the NPS staff will continue to lessen the degree of structure and support, fade prompts, and reduce the need for accommodations, as appropriate.</p>		

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student
Last First MI

Date of Birth

Meeting Date

ANNUAL LEAST RESTRICTIVE ENVIRONMENT ANALYSIS (Continued)

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

Step C.	Can the supports, services, accommodations and/or modifications in the student's IEP be made available in a special school setting?	
	<input 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; width: 100%;"></div>		

Step D.	Can the supports, services, accommodations and/or modifications in the student's IEP be made available in a home/hospital setting?	
	<input type="radio"/> Yes <input type="radio"/> No	If the answer is YES, then a home/hospital setting is the appropriate placement. If the answer is NO, go to the question below.
	<input type="radio"/> Yes <input type="radio"/> No	If not currently available, can the required supports, services, accommodations and/or modifications be made available in a home/hospital setting? If YES, all required supports, services, accommodations and/or modifications must be provided within a reasonable timeline. If the answer is NO, please articulate why in the box below. Then go to Step E.
<div style="border: 1px solid black; height: 80px; width: 100%;"></div>		

Step E.	Can the supports, services, accommodations and/or modifications in the student's IEP be made available in a residential care facility?	
	<input type="radio"/> Yes <input type="radio"/> No	If not currently available, articulate in the IEP what supports, accommodations and/or modifications are required for the student in this setting.
	<div style="border: 1px solid black; height: 80px; width: 100%;"></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

Step F.	The student's needs as reflected in the contents of this IEP, and the placement being considered by the IEP team, outweigh any potential harmful effects at this time, including (check all that apply):	
	<input 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"/>	<input type="text"/>
Eligibility: (from Page 4)	Eligible (AUT)	
	<i>Final IEP Reason</i> <i>Final IEP Effective Date:</i>	
Curriculum	<input type="text" value="Alternate Curriculum"/>	<input type="text"/>
Placement	Type of School <input type="text" value="Nonpublic School"/>	<input type="text"/>
	Name of School <input type="text" value="BRIDGEPORT SCHOOL (NPS)"/>	<input type="text"/>
Instructional Setting	Setting <input type="text" value="Special Education"/>	<input type="text"/>
	Program <input type="text" value="NPS"/>	<input type="text"/>
	Special Day Minutes/Wk <input type="text" value="1800"/>	<input type="text"/>
	Addresses Goals <input type="text" value="2(Functional Writing),5(Community),4(Vocational Ed.),6(Social Skills),1(Functional Reading),3(Functional Math),7(Behavioral Support),8(Pragmatics)"/>	<input type="text"/>
Additional Factors	Low Incident Support <input type="text" value="None"/>	<input type="text"/>
	Assistive Technology Support <input type="text" value="No"/>	<input type="text"/>
	Transportation <input type="text" value="NPS Only - NPS Transportation"/>	<input type="text"/>
	Extended School Year/Intersession <input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="text"/>
	Parent Counseling and Training (PCT) <input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="text"/>
	ESY Transportation <input type="text" value="Home to School"/>	<input type="text"/>
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"/>	<input type="text"/>
	Instructional Modifications <input type="text" value="Curriculum provided at developmental level"/>	<input type="text"/>
	Other Supports, including Non-Academic and Extra-curricular Activities <input type="text" value="Additional adult assistance services during the school day, including during transportation"/>	<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	<input type="text"/>
	If the Parent does not agree, specify the area(s) to be reassessed. <input type="text"/>	<input type="text"/>
Comments, as appropriate		

Low Incidence Equipment	
Assistive Technology Equipment	
Participation in General Education	<p>The above mentioned NPS (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 the 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
Service 1	Start Date:	Effective on Signature Date	
10	End Date:	30-SEP-2025	
Language/Speech	Service applies to:	ESY	
	Frequency:	1	
This service addresses the following goals :	Interval:	Weekly	
<input type="text" value="8(Pragmatics)"/>	Minutes/Interval:	60	
	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)	
		Special Education Teacher	

*

Service 2	Start Date:	Effective on Signature Date	
10	End Date:	30-SEP-2025	
Language/Speech	Service applies to:	Regular	
	Frequency:	1	
This service addresses the following goals :	Interval:	Weekly	

8(Pragmatics)	Minutes/Interval:	60	
	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)	
		Special Education Teacher	
*			

Notes:

Parents of students who are Medi-Cal eligible authorize LAUSD to submit claims for reimbursement by Medi-Cal funded services unless parent(s) signs a Parent Medi-Cal Non-Authorization to Bill form. Please see Parent's Guide to Special Education Services (including Procedural Rights and Safeguards).

Part 3 - Percentage of Time Outside of General Education

	Effective With this IEP	Future Changes Related to this IEP
% of Time per Week outside of General Education	<input type="text" value="100"/>	

Part 4 - Compensatory Education/Recoupment Services Discussion

--

Part 4 - Additional IEP Team Considerations & Parental Input

--

Meeting Discussion September 30, 2024:

This is an annual IEP held to review student progress. Parent provided verbal/written consent to convene the IEP meeting. Parent did not attend and gave permission to proceed without them if they did not attend. Upon completion of the meeting, parent will be provided the IEP document with consent page for review and signature. Introductory statements and introductions were made. Interpreter was dismissed at 1:45pm when parent confirmed via phone that they were not coming. Team noted concerns for the lack of participation and work production due to the student being extremely tired.

Chaim attends Bridgeport NPS 100% of the time. A general education teacher was not required to participate in the meeting as the student's disability continues to have an impact in the ability to access the educational program at a District- operated school. Every effort will be made to reintegrate Chaim into the general education environment when appropriate. The IEP team recommends continuation of this setting as the most appropriate to meet Chaim's needs at this time. When Chaim is ready to transition to a general education setting, attempts to mainstream will be made. Chaim will be considered for a lesser restrictive educational setting when the IEP team is able to demonstrate noteworthy and consistent progress in the areas of Academics and Behavior as consistently discussed and documented throughout the meeting.

The team determined that data indicates significant regression may occur in critical life skills related to independent functioning and self-sufficiency and those skills cannot be recouped within a reasonable amount of time without ESY (Extended School Year) services.

Student is enrolled in a course of study that meets the alternate curriculum standards and is working successfully towards a certificate of completion.

Los Angeles Unified School District

Course of Study for Students on the Alternate Curriculum 9th Grade:

Practical English AB

Practical Math AB

Practical Social Studies AB

Practical Science AB

Elective

Life Skills

PE or APE AB

10th Grade:

Applied English AB

Consumer Math AB

SS Hist- Community AB

Personal Health

Elective AB

PE or APE AB

11th Grade:

Community English AB

SS Hist-Community AB

Elective AB

Elective AB

Elective AB

12th Grade:

Community Resources AB

Elective AB and

Transition

Elective AB

Elective AB

Elective AB

Total: 210 credits

Ages 19-22: Adult Transition Activities/Program

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

Program:	NPS	Setting:	Special Education						
Eligibility:	Eligible (AUT)	Curriculum:	Alternate Curriculum						
Transportation:	NPS Only - NPS Transportation	Low Incident Support:	None						
Date District Received									
Parent Signature:									
Service Code	Service Desc	Start Date	Service Applies To	Interval	Frequency	Area	Total Minutes	Addresses Goal(s)	No Consent
10	Language/Speech	Effective on Signature Date	Regular	Weekly	1	School-Based	60	Pragmatics	--
10	Language/Speech	Effective on Signature Date	ESY	Weekly	1	School-Based	60	Pragmatics	--

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** **CHAIM (DAVID)** **Y** **Date of Birth** **04-MAR-2010** **Meeting Date** **30-SEP-2024**

Last First MI

1 The behavior impeding learning is: Describe what it looks like:
 off task behavior talks out of turn, sleeping, tired, not participating

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 1 ENVIRONMENTAL FACTORS AND NECESSARY CHANGES

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

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

Other Describe: _____

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

Other (Missing/Present): _____

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

Other _____

Who will establish? Who will monitor? Frequency

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 **AZOULAY** **CHAIM (DAVID)** **Y** **MI** **Date of Birth** **04-MAR-2010** **Meeting Date** **30-SEP-2024**

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:	<input type="checkbox"/> Sensory input	<input type="checkbox"/> Attention (peer) <input checked="" type="checkbox"/> Attention (staff)
9	To Avoid:	<input checked="" type="checkbox"/> Tangible (desired item) <input type="checkbox"/> Sensory input <input type="checkbox"/> Task (too difficult)	<input type="checkbox"/> Tangible (desired activity) <input type="checkbox"/> Attention (peer) <input type="checkbox"/> Attention (staff) <input type="checkbox"/> Task (too long)
	Describe:	<input type="text" value="Wants to get staff attention."/>	
Observation Analysis	What team believes the student should do INSTEAD of the problem behavior? (How should the student escape/protest/avoid or get his/her need met in an acceptable way?)		
	<input type="text" value="Student should increase participation in activity. Will earn reinforcer if he participates and refrains from off task behavior.."/>		
10	What teaching Strategies/Necessary Curriculum/Materials are needed?		
	<input type="checkbox"/> Better communication skills	<input checked="" type="checkbox"/> Anger management	<input checked="" type="checkbox"/> Communication system <input checked="" type="checkbox"/> Self-management systems
11	<input checked="" type="checkbox"/> Following schedules & routines	<input type="checkbox"/> Learning new social skills	<input type="checkbox"/> Learning how to negotiate <input type="checkbox"/> Learning to request breaks
	<input type="checkbox"/> Learning new scripts	<input type="checkbox"/> Learning notebook organization	<input type="checkbox"/> Learning to use conflict resolution
Intervention	Who will establish?	Who will monitor?	Frequency:
	<input type="text" value="teacher, staff"/>	<input type="text" value="teacher, staff"/>	<input type="text" value="daily"/>
12	What are reinforcement procedures to use for establishing, maintaining, and generalizing the replacement behavior(s)?		
	Physical:	<input checked="" type="checkbox"/> High-fives <input checked="" type="checkbox"/> Pat on the back	<input type="checkbox"/> Smiles <input type="checkbox"/> Handshake
Verbal:	<input checked="" type="checkbox"/> Use specific praises	<input checked="" type="checkbox"/> Recognition of student's str...	<input type="checkbox"/> Peer recognition
Contingent Access:	<input checked="" type="checkbox"/> Time on the computer <input checked="" type="checkbox"/> Preferred activity	<input checked="" type="checkbox"/> Free time	<input type="checkbox"/> Listen to music
Tangibles	<input type="checkbox"/> Positive phone calls or notes to home	Describe: <input type="text"/>	<input type="checkbox"/> Other <input type="text"/>
Tokens and Points:	<input type="checkbox"/> Tokens <input type="checkbox"/> Exempt assignment	<input type="checkbox"/> Certificate sent home <input type="checkbox"/> Points <input type="checkbox"/> Extra test points	<input type="checkbox"/> Seating Location
Privileges:	<input type="text"/>		
Other ideas:	<input type="text"/>		
Selection of reinforcer based on: <input type="text" value="student interest"/>			
<input checked="" type="checkbox"/> reinforcer for using replacement behavior <input checked="" type="checkbox"/> reinforcer for general increase in positive behaviors			
By whom?	Frequency		
<input type="text" value="teacher, staff"/>	<input type="text" value="daily"/>		
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)		
	<input type="text" value="Student will ask for a short (5 minute break) to get ready (wash face, jumping jacks, calming activities, etc.) to participate in activity. Student will receive a reinforcer of his choice if he waits appropriately."/>		
Personnel?	<input type="text" value="teacher, staff"/>		

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 CHAIM (DAV Y
Last First MI

Date of Birth 04-MAR-2010 Meeting Date 30-SEP-2024

OUTCOMES

PART IV

BEHAVIORAL GOALS

13 Behavioral Goal: Goal #: 8

David will increase his participation during class activities and refrain from off task behavior (upset, tired, sleeping, etc) with 80% accuracy in 4 out of 5 opportunities and no more than 2 prompts as measured by teacher observation and data collection.

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
- Daily reports
- Weekly reports
- Other _____
- Email
- Daily charting
- Written notes
- Behavioral logs

Between? teacher, parents Frequency? daily

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

(ITP, pg. 1 of 3)

Student

Date of Birth

Meeting Date

INDIVIDUAL TRANSITION PLAN (ITP)

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

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

Area	Completed	If no, indicate reason
Education/Training Activity	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> First ITP	<input type="text"/>
Employment Activity	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> First ITP	<input type="text"/>
Independent Living Skills Activity (as needed)	<input checked="" type="radio"/> Yes <input type="radio"/> No <input 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="30-SEP-2025"/>	David completed a virtual assessment tool for transition. He enjoys science class and computer time. He enjoys working with animals.
<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?

Education/Training Activity to Support Goal	Timeline	Person/Agency Responsible
<input type="text" value="complete a sequence of work-related tasks"/> If other? <input type="text"/>	<input type="text" value="30-SEP-2025"/>	<input type="text" value="Parent/Guardian/Family"/> <input type="text"/> <input type="text" value="Special Education Teacher"/> <input type="text"/> <input type="text" value="Student"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Student Last: AZOULAY, First: CHAIM (DAVI), MI: Y

Date of Birth: 04-MAR-2010

Meeting Date: 30-SEP-2024

INDIVIDUAL TRANSITION PLAN (ITP)

Section 2: Employment

Table with 3 columns: Assessment (at least one assessment must be completed in this area), Date, and Assessment Name and Results: Indicate interests/abilities and area(s) of need (if applicable). Includes dropdown for assessment type and date field.

Employment Postsecondary Goal: Upon completion of high school, the student will: participate in a work/activity program. Includes 'If other?' field.

Table with 3 columns: Employment Activity to Support Goal, Timeline, and Person/Agency Responsible. Includes dropdown for responsible parties like Parent/Guardian/Family, Special Education Teacher, and Student.

Section 3: Independent Living (as needed)

Table with 3 columns: Assessment (at least one assessment must be completed in this area), Date, and Assessment Name and Results: Indicate interests/abilities and area(s) of need (if applicable). Includes dropdown for assessment type and date field.

Independent Living Postsecondary Goal: Upon completion of high school, the student will: live with family/relatives. Includes 'If other?' field.

Table with 3 columns: Independent Living Activity to Support Goal, Timeline, and Person/Agency Responsible. Includes dropdown for responsible parties like Parent/Guardian/Family, Special Education Teacher, and Student.

Student
 Last First MI

Date of Birth

Meeting 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:

David will continue to participate in functional academic classes, vocational education classes, and community based instruction.

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 |