

## INDIVIDUALIZED EDUCATION PROGRAM (IEP)

## Los Angeles Unified School District

Student Identification  
Number

033010F046

SSID

5770660184

**Eligible (SLD)**

Student BENABOU

LIANNE

M

Date of Birth:

30-MAR-2010

Last

First

MI

## Section A: Meeting Information

Pertinent Dates	Type of Meeting
Date of Initial IEP Team Meeting	<input checked="" type="radio"/> Initial
Date of Present Meeting	<input type="radio"/> Amendment of IEP dated
Annual Review to be conducted by	<input type="radio"/> Annual Review
Next Three Year Review will be conducted by	<input type="radio"/> Three Year Review
Three Year Review or Evaluation was conducted on	<input type="radio"/> Early Start Transition
Transition to Kindergarten to be conducted by	<input type="radio"/> Expulsion Analysis
	<input type="radio"/> Individual Transition Plan
Location of Meeting	District Name
Hancock Park Elementary Zoom	Los Angeles Unified School Dis

## Section B: Student Information

Date of Birth	30-MAR-2010	Age	11	Grade	4
Gender	<input type="radio"/> Male <input checked="" type="radio"/> Female	Limited English Proficient Student	<input type="radio"/> Yes <input type="radio"/> No	Ethnic Code	White
Location of the Psych Folder	SUPPORT UNIT CEN	Student has no Psych Folder	<input type="checkbox"/>		
Location of the Cum Folder	HANCOCK PARK EL	Student has no Cum Folder	<input type="checkbox"/>		
Home Language	English	Student Language	English	Alternate Mode of Communication	
Home Address of Student	5945 COLGATE AVE				
City	LOS ANGELES CA	ZIP Code	90036		
Home Telephone	(323) 381-9593	Daytime Telephone		Emergency Telephone	
School of Attendance	Hancock Park El	Location Code	4397		
School of Residence	Hancock Park El	Location Code	4397		
Name of Parent/Guardian		Telephone			
Address					
City		CA	ZIP Code		
Surogate Parent		Telephone			
Attends <b>CURRENT SCHOOL</b> as a result of one of the following	Attends School of Residence ▼				
Is the student living in a Family Foster Home (FFH)?	<input type="radio"/> No <input type="radio"/> Yes	FFH#			
Is FFH Provider related to student?	<input type="radio"/> No <input type="radio"/> Yes	Relationship			
Licensed Children's Institution	<input type="radio"/> No <input type="radio"/> Yes	LCI Name			
		LCI#			
Out of the home placement made by	<input type="radio"/> Regional Center	<input type="radio"/> Department of Mental Health	<input type="radio"/> Department of Children's Services		
	<input type="radio"/> Superior Court	<input type="radio"/> Other			
Child's family living within LAUSD's boundaries?	<input type="radio"/> No <input type="radio"/> Yes				
If the student is 18 years old or older or is an emancipated minor, does he/she have educational decision-making rights?	<input type="radio"/> No <input type="radio"/> Yes				

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## Section C: Language Acquisition

Language Classification:

Limited English Proficient

Start Date:

09-SEP-2015

Parent Waiver:

☐ Yes ☐ No

Reclassification Date:

Elementary English Language  
Development Level:

3

Start Date:

26-AUG-2016

Secondary English Language  
Development Level:

Start Date:

Communication Observation Matrix  
Level:

Start Date:

## Section D: Goal Achievement from Current IEP

		Achieved		
Goal for: (example - Reading)		Yes	No	If No, explain the reason the goal/objective was not achieved
1		<input type="radio"/>	<input type="radio"/>	INITIAL REVIEW
Category	▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	
2		<input type="radio"/>	<input type="radio"/>	
Category	▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	
3		<input type="radio"/>	<input type="radio"/>	
Category	▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	
4		<input type="radio"/>	<input type="radio"/>	
Category	▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	
5		<input type="radio"/>	<input type="radio"/>	
Category	▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	
6		<input type="radio"/>	<input type="radio"/>	
Category	▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	
7		<input type="radio"/>	<input type="radio"/>	
Category	▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	
8		<input type="radio"/>	<input type="radio"/>	
Category	▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	
9		<input type="radio"/>	<input type="radio"/>	
Category	▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	
10		<input type="radio"/>	<input type="radio"/>	
Category	▼			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	



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## Section E: Present Level of Performance

Performance Area:

Reading/ELD

Category:

Assessment/Monitoring Process  
Used:

Teacher observation, WJ IV

State/District Assessment Results:

DIBELS

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

Student Strengths: Per 5th grade 2nd grading period, Lianne received scores of 2's for English Language Arts. Per DIBELS: Lianne reading fluency is 96 words per minutes, Well Below Benchmark with 99% Accuracy, Benchmark. In reading comprehension (MAZE) she scored 17, Benchmark. With motivation and prompting, Lianne is able to read aloud narrative and expository text at her instructional reading level with accuracy. She is able to retail pieces of information of the grade level stories. With guidance and support she's able to discern main idea and concepts presented in a texts. ELD- Level 2. This data reflects grades received during Distance Learning due to COVID-19 school facility closure.

WoodCock Johnson Form A: Letter-Word Recognition: 83, Low Average. Lianne is able to read short and long vowel words and 2-syllable words. Passage Comprehension: 82, Low Average. She is able to read simple sentences and add missing word to read a complete sentence. Sentence Reading Fluency: 90, Average. She is able to read simple sentences and understand what she is reading.

## Student Needs:

Lianne needs support in reading comprehension. She needs support in understanding and explaining figurative and metaphorical use in word in context. She needs support in discerning main ideas and concepts presented in texts, identifying and assessing evidence that support those ideas.

## Impact of Disability:

Lianne's eligibility of Specific Learning Disability (SLP) impedes her ability to participate in reading skills, which impacts her access and involvement in the general reading curriculum.

Performance Area:

Writing

Category:

Assessment/Monitoring Process  
Used:

Teacher Observation, WJ IV

State/District Assessment Results:

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

Student Strengths: Per 5th grade 2nd grading period, Lianne received scores of 2's for writing skills. Lianne is able to write simple sentences with capitalization and punctuation. She is able to write short and long vowel words. She is able to write double syllable words. With guidance and support Lianne is able to create multi-paragraph and with a use of a graphic organizer. This data reflects grades received during Distance Learning due to COVID-19 school facility closure

WoodCock Johnson Form A: Spelling: 94, Average. She can write CVC, CVCV and double syllable words.

Writing Sample: 98, Average. Lianne is able to write complete sentences describing pictures.

Writing Fluency: 86, Low Average. Lianne is able to place words in order to write complete sentences.

## Student Needs:

Lianne needs support in writing multi-paragraphs. She needs support in using a graphic organizer to organizer her ideas of a grade level topic. She needs support in writing a grade level essay. She needs support in providing key details and describing the details.

## Impact of Disability:

Lianne's eligibility of Specific Learning Disability (SLP) impedes her ability to participate in writing skills, which impacts her access and involvement in the general writing curriculum.

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## Section E: Present Level of Performance

Performance Area:

Math

Category:

Math

Assessment/Monitoring Process  
Used:

Teacher observation, WJ IV

State/District Assessment Results:

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

Student Strengths: Per 5th grade 2nd grading period, Lianne received scores of 2's for Mathematics. Lianne performs calculation and solves problems involving addition, subtraction and simple multiplication and division problems. She is able to solve single and double digit problems of addition and subtraction. This data reflects grades received during Distance Learning due to COVID-19 school facility closure

Woodcock Johnson Form A: Calculation: 50, Very Low. Lianne solve simple addition and subtraction problems.

Applied Problems: 83, Low Average. Lianne solve word problems of addition and subtraction.

Math Facts Fluency: 72. Low- Lianne solve 35 problems of addition and subtraction in 3 minutes.

Student Needs:

Lianne needs support in solving word problems. She needs support in solving problems with multiplication facts and division. She needs support in breaking word problems in sections. She needs support in adding and subtracting 3-digit numbers. She needs support in identifying place value.

Impact of Disability:

Lianne's eligibility of Specific Learning Disability (SLP) impedes her ability to participate in reading skills, which impacts her access and involvement in the general reading curriculum.

Performance Area:

Category:

Assessment/Monitoring Process  
Used:

State/District Assessment Results:

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

The required academic assessment, which is part of the Initial IEP process could not be completed due to the required COVID-19 school facility closures. The academic assessment will be completed within [timeframe] after school facilities reopen and normal school operations resume to determine need for academic support to access academic curriculum.

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## Section E: Present Level of Performance

Performance Area:

Health

Category:

Health

Assessment/Monitoring Process  
Used:

Assessment and interview

State/District Assessment Results:

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

Health Summary: Student is online learning at this time. Health history was received from mother. Lianne was a full term birth who did not experience any pre natal complications. She was jaundice after delivery that therefore was unable to go home with her mother and stayed one extra day in the hospital. Lianne achieved all her developmental milestones with in age appropriate limits. She does not have any history of hospitalizations or surgeries and does not have any known allergies. Lianne has a diagnosis that affects her attention span, control of impulses, and activity level and takes one medication daily for this condition. Mother states she has noticed that since beginning her medication, Lianne is having an easier time with writing assignments. Vaccinations are up to date.

Strengths: Lianne is in physical good health. She passed the LAUSD hearing screening on 2/5/20 and the LAUSD vision screening on 3/12/20.

Area of Need: Health is not an area of need.

Impact of Disability : Lianne's physical health does not impact her participation, performance, and access in the educational program.

Accommodations/Modificatons: None

Interview was done by C. Bitterman, RN and was modified by Z. Barahona, RN 5/5/2021

5/27/21-Mother reported that student is not taking any medication now. Mother stated that student did not feel any different when she was taking the medication.

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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First**M**  
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## Section E: Present Level of Performance

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

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

Lianne is functioning within the average range of cognitive ability (i.e. the ability to learn, apply knowledge, generalize, utilize abstract concepts, and evaluate), based on alternative procedures of measuring intellectual ability.

Lianne's better-developed processing skills: Phonological processing, Visual processing, Sensory processing and Cognitive language areas dealing with expression, association and conceptualization.

Lianne's less-developed processing skills: Attention Processing and Auditory Processing.

Impact: Psychological processing deficits identified under Attention Processing and Auditory Processing impede her learning.

Support: structure and consistency, check for understanding, provide constructive feedback, extra time on tasks with difficulty,

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):

Lianne indicated to examiner her favorite color is light and dark pink, favorite food is sushi, has two dogs, and lives with her parents. When asked what she wants to be when grown up she replied model, fashion or a political activist to influence and advise others to help. She reported her hardest subject is Math and mostly every subject she said. However she said she enjoys Art. Her hobbies are going to the beach, hanging with friends at grove mall, and playing video games.

Teacher reported Lianne was observed to be funny and like to laugh. However it was observed she cried in class sometimes and refused to do work which may indicate she would get frustrated with tasks being difficult for her. Teacher also indicated she would ask to go to use the restroom often or see school nurse, possibly as an excuse to avoid academic task too difficult. Teacher reported her interest was in Art. Under Learning Characteristics teacher checked off 'no' under not making appropriate acceptable or appropriate decisions on her own, work in a noisy environment, begin work on time, stay with task until completed, work independently, and did not demonstrate age-appropriate attention span.

Parent reported Lianne is smart, strong, loving, has compassion, funny, sense of humor and is very good at building and dancing. It was noted then before Covid-19 school closures Lianne participated in more play dates and aerial yoga, and pool swimming. The year before that it was noted Lianne participated in hip hop, ballroom class, tutoring, and pool swimming. Her concerns noted Lianne is bothered when other kids tease her about her height since she is the tallest every year in all her grade levels.

Impact: Lianne has difficulty focusing on non-preferred tasks (i.e. academics she struggles with).

Support: Structure and consistency, Teach/ promote organizational strategies with school materials, assignments due, schedules, etc. If available continue with extra-curricular activities to promote/ support her self-image with things she enjoys (i.e. dance, music, art).

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## Section F: Eligibility

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

Specific Learning Disability, Other Health Impairment

For Initial IEP, interventions attempted prior to determining eligibility:

Visual aids, verbal instructions along with visual instructions, rules clarification, change seating, use of timer, provide routine schedule, reduce degree of difficulty of task, provide immediate feedback, allow more time for student to complete task, break task into small steps, use of small group instruction, provide routine schedule, ignore misbehavior, parent conference, use of proximity control, and model appropriate behavior.

Eligible as a student with the disability of:

Code:

SLD

Specific Learning Disability



Not Applicable,



Blind or



Partially Sighted

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

Code:



Not Applicable,



Blind or



Partially Sighted



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

or



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

No Longer Eligible (Effective  
Date):

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

Final IEP Reason:

Final IEP Effective Date:

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



Social Maladjustment



Temporary Physical Disability



Lack of instruction in reading



Lack of instruction in math



Limited English Proficiency



Environmental, Cultural or Economic Factors



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## Section G: Annual Goals and Objectives

Performance Area:

Reading

Category:

Reading

Annual Goal #:

1

Lianne will explain orally or in writing how the main ideas of a grade level passage are supported by key details independently as measured by teacher record in 4 out of 5 trials with 80% accuracy.

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

## Methods of Evaluation

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

## Incremental objective #1 related to the goal:

Lianne will explain orally or in writing how the main ideas of an informational text are supported by key details with minimal support as measured by teacher record in 4 out of 5 trials with 80% accuracy.

## Incremental objective #2 related to the goal:

Lianne will explain orally or in writing how the main ideas of an informational text are supported by key details with minimal support as measured by teacher record in 4 out of 5 trials with 80% accuracy.

Date to be achieved:

Septembe

2021

MO/YR

Date to be achieved:

January

2022

MO/YR

## IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

## EXPLANATION OF MARKS

4 GOAL MET OR  
EXCEEDED3 SUBSTANTIAL PROGRESS (50-99% of goal  
met)

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

1 NO PROGRESS

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

Writing

Category:

Writing

Annual Goal #:

2

Lianne will produce clear and coherent writing of 5 or more paragraphs in which the organization is appropriate to the task, purpose, and/or audience with graphic organizer as measured teacher record in 4 out of 5 trials with 80% accuracy.

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

## Methods of Evaluation

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

## Incremental objective #1 related to the goal:

Lianne will produce clear and coherent writing of 1-2 or more paragraphs in which the organization is appropriate to the task, purpose, and/or audience with graphic organizer as measured teacher record in 2 out of 5 trials with 40% accuracy.

## Incremental objective #2 related to the goal:

Lianne will produce clear and coherent writing of 3-4 or more paragraphs in which the organization is appropriate to the task, purpose, and/or audience with graphic organizer as measured teacher record in 3 out of 5 trials with 60% accuracy.

Date to be achieved:

Septembe

2021

MO/YR

Date to be achieved:

Septembe

2022

MO/YR

## IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

## EXPLANATION OF MARKS

4 GOAL MET OR  
EXCEEDED3 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:

Math

Category:

Math

Annual Goal #:

3

When given a mixture of 15 math problems requiring both single and multistep solutions, Lianne will determine how and when to break a problem into simpler parts with 80% accuracy in 4 of 5 trials as measured by student work samples.

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

## Methods of Evaluation

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

## Incremental objective #1 related to the goal:

When given a mixture of 5 math problems requiring both single and multistep solutions, Lianne will determine how and when to break a problem into simpler parts with 40% accuracy in 2 of 5 trials as measured by student work samples.

## Incremental objective #2 related to the goal:

When given a mixture of 10 math problems requiring both single and multistep solutions, Lianne will determine how and when to break a problem into simpler parts with 60% accuracy in 3 of 5 trials as measured by student work samples.

Date to be achieved:

Septembe

2021

MO/YR

Date to be achieved:

January

2022

MO/YR

## IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

## EXPLANATION OF MARKS

4 GOAL MET OR  
EXCEEDED3 SUBSTANTIAL PROGRESS (50-99% of goal  
met)

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

1 NO PROGRESS

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

ELD

Category:

English Language Dev ▼

Annual Goal #:

4

Lianne will relate two or more of the key ideas expressed in a discussion, and draw conclusions in light of the discussion with minimal support as measured teacher record in 4 out of 5 trials with 80% accuracy.

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

## Methods of Evaluation

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

## Incremental objective #1 related to the goal:

Lianne will relate two or more of the key ideas expressed in a discussion, and draw conclusions in light of the discussion with minimal support as measured teacher record in 2 out of 5 trials with 40% accuracy.

## Incremental objective #2 related to the goal:

Lianne will relate two or more of the key ideas expressed in a discussion, and draw conclusions in light of the discussion with minimal support as measured teacher record in 3 out of 5 trials with 60% accuracy.

Date to be achieved:

Septembe ▼

2021 ▼

MO/YR

Date to be achieved:

January ▼

2022 ▼

MO/YR

## IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

## EXPLANATION OF MARKS

4 GOAL MET OR  
EXCEEDED3 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 **BENABOU**  
Last**LIANNE**  
First**M**  
MIDate of Birth **30-MAR-2010**Meeting Date **27-MAY-2021****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.

<b>Student will participate in Regular State and District Assessments.</b> <i>(Designated Supports and/or Accommodations identified below are applicable)</i>	<b>CAASPP Subject</b> ELA and Math
Designated Supports: - Test in a separate/smaller setting - Read aloud by an adult in English (for math items and ELA items except for reading passages)	
<b>Student will participate in Regular State and District Assessments.</b> <i>(Designated Supports and/or Accommodations identified below are applicable)</i>	<b>ELPAC Subject</b> Writing
Designated Supports: - Read aloud by an adult (writing domain only)(non-embedded)	
<b>Student will participate in Regular State and District Assessments.</b> <i>(Designated Supports and/or Accommodations identified below are applicable)</i>	<b>ELPAC Subject</b> Speaking
Designated Supports: - Pause or replay the audio during the administration of test questions (speaking domain only—summarize an academic presentation only)	
<b>Student will participate in Regular State and District Assessments.</b> <i>(Designated Supports and/or Accommodations identified below are applicable)</i>	<b>ELPAC Subject</b> Listening
Designated Supports: - Pause or replay the audio during the administration of test questions (listening domain only)	
<b>Student will participate in Regular State and District Assessments.</b> <i>(Designated Supports and/or Accommodations identified below are applicable)</i>	<b>ELPAC Subject</b> Reading
Designated Supports: - Simplified or paraphrased test directions (non-embedded designated support)	

## INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student   
Last  
First  
MIDate of Birth Meeting Date 

## 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 translation services? ☒ Yes ☐ NoIf yes, the parent/guardian has requested a written translation of the IEP in 

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.

THIS SPACE DELIBERATELY LEFT BLANK.

## INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student **BENABOU****LIANNE****M**Date of Birth **30-MAR-2010**Meeting Date **27-MAY-2021**

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	Clyde	03-MAY-2021

*I (PARENT) acknowledge that the IEP meeting was rescheduled to this date at my request. (Parent initials here ONLY if the PARENT requested that the IEP meeting be rescheduled.)*

## Parent/Student (18-21) Agreement to Components of the Proposed IEP

A Parent/Student (18-21) may agree to all or some of the components of a proposed IEP. The District will implement those portions of the IEP to which the parent/student (18-21) agrees so as to not delay providing instruction and services.

- ☒ Parent/Student (18-21) **AGREES** to all components of the IEP.
- ☐ Parent/Student (18-21) **AGREES** to all components of the proposed IEP **WITH THE SPECIFIC EXCEPTION(S)** stated below:
- ☐ Assessment Specify
- ☐ Eligibility Specify
- ☐ Instructional Setting Specify
- ☐ Services Specify

- ☐ The Parent/Student (18-21) **DOES NOT AGREE** with any of the components of the proposed IEP.

A Parent/Student (18-21) is not required to initiate any form of dispute resolution as to components of the proposed IEP to which the parent does not agree. If a parent/student (18-21) does wish to initiate a form of dispute resolution as to the components of the proposed IEP, the parent can find information on dispute resolution processes in the District's publication, *A Parent's Guide to Special Education Services (Including Procedural Rights and Safeguards)*.

## Parent Concerns and Comments

Signature(s)

Date

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

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

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

Signature(s)

Date

27-MAY-2021



## PARENT INPUT SURVEY

Would you please take a moment to complete the survey below.  
The information you provide will help us improve the Individualized Education Program (IEP) process. Thank you in advance for your time and interest.

**ALL INFORMATION IS CONFIDENTIAL**

**DIRECTIONS:** After each statement, please place an X on the line that describes your experience with your child's IEP.

A. Regarding your child's current IEP:	Yes	No	Does Not Apply
1. I am satisfied with the IEP meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I feel that the IEP accurately reflects the decisions made at the IEP meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I received notice of the IEP meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I received "The IEP and You" handbook with the notice of the IEP meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. During the IEP process I received "A Parent's Guide to Special Education Services (Including Procedural Rights and Safeguards)" explaining my rights as a parent.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. The IEP meeting was held in an appropriate setting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I feel I was treated as an equal and important part of the IEP team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. The participants at the IEP meeting were prepared and informed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Placements for my child, including the general education setting, were discussed and decided upon.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Related services were discussed and decided upon, if relevant.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. If my child is 14 years old or older, an Individualized Transition Plan (ITP) was developed with my child's and my concerns in mind.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. At the end of the IEP meeting the decisions were summarized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. If I needed an oral interpretation of the IEP team meeting an interpreter was provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. The interpretation of the IEP team meeting enabled me to participate and make an informed decision regarding my child's IEP during the IEP meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. The interpreter stayed for the duration of the IEP team meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. If the interpreter left the IEP meeting before it was over, another staff member served as the interpreter and the interpretation was adequate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. I am aware that, if I am dissatisfied with the adequacy of the oral interpretation at the IEP team meeting, I can file a complaint with the Educational Equity Compliance Office at (213) 241-7682.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. If I needed a written translation of the IEP, translation services were offered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. I am aware that, if I do not receive a copy of the translated IEP, I can contact the site administrator or call the Division of Special Education at (213) 241-6701.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If any of the answers to items 13-16 or 18-19 was No, please discuss your concern(s) with the site administrator or call the Division of Special Education at (213) 241-6701.			
<b>B. Regarding your child's previous IEP (if relevant):</b>			
20. I am satisfied that my child received the services described on the previous IEP. (If your answer to this question is "No", please write concerns below.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Additional Comments			



Is there anything more you would like to ask us or tell us?  
Please write below or call the Parent Resource Network at 1-800-933-8133.

Please fold along dotted lines with the address showing. Seal and mail. Postage is pre-paid.  
Again, Thank you!



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**  
FIRST-CLASS MAIL PERMIT NO. 33798 LOS ANGELES CA 90051  
POSTAGE WILL BE PAID BY ADDRESSEE

ATTN PARENT RESOURCE NETWORK  
LOS ANGELES UNIFIED SCHOOL DISTRICT  
PO BOX 613307  
LOS ANGELES CA 90099-4093



**PARENT INPUT SURVEY**  
**English**



## INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Reconvened  
Meeting DateStudent   
Last  
First  
MIDate of Birth Meeting Date 

## Section R: Names and Signatures (Signatures on File)

Team Member	Print Name	Signature
Parent/Guardian	<input type="text" value="BENABOU, DANA"/>	<input type="text" value="DB"/>
Parent/Guardian	<input type="text"/>	<input type="text"/>
Student Age 18 - 21 years	<input type="text"/>	<input type="text"/>
Student Under Age 18 years	<input type="text"/>	<input type="text"/>
Surrogate Parent	<input type="text"/>	<input type="text"/>
Foster Parent	<input type="text"/>	<input type="text"/>
Family Foster Home Provider	<input type="text"/>	<input type="text"/>
Administrator	<input type="text" value="Kristina Clyde"/>	<input type="text"/>
Administrative Designee	<input type="text"/>	<input type="text"/>
Special Education Teacher	<input type="text" value="Veronica Ferrufino"/>	<input type="text" value="V Ferrufino"/>
General Education Teacher	<input type="text" value="Laurence Tyran"/>	<input type="text" value="L Tyran"/>
School Psychologist	<input type="text" value="Sandra Osorio-Hakimi"/>	<input type="text" value="S Osorio-Hakimi"/>
School Nurse	<input type="text" value="Zoila Barahona"/>	<input type="text" value="Zoila Barahona"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Interpreter	<input type="text"/>	<input type="text"/>
Sign Language Interpreter	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>

## INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student **BENABOU**  
Last**LIANNE**  
First**M**  
MIDate of **30-MAR-2010**  
BirthMeeting **27-MAY-2021**  
Date

## LEAST RESTRICTIVE ENVIRONMENT ANALYSIS

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

Student's Current Placement Type:

<input checked="" 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 type="radio"/> Nonpublic School
<input type="radio"/> Home/Hospital or Residential Care Facility	

**DIRECTIONS:** Complete the information below as part of the IEP team discussion regarding placement from the beginning at Step A until the team reaches the Step that indicates YES. After reaching the Step that indicates YES, it is also required to complete Step F.

The Individuals with Disabilities Education Act (IDEA) requires that students with disabilities be educated in the least restrictive environment. Placement in a more restrictive setting should only occur if the nature or severity of the student's disability is such that placement in a less restrictive setting with the use of supplementary aids and services cannot be achieved satisfactorily. The lack of current availability of a student's required supports, services, accommodations and modifications is not the sole justification for placement in a more restrictive setting, unless there is a compelling reason why they cannot be provided. In selecting the LRE, consideration is given to any potential harmful effect on the child or on the quality of services that he or she needs.

<b>Step A.</b>	Can the supports, services, accommodations and/or modifications in the student's IEP be made available in a general education classroom/setting?	
	<input checked="" type="radio"/> Yes No	If the answer is YES, then a general education classroom/setting is the appropriate placement. If the answer is NO, go to the question below.
	<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 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.

<b>Step B.</b>	Can the supports, services, accommodations and/or modifications in the student's IEP be made available on a general education site in a special day program?	
	<input type="radio"/> Yes <input 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 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.

**INDIVIDUALIZED EDUCATION PROGRAM (IEP)**

**Los Angeles Unified School District**

**Student** BENABOU

**Last**

LIANNE

**First**

M

**MI**

**Date of  
Birth**

30-MAR-2010

**Meeting  
Date**

27-MAY-2021

**ANNUAL LEAST RESTRICTIVE ENVIRONMENT ANALYSIS (Continued)**

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

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

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

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

# INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student **BENABOU**

Last

**LIANNE**

First

**M**

MI

Date of  
Birth

**30-MAR-2010**

Meeting  
Date

**27-MAY-2021**

## ANNUAL LEAST RESTRICTIVE ENVIRONMENT ANALYSIS (Continued)

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

<b>Step F.</b>	The student's needs as reflected in the contents of this IEP, and the placement being considered by the IEP team, outweigh any potential harmful effects at this time, including (check all that apply):	
	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	<p>Diminished access to the full range of the curriculum</p> <p>Missed general education instruction taught by highly qualified staff</p> <p>Rate at which student may earn credits for graduation</p> <p>Lack of opportunity for social interaction</p> <p>Lack of opportunities for age-appropriate peer role models</p> <p>Amount of socialization opportunities with typical peers</p> <p>Limited access to peers in student's home community</p> <p>Lack of exposure to appropriate behavioral models from peers</p> <p>Other: <input type="text" value="RSP"/></p>

## INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 1 - Eligibility, Placements and Supports

Student **BENABOU**  
Last**LIANNE**  
First**M**  
MIDate of Birth **30-MAR-2010**Meeting Date **27-MAY-2021**

		Effective With this IEP	Future Changes Related to this IEP
	As of Date:	<b>27-MAY-2021</b>	<b>16-AUG-2021</b>
Eligibility: (from Page 4)		<b>Eligible (SLD)</b>	
	Final IEP Reason Final IEP Effective Date:		
Curriculum		General Education	General Education
Placement	Type of School	District Resident School	District Resident School
	Name of School	HANCOCK PARK EL	BURROUGHS MS
Instructional Setting	Setting	General Education	General Education
	Program	GE	GE
	Special Day Minutes/Wk		
	Addresses Goals	1(Reading ),2(Writing),3(Math),4(ELD)	1(Reading ),2(Writing),3(Math),4(ELD)
Additional Factors	Low Incident Support	None	None
	Assistive Technology Support	No	No
	Transportation	None	None
	Extended School Year/Intersession	<input type="radio"/> Yes <input checked="" type="radio"/> No	
	Parent Counseling and Training (PCT)	<input type="radio"/> Yes <input checked="" type="radio"/> No	
	ESY Transportation		
Accommodation, Modifications, Supports	Instructional Accommodations	Preferential seating, check understanding, break assignments into section, graphic organizer, extended time as needed, visuals.	Preferential seating, check understanding, break assignments into section, graphic organizer, extended time as needed, visuals.
	Instructional Modifications		
	Other Supports, including Non-Academic and Extra-curricular Activities		
Preparation for Three Year Review IEP (At the second Annual Review IEP Meeting, the team must discuss and document the decision to conduct or not conduct a three-year comprehensive reassessment.)	Do the Parent and the District (local educational agency) agree that a reassessment is unnecessary?	<input type="radio"/> Yes <input type="radio"/> No	
	If the Parent does not agree, specify the area(s) to be reassessed.		
Comments, as appropriate			
Low Incidence Equipment			
Assistive Technology Equipment			

Participation in General Education	

## INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student **BENABOU**  
Last**LIANNE**  
First**M**  
MIDate of Birth **30-MAR-2010**Meeting  
Date**27-MAY-2021**

		Effective With This IEP	Future Changes Related To This IEP
<b>Service 1</b>	Start Date:	Effective on Signature Date 27-MAY-2021	16-AUG-2021
<b>RSP</b>	End Date:	11-JUN-2021	
<b>RSP</b>	Service applies to:	Regular	Regular
	Frequency:	1-5	1-5
This service addresses the following goals:	Interval:	Weekly	Weekly
3(Math)	Minutes/Interval:	60	100
	Minutes/Interval (Pullout from Gen Ed):	0	0
	Service Delivery Model:	RSP: Collaborative Teaching and Planning*	RSP: Collaborative Teaching and Planning
	RSP Area:	Math	
	Responsible Personnel:	General Education Teacher	General Education Teacher
		Resource Specialist Teacher	Resource Specialist Teacher
*			
<b>Service 2</b>	Start Date:	Effective on Signature Date 27-MAY-2021	16-AUG-2021
<b>RSP</b>	End Date:	11-JUN-2021	
<b>RSP</b>	Service applies to:	Regular	Regular
	Frequency:	1-5	1-5
This service addresses the following goals:	Interval:	Weekly	Weekly
1(Reading ) 2(Writing) 4(ELD)	Minutes/Interval:	60	100
	Minutes/Interval (Pullout from Gen Ed):	0	0
	Service Delivery Model:	RSP: Collaborative Teaching and Planning*	RSP: Collaborative Teaching and Planning



	RSP Area:	Multiple Academic Areas	
	Responsible Personnel:	General Education Teacher	General Education Teacher
		Resource Specialist Teacher	Resource Specialist 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="0"/>	

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

The required academic and health assessment, which is part of the Initial IEP process could not be completed due to the required COVID-19 school facility closures. The academic assessment will be completed within [timeframe] after school facilities reopen and normal school operations resume to determine need for academic and health support to access academic curriculum.

# INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

(SLD, pg. 1 of 1)

Student BENABOU

LIANNE

M

Date of Birth 30-MAR-2010

Meeting Date 27-MAY-2021

Last

First

MI

## SPECIFIC LEARNING DISABILITIES CERTIFICATION

Use this form at Initial, Three Year Reviews and comprehensive assessments for students eligible as having a Specific Learning Disability, including but not limited to students with characteristics of dyslexia. This form is not required at Annual Review meetings.

It is the consensus of the IEP Team that the student meets the eligibility criteria for Specific Learning Disability based upon the information which follows. This form serves as the written report of the IEP Team consensus.

1. Are there educationally relevant medical conditions which should be considered by the IEP Team? ☐ Yes ☒ No

If Yes, describe

2. During the observation of the student in the general education setting, was behavior noted that relates to the student's general academic functioning? ☐ Yes ☒ No

If Yes, describe

3. A severe discrepancy exists in one or more of the following academic areas: (Check all that apply)

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> Listening Comprehension       | <input type="checkbox"/> Basic Reading Skills        | <input type="checkbox"/> Oral Expression           | <input checked="" type="checkbox"/> Reading Comprehension |
| <input checked="" type="checkbox"/> Written Expression | <input checked="" type="checkbox"/> Math Calculation | <input checked="" type="checkbox"/> Math Reasoning | <input checked="" type="checkbox"/> Reading Fluency       |

4. The discrepancy is the result of a disorder in one or more of the following psychological processes: (Check all that apply)

- |  |  |   |   |
|--|--|---|---|
| <input checked="" type="checkbox"/> Attention  | <input type="checkbox"/> Visual Processing       | <input checked="" type="checkbox"/> Auditory Processing | <input type="checkbox"/> Sensory Motor Skills |
| <input type="checkbox"/> Cognitive abilities including association, conceptualization and expression | <input type="checkbox"/> Phonological Processing |   |   |

5. The Team agrees that the discrepancy is not primarily the result of:

- |   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> Limited school experience               | <input checked="" type="checkbox"/> Poor school attendance  | <input checked="" type="checkbox"/> Environmental, economic or cultural disadvantage |
| <input checked="" type="checkbox"/> Social maladjustment                    | <input checked="" type="checkbox"/> Intellectually Disabled | <input checked="" type="checkbox"/> Visual, hearing or motor impairment              |
| <input checked="" type="checkbox"/> Unfamiliarity with the English language |   |  |



**INDIVIDUALIZED EDUCATION PROGRAM (IEP)**

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student **BENABOU****LIANNE****M**Date of Birth **30-MAR-2010**Meeting Date **27-MAY-2021**

Last

First

MI

**FAPE Summary Grid**

<b>Program:</b>	GE	<b>Setting:</b>	General Education
<b>Eligibility:</b>	Eligible (SLD)	<b>Curriculum:</b>	General Education
<b>Transportation:</b>	None	<b>Low Incident Support:</b>	None
<b>Date District Received Parent Signature:</b>	27-May-2021		

Service Code	Service Desc	Start Date	Service Applies To	Interval	Frequency	Area	Total Minutes	Addresses Goal(s)	No Consent
RSP	RSP	Effective on Signature Date	Regular	Weekly	1-5	RSP-Math	60	Math	--
RSP	RSP	Future Changes 16-Aug-2021	Regular	Weekly	1-5	RSP-Math	100	Math	--
RSP	RSP	Effective on Signature Date	Regular	Weekly	1-5	RSP-Multiple Academic Areas	60	Reading , Writing, ELD	--
RSP	RSP	Future Changes 16-Aug-2021	Regular	Weekly	1-5	RSP-Multiple Academic Areas	100	Reading , Writing, ELD	--

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