

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Identification
Number

090907M070

SSID

1124936010

Eligible (OHI)

Student
Last

CFIR

First

YUVAL

MI

Date of Birth:

09-SEP-2007

Section A: Meeting Information

Pertinent Dates	Type of Meeting
Date of Initial IEP Team Meeting	<input 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 checked="" 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
El Camino Real Charter HS	R

Section B: Student Information

Date of Birth	09-SEP-2007	Age	14	Grade	8
Gender	<input checked="" type="radio"/> Male <input type="radio"/> Female	Limited English Proficient Student	<input type="radio"/> Yes <input checked="" type="radio"/> No	Ethnic Code	White
Location of the Psych Folder	SUPPORT UNIT NOF	Student has no Psych Folder	<input type="checkbox"/>		
Location of the Cum Folder	EL CAMINO REAL F	Student has no Cum Folder	<input type="checkbox"/>		
Home Language	Hebrew	Student Language	Hebrew	Alternate Mode of Communication	
Home Address of Student	23300 DOLOROSA ST				
City	WOODLAND HILL CA	ZIP Code	91367		
Home Telephone	(818) 224-8495	Daytime Telephone	(818) 224-8495	Emergency Telephone	(818) 224-9774
School of Attendance	El Camino Real Hs (C	Location Code	8617		
School of Residence	Hale Ca	Location Code	8169		
Name of Parent/Guardian	Sarit Cfir	Telephone	(818) 224-8495		
Address	saritcfir@gmail.com				
City		CA	ZIP Code		
Surogate Parent		Telephone			
Attends CURRENT SCHOOL as a result of one of the following	Attends School of Residence <input checked="" type="checkbox"/> Independent Charter HS				
Is the student living in a Family Foster Home (FFH)?	<input checked="" 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 checked="" 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				

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

CFIR

YUVAL

Last

First

MI

Date of Birth

09-SEP-2007

Section C: Language Acquisition

Language Classification:

Redesignated Fluent English Proficient

Start Date:

25-NOV-2012

Withdrawal by Parent Request:

☐ Yes ☐ No

Reclassification Date:

31-MAY-2018

ELPAC Performance Level and Performance Descriptor:

Test Date:

Alternate ELPAC Performance Level and Performance Descriptor:

Test Date:

Section D: Goal Achievement from Current IEP

		Achieved		If No, explain the reason the goal/objective was not achieved
Goal for: (example - Reading)		Yes	No	
1	Reading	<input checked="" type="radio"/>	<input type="radio"/>	
Category	Reading			
	Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
2	Writing	<input checked="" type="radio"/>	<input type="radio"/>	
Category	Writing			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	
3	Math	<input type="radio"/>	<input type="radio"/>	
Category	Math			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	
4	Vocational Ed.	<input type="radio"/>	<input type="radio"/>	
Category	Vocational Education			
	Objective 1 met	<input type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input type="radio"/>	<input type="radio"/>	
5	Language	<input checked="" type="radio"/>	<input type="radio"/>	
Category	Language – Expressive			
	Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
	Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
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"/>	

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

CFIR

YUVAL

Last

First

MI

Date of Birth

09-SEP-2007

Meeting Date

06-OCT-2021

Section E: Present Level of Performance

Performance Area:

Health

Category:

Health

Assessment/Monitoring Process
Used:

Health Assessment

State/District Assessment Results:

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

Health Assessment: Passed vision screening on 9/9/21 SPOT Screener=OD 0.00 Os -0.25 without correction-normal screening. passed hearing screening on 9/9/21 with good hearing bilaterally. Height 5' 7" Weight 122 Lbs with a BMI of 19%

Health History: No known medical issues. Not currently taking any daily medications.

Concerns: Mother states doing well.

Impact of Disability: Health does not impact educational setting at the present time.

Submitted by:
Peggy Valentine R.N.
School Nurse

Performance Area:

Category:

Assessment/Monitoring Process
Used:

State/District Assessment Results:

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

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

CFIR

YUVAL

Last

First

MI

Date of Birth

09-SEP-2007

Meeting Date

06-OCT-2021

Section E: Present Level of Performance

Performance Area:

Reading

Category:

Reading

Assessment/Monitoring Process
Used:

Teacher reports, observations, informal assessments

State/District Assessment Results:

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

Areas of strength: The current teacher reports he is able to concrete concepts and figurative language while reading. The English teacher also reports Yuval is developing his ability to understand a prompt and respond to it directly.

Areas of need: The current English teacher reports Yuval struggles with accurate spelling, poor reading comprehension, difficulty with character analysis and summarizing texts. He has difficulty with abstract concepts and understanding figurative language. Yuval needs to be able to analyze how characters develop in a passage.

Impact of disability: Yuval's eligibility of Other Health Impairment (OHI) impairs his ability to focus on what he is reading, which impacts his involvement and progress in the general education reading curriculum.

Performance Area:

Writing

Category:

Writing

Assessment/Monitoring Process
Used:

Teacher reports, observations, informal assessments

State/District Assessment Results:

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

Areas of strengths: Previous teachers reported Yuval was able to write proficient, simple sentences. It was further mentioned that Yuval uses grade level punctuation, vocabulary, and spelling. Yuval was able to write in complete sentences with the correct spelling and punctuation. Current teacher reports Yuval is able to write simple sentences.

Areas of need: The current English teacher reports Yuval has difficulties developing a thesis. He also has difficulties with complex sentences and writing a clear and coherent essay. Yuval does not revise or edit his work. Yuval needs to be able to focus on writing clear, complex sentences, as well as understanding how big ideas are developed through characterization in a text.

Impact of disability: Yuval's eligibility of Other Health Impairment (OHI) impairs his ability to focus on writing clear and coherent sentences which impacts his involvement and progress in the general education writing curriculum.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

CFIR

YUVAL

Last

First

MI

Date of Birth

09-SEP-2007

Meeting Date

06-OCT-2021

Section E: Present Level of Performance

Performance Area:

Math

Category:

Math

Assessment/Monitoring Process
Used:

Teacher reports, observations, informal assessments

State/District Assessment Results:

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

Areas of strength: The current Algebra teacher reports Yuval is skilled at basic math skills (addition, subtraction, multiplication and division). He has good calculation skills. He also reported Yuval is motivated to do well. He is a willing participant, raises his hand and follows class rules. Yuval is respectful to teacher and classmates and maintains an acceptable behavior.

Areas of need: The Algebra teacher reports Yuval needs more practice on solving equations. Yuval struggles with word problems and multi-step equations. Yuval needs to be able to create equations and inequalities in one variable and use them to solve problems.

Impact of disability: Yuval's eligibility of Other Health Impairment (OHI) impairs his ability to solve equations, which impacts his involvement and progress in the general education math curriculum.

Performance Area:

Vocational

Category:

Vocational Education

Assessment/Monitoring Process
Used:

Teacher reports, observations, informal assessments

State/District Assessment Results:

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

Areas of strength: Teachers report Yuval is a respectful student to both teachers and classmates. He follows class rules, raises his hand to ask a question/comment, he participates in class and group discussions. Yuval is able to self advocate. This History teacher reports that when Yuval is in class, he consistently asks great questions and participates productively in whole class conversations and discussions.

Areas of need: Yuval has been frequently absent due Covid. Teacher's report he has multiple missing assignments. Yuval fails tests. He has difficulty understanding directions. Teachers report these missing assignments are bringing Yuval's grade down. In class, Yuval can get easily distracted during whole class lecture

Impact of disability: Yuval's eligibility of Other Health Impairment (OHI) impairs his ability to focus on what he is completing and turning in assignments, which impacts his involvement and progress in the general education curriculum.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

CFIR

YUVAL

Last

First

MI

Date of Birth

09-SEP-2007

Meeting Date

06-OCT-2021

Section E: Present Level of Performance

Performance Area:

Language and speech services

Category:

Language Function

Assessment/Monitoring Process
Used:

ROR, interview and observation - parent declined assessment

State/District Assessment Results:

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

Parent declined triennial assessment. At his annual IEP in May 2020, he was recommended for 30 minutes per week of language and speech services (LAS). At El Camino, services were scheduled in a small group weekly to address his goals. Language material was used to address his IEP goals.

GOAL 1: By May 2021, Yuval will present information in a concise manner when explaining concepts, items, stories, etc., with no more than 1 prompt or cue in 5/5 sessions. This goal was met as written during a structured speech therapy session.

Strengths: Yuval demonstrated age appropriate skills in articulation, speech fluency, speech intelligibility, and voice production. These skills were judged to be appropriate for a student his age. Yuval is able to make and maintain simple conversations, speaks in complete sentences, and follow instructions appropriately with prompts as needed during a structured speech session.

Needs: Based on teacher reports, Yuval demonstrates difficulties in the area of following directions, retaining information, and writing skills. He produces some initial sound repetitions as well as consistent rephrasing and restating of ideas. He also uses many filler words like um, uh and like. Yuval requires more time than same aged peers to respond to questions and to 'get to the point' of what he is trying to say. Yuval's speech fluency disorder appears to be cluttering as well as stuttering. He typically demonstrates excessive breaks in the normal flow of speech that seem to result from disorganized speech planning and simply being unsure of what he wants to say.

Impact: Yuval's disfluencies and impact his ability to have fluent conversations with peers and adults and impacts his ability to participate in classroom activities which impacts his ability to access and participate fully in the general education curriculum.

Recommendation: Based on appearances, Yuval appears ready for discharge from LAS. However, based on his current grades and teacher comments a language assessment is recommended before discharge.

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):

Therapeutic observation, teacher/parent interview, and record review indicated that Yuval is within functional limits commensurate with his same aged peers in the areas of articulation/phonology, voice production, social pragmatic skills, speech fluency/intelligibility, vocabulary and communication. However, based on teacher comments there may be a language delay that was not noted in his last assessment. Based on the previous assessment and speech sessions to date he appears to be ready for discharge from LAS. An assessment is recommended prior to discharge.

Yuval was considered ineligible for service unrelated to environmental, cultural, or economic disadvantage, unfamiliarity with the English language, limited school experience, poor attendance, social maladjustment, intellectual disability, or low incident hearing or vision impairment.

Based on the Language and Speech Review, which included consideration of relevant functional, developmental and academic information, Yuval did not meet eligibility criteria for Speech and Language Impairment for his chronological age or developmental level according to the California Code of Regulations § 3030 and 3031. He does not appear to have an impact to accessing his curriculum; including drawing undo attention to himself in the classroom or impairing the development of social networks with peers. An assessment is recommended before discharge. Appropriate actions and recommendations based on review of records and observation should be discussed at his upcoming IEP as a consideration toward placement in the least restrictive environment as part of his free and appropriate public education.

Linda Hamilton, M.S., CCC-SLP, Lic. # SP16881

Credential No.: 180107278

Speech-Language Pathologist - e-signature

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

CFIR

YUVAL

Last

First

MI

Date of Birth

09-SEP-2007

Meeting Date

06-OCT-2021

Section F: Eligibility

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

For Initial IEP, interventions attempted prior to determining eligibility:

Eligible as a student with the disability of:

Code:

OHI

Other Health Impairment



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

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

CFIR

YUVAL

Last

First

MI

Date of Birth

09-SEP-2007

Meeting Date

06-OCT-2021

Section G: Annual Goals and Objectives

Performance Area:

Reading

Category:

Reading

Annual Goal #:

1

RL.9-10.3

Given a grade-level literary passage and a prompt to analyze the character, Yuval will explain (orally or in writing) (1) character's development in the passage as it relates to the given (theme or plot) and cite (3) pieces of supporting evidence in (3 out of 4) literary responses.

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:

RL.9-10.3

Given a grade-level literary passage and a prompt to analyze the character, Yuval will explain (orally or in writing) (1) character's development in the passage as it relates to the given (theme or plot) and cite (1) pieces of supporting evidence in (3 out of 4) literary responses.

Incremental objective #2 related to the goal:

RL.9-10.3

Given a grade-level literary passage and a prompt to analyze the character, Yuval will explain (orally or in writing) (1) character's development in the passage as it relates to the given (theme or plot) and cite (2) pieces of supporting evidence in (3 out of 4) literary responses.

Date to be achieved:

December

2021

MO/YR

Date to be achieved:

March

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: <div style="border: 1px solid black; height: 100px; width: 100%;"></div>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

CFIR

YUVAL

Last

First

MI

Date of Birth

09-SEP-2007

Meeting Date

06-OCT-2021

Section G: Annual Goals and Objectives

Performance Area:

Writing

Category:

Writing

Annual Goal #:

2

W.9- Draw evidence from literary or informational texts to support analysis, reflection, and research in 4 out of 5 opportunities 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:

W.9- Draw evidence from literary or informational texts to support analysis, reflection, and research in 2 out of 5 opportunities with 80% accuracy.

Incremental objective #2 related to the goal:

W.9- Draw evidence from literary or informational texts to support analysis, reflection, and research in 3 out of 5 opportunities with 80% accuracy.

Date to be achieved:

December

2021

MO/YR

Date to be achieved:

March

2022

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

CFIR

YUVAL

Last

First

MI

Date of Birth

09-SEP-2007

Meeting Date

06-OCT-2021

Section G: Annual Goals and Objectives

Performance Area:

Math

Category:

Math

Annual Goal #:

3

Yuval will create equations and inequalities in one variable and use them to solve problems in 4 out of 5 problems 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:

Yuval will create equations and inequalities in one variable and use them to solve problems in 2 out of 5 problems with 80% accuracy.

Incremental objective #2 related to the goal:

Yuval will create equations and inequalities in one variable and use them to solve problems in 3 out of 5 problems with 80% accuracy.

Date to be achieved:

December

2021

MO/YR

Date to be achieved:

March

2022

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

CFIR

YUVAL

Last

First

MI

Date of Birth

09-SEP-2007

Meeting Date

06-OCT-2021

Section G: Annual Goals and Objectives

Performance Area:

Vocational

Category:

Vocational Education ▼

Annual Goal #:

4

Yuval will complete and submit assignments in 5/6 classes.

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:

Yuval will complete and submit assignments in 3/6 classes.

Incremental objective #2 related to the goal:

Yuval will complete and submit assignments in 4/6 classes.

Date to be achieved:

December ▼

2021 ▼

MO/YR

Date to be achieved:

March ▼

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

CFIR

Last

YUVAL

First

MI

Date of Birth

09-SEP-2007

Meeting Date

06-OCT-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.

No assessment tests found.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

CFIR

Last

YUVAL

First

MI

Date of Birth

09-SEP-2007

Meeting Date

06-OCT-2021

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 informal translation? ☐ Yes ☒ No

Select Preferred Language:

 ▼
Is the parent/guardian requesting official translation? ☒ Yes ☐ No

Select Preferred Language:

Hebrew



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

CFIR

YUVAL

Last

First

MI

Date of Birth

09-SEP-2007

Meeting Date

06-OCT-2021

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	Sylvia Farris	03-SEP-2021
Email	Sylvia Farris	21-SEP-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

06-OCT-2021

- ☒ 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

6-OCT-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. Regarding your child's previous IEP (if relevant):			
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.

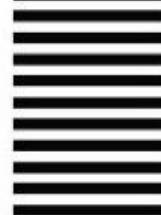
Please fold along dotted lines with the address showing. Seal and mail. Postage is pre-paid.
Again, Thank you!



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

POST

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Reconvened
Meeting DateStudent CFIR
LastYUVAL
First

MI

Date of Birth 09-SEP-2007

Meeting Date 06-OCT-2021

Section R: Names and Signatures (Signatures on File)

Team Member	Print Name	Signature
Parent/Guardian	Sarit Cfir	
Parent/Guardian		
Student Age 18 - 21 years		
Student Under Age 18 years	Yuval Cfir	
Surrogate Parent		
Foster Parent		
Family Foster Home Provider		
Administrator		
Administrative Designee	Jonathan Wasser	
Special Education Teacher	Teri Telford	
General Education Teacher	Gregory Field	
School Psychologist		
School Nurse	Peggy Valentine	
Related Service Staff Speech and Language	Linda Hamilton	
Related Service Staff		
Related Service Staff		
Interpreter		
Sign Language Interpreter		
Agency Representative		
Agency Representative		
Agency Representative		
Other		
Other		
Other		
Other		

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

CFIR

YUVAL

Last

First

MI

Date of

09-SEP-2007

Birth

Meeting

06-OCT-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.

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 checked="" 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.
<div style="border: 1px solid black; height: 80px; width: 100%;"></div>		

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 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.
<div style="border: 1px solid black; height: 80px; width: 100%;"></div>		

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

CFIR

YUVAL

Last

First

MI

**Date of
Birth**

09-SEP-2007

**Meeting
Date**

06-OCT-2021

ANNUAL LEAST RESTRICTIVE ENVIRONMENT ANALYSIS (Continued)

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

Step C.	Can the supports, services, accommodations and/or modifications in the student's IEP be made available in a special school setting?	
	<input type="radio"/> Yes <input type="radio"/> No	If the answer is YES, then a special school setting is the appropriate placement. If the answer is NO, go to the question below.
	<input type="radio"/> Yes <input type="radio"/> No	If not currently available, can the required supports, services, accommodations and/or modifications be made available in a special school setting? If YES, all required supports, services, accommodations and/or modifications must be provided within a reasonable timeline. If the answer is NO, please articulate why in the box below. Then go to Step D.
<div style="border: 1px solid black; height: 80px; 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 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 type="checkbox"/> Lack of opportunity for social interaction <input type="checkbox"/> Lack of opportunities for age-appropriate peer role models <input type="checkbox"/> Amount of socialization opportunities with typical peers <input type="checkbox"/> Limited access to peers in student's home community <input 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

CFIR

YUVAL

Date of Birth 09-SEP-2007

Meeting Date 06-OCT-2021

Last

First

MI

		Effective With this IEP	Future Changes Related to this IEP
	As of Date:	06-OCT-2021	
Eligibility: (from Page 4)		Eligible (OHI)	
	Final IEP Reason Final IEP Effective Date:		
Curriculum		General Education	
Placement	Type of School	Independent Charter School	
	Name of School	EL CAMINO REAL HS (CHARTER) (8617)	
Instructional Setting	Setting	General Education	
	Program	GE	
	Special Day Minutes/Wk		
	Addresses Goals	1(Reading),2(Writing),3(Math),4(Vocational)	
Additional Factors	Low Incident Support	None	
	Assistive Technology Support	No	
	Transportation	None	
	Extended School Year/Intersession	<input type="radio"/> Yes <input checked="" type="radio"/> No	
	Parent Counseling and Training (PCT)	<input checked="" type="radio"/> Yes <input type="radio"/> No	
	ESY Transportation		
Accommodation, Modifications, Supports	Instructional Accommodations	Explain directions and give concrete examples, Allow use of a calculator on tests for analysis(not computation) Check for understanding, Extra time on tests and quizzes 100%; Pre-teach and reteach key vocabulary and concepts, Copy of lessons or teacher notes Extended time on classwork and homework (Up to one additional class period) Preferential seating near the area of instruction and away from distractions An opportunity or Smaller group instruction for extended time and test taking District/State Assessments Accommodations: See Section K	
	Instructional Modifications		
	Other Supports, including Non-Academic and Extra-curricular Activities		
Preparation for Three Year Review IEP (At the second Annual Review IEP Meeting,	Do the Parent and the District (local educational agency) agree that a	<input type="radio"/> Yes <input type="radio"/> No	

the team must discuss and document the decision to conduct or not conduct a three-year comprehensive reassessment.)	reassessment is unnecessary?		
	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	2021-2022: Toni will have General education classes provided by the ISP staff and consultative collaborative Resource support for multiple subjects.		

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student CFIR
Last

YUVAL
First

MI

Date of Birth 09-SEP-2007

Meeting Date 06-OCT-2021

		Effective With This IEP	Future Changes Related To This IEP
Service 1	Start Date:	Effective on Signature Date 06-OCT-2021	
RSP	End Date:		
RSP	Service applies to:	Regular	
	Frequency:	1-5	
This service addresses the following goals:	Interval:	Weekly	
1(Reading)	Minutes/Interval:	100	
2(Writing)	Minutes/Interval (Pullout from Gen Ed):	0	
4(Vocational)	Service Delivery Model:	Direct Service (Collaborative)*	
	RSP Area:	Literacy/ELA/ELD	
	Responsible Personnel:	Resource Specialist Teacher	
		General Education Teacher	
* 			
Service 2	Start Date:	Effective on Signature Date 06-OCT-2021	
RSP	End Date:		
RSP	Service applies to:	Regular	
	Frequency:	1-5	
This service addresses the following goals:	Interval:	Monthly	
1(Reading)	Minutes/Interval:	250	
2(Writing)	Minutes/Interval (Pullout from Gen Ed):	250	
3(Math)	Service Delivery Model:	RSP: Direct Instruction Services*	
4(Vocational)			

	RSP Area:	Multiple Academic Areas	
	Responsible Personnel:	Resource Specialist Teacher	

*

Service 3	Start Date:	Effective on Signature Date 06-OCT-2021	
RSP	End Date:		
RSP	Service applies to:	Regular	
	Frequency:	1-5	
This service addresses the following goals:	Interval:	Weekly	
	Minutes/Interval:	150	
3(Math)	Minutes/Interval (Pullout from Gen Ed):	0	
4(Vocational)	Service Delivery Model:	Direct Service (Collaborative)*	
	RSP Area:	Math	
	Responsible Personnel:	Resource Specialist Teacher	
		General 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="3"/>	

Part 4 - Additional Discussion (This section is optional)

The introductory statement was read and participants were introduced. Yuval is a 9th-grade student who is enrolled in 30 credits and has completed 00 of the 230 general credits required for graduation. This will be a Triennial IEP for Yuval.

The general education math teacher discussed Yuval's Present Level of Performance. Yuval is missing numerous assignments and one test (many assignments were missed during an excused absence). Yuval is not currently earning a passing grade. The teacher will allow Yuval to make up the missing work for credit. The teacher recommends tutoring as available.

The nurse reviewed the PLP. Vision, hearing, weight, and height screenings were completed.

The Speech and Language Pathologist (SLP) discussed the Language and speech (LAS) PLP. The SLP noted that Yuval met prior goals and is not eligible for further services. The SLP recommends discontinuing services. The team agrees.

The case carrier reviewed the PLPs, Goals, accommodations, and ITP. The team noted concern that Yuval was not earning passing grades for Study Skills, math, and college and career. He is currently earning a D in social studies. The team noted that many of the missing assignments occurred during an excused extended absence. The team also discussed that Yuval has 429 unused service minutes for ELA due to having 150 ELA service minutes in his prior IEP, but in a class with 100 available service minutes. The parent does not want Yuval moved to a different class that could provide additional ELA minutes. The team agrees that Yuval is doing well with the current English class and 100 weekly service minutes, and the team agrees that 100 ELA RSP service minutes provide appropriate supports for Yuval. The team agreed that Yuval's compensatory time for RSP ELA services from the beginning of the year through the signature date of this IEP will be waived.

The IEP Team discussed a continuum of placement options. The IEP Team agrees that the General Education Program with RSP support continues to be the LRE for Yuval. The IEP Team agrees that Yuval will have RSP support for English and math and one RSP Study Skills Class.

Information regarding parent counseling and training was provided.

In the event of an emergency school closure resulting in an inability to provide in-person instruction and/or services for more than ten (10) school days, the IEP Team agrees that Student's IEP during the time of closure or distance learning shall be provided as follows:

Placement: General Education Program

Special Education and Related Services: Yuval's Resource services will be provided virtually to the greatest extent possible.

Supplementary Aids & Services:

Explain directions and give concrete examples,
Allow use of a calculator on tests for analysis(not computation)
Check for understanding,
Extra time on tests and quizzes 100%;
Pre-teach and reteach key vocabulary and concepts,
Copy of lessons or teacher notes
Extended time on classwork (Up to one additional class period)

District/State Assessments Accommodations: See Section K

Transition Services: ECR's transition teacher will be available upon request for virtual consultation and meetings regarding Yuval's progress toward ITP goals.

Extended School Year: Does not receive ESY

When school resumes, the IEP team agrees that the changes as outlined above will cease and the original IEP will be implemented.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student CFIR

YUVAL

Date of Birth 09-SEP-2007

Meeting Date 06-OCT-2021

Last

First

MI

FAPE Summary Grid

Program:	GE	Setting:	General Education
Eligibility:	Eligible (OHI)	Curriculum:	General Education
Transportation:	None	Low Incident Support:	None
Date District Received Parent Signature:	06-Oct-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-Literacy/ELA/ELD	100	Reading, Writing, Vocational	--
RSP	RSP	Effective on Signature Date	Regular	Monthly	1-5	RSP-Multiple Academic Areas	250	Reading, Writing, Math, Vocational	--
RSP	RSP	Effective on Signature Date	Regular	Weekly	1-5	RSP-Math	150	Math, Vocational	--

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

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

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

light of the circumstances.

For IEP Team Information

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

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

(ITP, pg. 1 of 3)

Student

CFIR

YUVAL

Date of

09-SEP-2007

Meeting

06-OCT-2021

Last

First

MI

Birth

Date

INDIVIDUAL TRANSITION PLAN (ITP)

Student was invited to IEP meeting: ☒ YesStudent received mentoring:^{info} ☐ Yes ☒ NoStudent referred and placed in an outside agency:^{info} ☐ Yes ☒ NoIf yes, name of agency: Student participated in Work Experience Education:^{info} ☐ Yes ☒ NoStudent received college awareness preparation:^{info} ☒ Yes ☐ NoStudent 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 type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> First ITP	<input type="text"/>
Employment Activity	<input type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> First ITP	<input type="text"/>
Independent Living Skills Activity (as needed)	<input type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> N/A	<input type="text"/>

Section 1: Education/Training

Assessment (at least one assessment must be completed in this area).	Date	Assessment Name and Results: Indicate interests/abilities and area(s) of need (if applicable)
Web-Based Interest Inventory <input type="text"/> If other? <input type="text"/>	15-SEP-2021	Getmyfuture.org Yuval showed interest/abilities in fields related to enterprise and artistry.
Other - (textbox) <input type="text"/> If other? Student interview <input type="text"/>	20-SEP-2021	Yuval would like to major in business law but isn't too sure as of this date. Hobbies are soccer, skating, television and family.

Education/Training Postsecondary Goal

Upon completion of high school, the student will:

If other?

enroll in and attend 2 or 4 year college

Education/Training Activity to Support Goal	Timeline	Person/Agency Responsible
develop a personal career / education plan	15-SEP-2022	Student <input type="text"/> Parent/Guardian/Family <input type="text"/> Other School Staff <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
If other? <input type="text"/>		

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

(ITP, pg. 2 of 3)

Student

CFIR

YUVAL

Date of

09-SEP-2007

Meeting

06-OCT-2021

Last

First

MI

Birth

Date

INDIVIDUAL TRANSITION PLAN (ITP)

Section 2: Employment

Assessment (at least one assessment must be completed in this area).	Date	Assessment Name and Results: Indicate interests/abilities and area(s) of need (if applicable)
<div>Web-Based Interest Inventory ▼</div> <div>If other?</div>	15-SEP-2021	Yuval showed interest in artistry. In speaking with Yuval, he indicated he was interested in
<div>▼</div> <div>If other?</div>		

Employment Postsecondary Goal

Upon completion of high school, the student will:

If other?

be competitively employed ▼

Employment Activity to Support Goal	Timeline	Person/Agency Responsible
develop a career plan and identify career goals	15-SEP-2022	<div>Student ▼</div> <div>Parent/Guardian/Family ▼</div> <div>Other School Staff ▼</div> <div>▼</div> <div>▼</div> <div>▼</div> <div>▼</div>
<div>If other?</div>		

Section 3: Independent Living (as needed)

Assessment (at least one assessment must be completed in this area).	Date	Assessment Name and Results: Indicate interests/abilities and area(s) of need (if applicable)
<div>Web-Based Interest Inventory ▼</div> <div>If other?</div>	15-SEP-2021	Getmyfuture.org. Yuval showed interest in enterprise and artistry.
<div>▼</div> <div>If other?</div>		

Independent Living Postsecondary Goal

Upon completion of high school, the student will:

If other?

live independently ▼

Independent Living Activity to Support Goal	Timeline	Person/Agency Responsible
keep and maintain personal planner/calendar for scheduling appointments/events	15-SEP-2022	<div>Student ▼</div> <div>Parent/Guardian/Family ▼</div> <div>Other School Staff ▼</div> <div>▼</div> <div>▼</div> <div>▼</div>
<div>If other?</div>		

[illegible]

Student

CFIR

YUVAL

Date of

09-SEP-2007

Meeting

06-OCT-2021

Last

First

MI

Birth

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:

Yuval is encouraged to participate in a club on campus.

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? *info*

1. ☒ Yes

2. Are the postsecondary goals updated annually? *info*

2. ☒ Yes

3. Is there evidence that the measurable postsecondary goals were based on age appropriate transition assessment? *info*

3. ☒ Yes

4. Are there transition services that will reasonably enable the student to meet their postsecondary goals? *info*

4. ☒ 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? *info*

5. ☒ Yes

6. ☒ Yes

6. Is (are) there annual IEP goal(s) related to the student's transition services needs? *info*

7. ☒ Yes

7. Is there evidence that the student was invited to the IEP team meeting where transition services were discussed? *info*

8. ☐ Yes ☒ N/A

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? *info*