

## INDIVIDUALIZED EDUCATION PROGRAM (IEP)

## Los Angeles Unified School District

Student Identification  
Number

200199X658

SSID

5165573130

Eligible (DE)

Student FINE  
LastSHLOMO  
First

MI

Date of Birth:

05-JAN-2017

## Section A: Meeting Information

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

## Section B: Student Information

Date of Birth	05-JAN-2017	Age	4	Grade	-1
Gender	<input checked="" type="radio"/> Male <input type="radio"/> Female	Limited English Proficient Student	<input type="radio"/> Yes <input type="radio"/> No	Ethnic Code	Decline to State
Location of the Psych Folder	SUPPORT UNIT NOF	Student has no Psych Folder	<input type="checkbox"/>		
Location of the Cum Folder		Student has no Cum Folder	<input checked="" type="checkbox"/>		
Home Language		Student Language		Alternate Mode of Communication	
Home Address of Student	6017 WHITSETT AVE				
City	NORTH HOLLYV CA	ZIP Code	91606		
Home Telephone	(323) 445-1947	Daytime Telephone		Emergency Telephone	
School of Attendance	Sp Ed Inf/Pre (1017)	Location Code	1017		
School of Residence	Monlux El	Location Code	5342		
Name of Parent/Guardian	Joseph&BrachaFine	Telephone			
Address	6017 WHITSETT AVE				
City	NORTH HOLLYV CA	ZIP Code	91606		
Surogate Parent		Telephone			
Attends <b>CURRENT SCHOOL</b> as a result of one of the following	Preschool Program				
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"/> Superior Court	<input type="radio"/> Department of Mental Health <input type="radio"/> Department of Children's Services			
Child's family living within LAUSD's boundaries?	<input type="radio"/> No <input checked="" type="radio"/> Yes	<input type="radio"/> Other			
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:

Start Date:

Withdrawal by Parent Request:

☐ Yes ☐ No

Reclassification Date:

ELPAC Performance Level and Performance Descriptor:

Test Date:

Alternate ELPAC Performance Level and Performance Descriptor:

Test Date:

## Section D: Goal Achievement from Current IEP

		Achieved		
Goal for: (example - Reading)		Yes	No	If No, explain the reason the goal/objective was not achieved
1		<input type="radio"/>	<input type="radio"/>	
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:

Communication

Category:

Communication

Assessment/Monitoring Process  
Used:

Parent report

State/District Assessment Results:

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

As Sholmo was referred to LAUSD during the period of COVID-19 school facility closures, information was gathered on 05/19/2021 through conversation with parents in order to support the development of a present level of performance in the area of communication. The following strengths and weaknesses were identified:

It must be noted that both Hebrew and English are spoken in the home and school environments

Areas of strength:

Per parent report, receptively, Shlomo follows one and two step directions, identifies objects, identifies pictured objects, identifies body parts, identifies clothing items, identifies actions in a book, understands multiple prepositions (e.g. in/on/under), identifies shapes, identifies colors, understands the quantitative concepts of big/little, identifies objects by function, and identifies objects by category.

Expressively, per parent report Shlomo uses 5+ word sentences. He labels objects, uses action words, gives his name on request, uses size concepts, uses pronouns, labels colors, asks questions, answers yes/no questions, answers concrete questions, and answers open ended questions.

In regard to speech production, parents did not express any concerns with voice, volume, or fluency.

Areas of weakness:

Expressively, parents stated although Sholmo, 'talks a lot,' he does not 'talk correctly.' Parents stated they noted this in both his primary language (Hebrew) and now also in English. Parents stated Shlomo presents with a limited vocabulary. Parents noted although he is able to say sentences he, 'puts the words in the wrong places.' In addition, although he, 'talks a lot,' when asked about his conversational skills, parents noted he consistently turns the conversation to a preferred topic.

In regard to speech, parents reported Shlomo does not pronounce some words well, only says parts of some words, often mumbles, and is generally hard to understand. Parents stated they understand approximately 70% of Shlomo's speech while others understand 50% or less.

Parents stated his teachers have noted the same concerns.

Performance Area:

Category:

Assessment/Monitoring Process  
Used:

State/District Assessment Results:

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

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## Section E: Present Level of Performance

Performance Area:

Cognitive/Processing

Category:

Cognitive Development

Assessment/Monitoring Process  
Used:

Alternative Assessment, Observation, Interviews, Record Review

State/District Assessment Results:

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

During the period of COVID-19 as school facilities re-open with safety restrictions, information was gathered on 5/26/2021 through conversations with parent, review of Regional Center or outside agency reports, and/or the DP-3 questionnaire, in order to support the development of a present level of performance in the area of cognitive skills. The following strengths and potential areas of concern were identified:

## Strengths:

Per parent report, Shlomo scored in the average range in the area of cognitive skills. As such, he is able to answer some simple questions about the main facts of a story, he can draw or copy a square, and is able to sort by color, shape, or size.

## Weaknesses:

Shlomo scored in the average range in the area of cognitive skills. As such, no areas of need were noted in the area of cognitive skills, at this time.

Performance Area:

School Readiness

Category:

Cognitive Development

Assessment/Monitoring Process  
Used:

Alternative Assessment, Observation, Interviews, Record Review

State/District Assessment Results:

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

During the period of COVID-19 as school facilities re-open with safety restrictions, information was gathered on 5/26/2021 through conversations with parent, review of Regional Center or outside agency reports, and/or the DP-3 questionnaire, in order to support the development of a present level of performance in the area of adaptive skills. The following strengths and potential areas of concern were identified:

## Strengths:

Per parent report, Shlomo is able to identify and label roughly 8 colors, 3 shapes, and 7 body parts when asked to do so. Further, he reportedly counts from 1-10, gives his first name and age when asked, and follows a one step direction.

## Weaknesses:

Parents reported that Shlomo is not able to identify or label letters or numbers at this time, he does not give his last name when asked, and is not able to sit and listen to a story without becoming distracted or losing focus. Parents also stated that he cannot follow a two step direction as he needs instructions broken down into steps and also requires reminders to follow through.

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## Section E: Present Level of Performance

Performance Area:

Motor Skills

Category:

Motor Abilities

Assessment/Monitoring Process  
Used:

Alternative Assessment, Observation, Interviews, Record Review

State/District Assessment Results:

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

During the period of COVID-19 as school facilities re-open with safety restrictions, information was gathered on 5/26/2021 through conversations with parent, review of Regional Center or outside agency reports, and/or the DP-3 questionnaire, in order to support the development of a present level of performance in the area of motor/physical skills. The following strengths and potential areas of concern were identified:

## Strengths:

Per parent report, Shlomo scored in the average range in the area of motor/physical skills. As such, he is able to use a play bat to hit a softly pitched ball, he is able to jump over multiple items in his path (8 inches tall) without stopping, and he is able to buckle himself in a car seat without adult assistance.

## Weaknesses:

Shlomo scored in the average range in the area of motor/physical skills. As such, no areas of need were noted in the area of motor/physical skills, at this time.

Performance Area:

Category:

Assessment/Monitoring Process  
Used:

State/District Assessment Results:

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

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## Section E: Present Level of Performance

Performance Area:

Social-Emotional Skills

Category:

Social Emotional

Assessment/Monitoring Process  
Used:

Alternative Assessment, Observation, Interviews, Record Review

State/District Assessment Results:

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

During the period of COVID-19 as school facilities re-open with safety restrictions, information was gathered on 5/26/2021 through conversations with parent, review of Regional Center or outside agency reports, and/or the DP-3 questionnaire, in order to support the development of a present level of performance in the area of social-emotional skills. The following strengths and potential areas of concern were identified:

## Strengths:

Per parent report, Shlomo scored in the above average range in the area of social-emotional skills. As such, he is reportedly able to play group games with peers, plays table games such as checkers, Old Maid, or Candy Land with turn taking and rules, and he is able to work on a single task with a peer such as building/playing for 30 minutes without supervision.

## Weaknesses:

Shlomo scored in the above average range in the area of social-emotional skills per parent responses at this time. As such, no clear areas of need were noted in the area of social emotional skills at this time, however some aspects of concern were noted based on parent interview. As such, parents reported that Shlomo tends to 'daydream' and needs reminders to focus. It was also stated that he is quite active and is often in 'superhero' mode and tends to present like he is 'in his own world'. Parents stated that he is social and shows interest in peers however he is also somewhat 'fearful' of others hurting him and tends to 'play the outside of the group'. Parents also reported that Shlomo tends to go off on tangents and does not stay on topic when asked a question.

Performance Area:

Adaptive Skills

Category:

Adaptive Behaviors

Assessment/Monitoring Process  
Used:

Alternative Assessment, Observation, Interviews, Record Review

State/District Assessment Results:

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

During the period of COVID-19 as school facilities re-open with safety restrictions, information was gathered on 5/26/2021 through conversations with parent, review of Regional Center or outside agency reports, and/or the DP-3 questionnaire, in order to support the development of a present level of performance in the area of adaptive skills. The following strengths and potential areas of concern were identified:

## Strengths:

Per parent report, Shlomo scored in the average range in the area of adaptive skills. As such, he is able to care for his bowel movements independently, operates a computer to play a simple educational game, and he is able to select and play a DVD or manipulate the controls in order to play a movie or recording on the television.

## Weaknesses:

Shlomo scored in the average range in the area of adaptive skills at this time. As such, no areas of need were noted in the area of adaptive skills at this time.

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## Section E: Present Level of Performance

Performance Area:

Health and Development

Category:

Health

Assessment/Monitoring Process  
Used:

Parent Interview

State/District Assessment Results:

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

LAUSD schools are closed at this time due to the COVID-19 pandemic. Health information is gathered from a review of health records and conference with parent/guardian. Vision and hearing information are the most current documented in the health record.

Health Summary: Mother provided health information via phone conference on 6/1/21. She reported a full term uncomplicated pregnancy. Shlomo was healthy at birth, and he went home with mother in good condition and without any medical equipment. Mother reported that Shlomo's developmental milestones were within the normal range. He walked at 14 months. Mother also reported that Shlomo is in overall good health with no significant chronic health condition. He has no known allergies and he is not on any prescription medication. There are no verbalized concerns with his hearing or his vision. He is reportedly current with his immunization.

Strength: Per mother's report, Shlomo ambulates independently without any assistance. He eats a variety of regular table food, and he is independent with feeding. He is also independent with toileting. He communicates his needs verbally with 3-4 words phrases.

Areas of Need: None in the area of health.

Impact of Disability: Shlomo's health does not impact his participation, performance, and access in his educational program.

Accommodation/Modifications: None needed at this time.

Report submitted by Chinyelu Ojukwu, RN, MPH, LAUSD School Nurse 6/1/21.

Performance Area:

Category:

Assessment/Monitoring Process  
Used:

State/District Assessment Results:

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

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## Section F: Eligibility

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

Health, general ability, academic performance, language, motor, social-emotional, and self-help/adaptive development

For Initial IEP, interventions attempted prior to determining eligibility:

Private preschool

Eligible as a student with the disability of:

Code:

DE

Deferred Eligibility (Preschool Only)



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:

Communication

Category:

Communication

Annual Goal #:

1

Shlomo will produce all age appropriate sounds in all word positions of 3-5 word utterances with 80% accuracy, 4 out of 5 trials.

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:

Shlomo will produce all age appropriate sounds in the initial and final word positions of single syllable words, at the single word level with 80% accuracy, 4 out of 5 trials.

## Incremental objective #2 related to the goal:

Shlomo will produce all age appropriate sounds in all word positions of 1-2 word utterances with 80% accuracy, 4 out of 5 trials.

Date to be achieved:

October

2021

MO/YR

Date to be achieved:

February

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:

Communication

Category:

Communication

Annual Goal #:

2

During conversational speech, in a variety of settings, Shlomo will use appropriate word order with 80% accuracy in 4 out of 5 trials, independently.

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:

During structured language tasks, in a variety of settings, Shlomo will use appropriate word order with 60% accuracy in 3 out of 5 trials.

## Incremental objective #2 related to the goal:

During conversational speech, give mild cues and prompting, in a variety of settings, Shlomo will use appropriate word order with 70% accuracy in 4 out of 5 trials.

Date to be achieved:

October

2021

MO/YR

Date to be achieved:

February

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"/>

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Section K: Participation in State and District-wide Assessments

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

**DRDP-A** - (Adaptations identified below are applicable)

Adaptations:

- Visual support

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## Section N: Procedural Safeguards and Follow-up Actions

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

Is the parent/guardian requesting 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.

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## 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

Phone

## Whom

ECSE

## When

21-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

02-JUN-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

2-JUN-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.

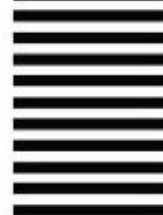
Please fold along dotted lines with the address showing. Seal and mail. Postage is pre-paid.  
Again, Thank you!



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 Date

Student

FINE

SHLOMO

Last



First

MI

Date of Birth 05-JAN-2017

Meeting Date 02-JUN-2021

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

Team Member	Print Name	Signature
Parent/Guardian	Bracha Fine (Via Zoom)	
Parent/Guardian	Joseph Fine (Via Zoom)	
Student Age 18 - 21 years		
Student Under Age 18 years		
Surrogate Parent		
Foster Parent		
Family Foster Home Provider		
Administrator		
Administrative Designee	Michelle Farish	
Special Education Teacher	Valerie Brekke	Valerie Brekke
General Education Teacher	Wendy Cruz	
School Psychologist		
School Nurse		
Related Service Staff LAS	Adriana Ornelas	Adriana Ornelas
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

FINE

SHLOMO

Last

First

MI

Date of  
Birth

05-JAN-2017

Meeting  
Date

02-JUN-2021

## LEAST RESTRICTIVE ENVIRONMENT ANALYSIS

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

Student's Current Placement Type:

<input type="radio"/> General Education Class/General Education Site	<input type="radio"/> Special Day Program/General Education Site
<input type="radio"/> Special Day Program/Special Education Center	<input type="radio"/> Nonpublic School
<input type="radio"/> Home/Hospital or Residential Care Facility	

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

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

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

SHLOMO  
First

MI

**Date of Birth** 05-JAN-2017

**Meeting Date** 02-JUN-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   
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 type="checkbox"/>	Diminished access to the full range of the curriculum
	<input type="checkbox"/>	Missed general education instruction taught by highly qualified staff
	<input type="checkbox"/>	Rate at which student may earn credits for graduation
	<input type="checkbox"/>	Lack of opportunity for social interaction
	<input type="checkbox"/>	Lack of opportunities for age-appropriate peer role models
	<input type="checkbox"/>	Amount of socialization opportunities with typical peers
	<input type="checkbox"/>	Limited access to peers in student's home community
	<input 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 FINE  
LastSHLOMO  
FirstMI  
MI

Date of Birth 05-JAN-2017

Meeting Date 02-JUN-2021

		Effective With this IEP	Future Changes Related to this IEP
	As of Date:	02-JUN-2021	
Eligibility: (from Page 4)		<b>Eligible (DE)</b>	
	Final IEP Reason Final IEP Effective Date:		
Curriculum		General Education	
Placement	Type of School	Preschooler Non-LAUSD/Not Headstart	
	Name of School	SP ED INF/PRE (1989)	
		BELLINGHAM EL	
Instructional Setting	Setting	General Education	
	Program	AACP	
	Special Day Minutes/Wk		
	Addresses Goals	1(Communication),2(Communication)	
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	<p>Provide language stimulation activities/instruction, as well as sound discrimination activities/instruction for place and manner of articulation for target sounds (auditory bombardment and practice in small increments, such as sound-to-syllable to word-to-sentence to conversational levels, and encourage imitation).</p> <p>Match tasks/assignments to interests and ability levels. Provide ample opportunity and encouragement to use verbal expressions. As needed, provide frequent direct/indirect cues, models, and explanations (repeated instructions) on how to self-monitor and produce age-appropriate language independently.</p> <p>Provide a long response time.</p> <p>Provide opportunities to engage in social interactions with adult/peer models of grammatical phrases/sentences, using clear speech with correct articulation of sounds.</p>	
	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** FINE

SHLOMO

**Date of Birth** 05-JAN-2017**Meeting**

02-JUN-2021

**Last****First****MI****Date**

		<b>Effective With This IEP</b>	<b>Future Changes Related To This IEP</b>
--	--	--------------------------------	---

**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**

	<b>Effective With this IEP</b>	<b>Future Changes Related to this IEP</b>
<b>% of Time per Week outside of General Education</b>	.0	

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

During the period of COVID-19 as school facilities re-open with safety restrictions, the assessments listed in the signed assessment plan, received 05/11/2021 were not completed in their entirety. A temporary eligibility, Deferred Eligibility (DE), will be used and will require follow up assessment to be completed as soon as possible once schools re-open and resume normal operations. Shlomo will receive educational services either in-person if parent elects or virtually as described in the Distance Learning Plan (DLP) recommended by the IEP team until all school facilities resume normal operations.

The IEP committee discussed the least restrictive environment and recommends the after-school program (AECPP). The Afterschool Early Childhood Program (AECPP) meets with children and their caregivers twice a week for 90 minutes each session. The program targets speech and language development as well as social emotional development while enhancing overall development through the implementation of structured preschool curricula. Instruction is delivered by two Special Education Teachers, a Special Education Assistant, and a Speech Language Pathologist. Family involvement and professional partnership is an important component of the program's model.

## INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

 Student     
 Last First MI
Date of Birth Meeting Date 

## FAPE Summary Grid

<b>Program:</b>	AACP	<b>Setting:</b>	General Education
<b>Eligibility:</b>	Eligible (DE)	<b>Curriculum:</b>	General Education
<b>Transportation:</b>	None	<b>Low Incident Support:</b>	None
<b>Date District Received Parent Signature:</b>	02-Jun-2021		

Service Code	Service Desc	Start Date	Service Applies To	Interval	Frequency	Area	Total Minutes	Addresses Goal(s)	No Consent

## Alternative Remote/Distance Learning Services During Emergency Conditions

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

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

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