

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Identification Number 122111F005

Eligible (SLI)

Student COHEN Last, LORI First, C MI

Date of Birth 21-DEC-2011

Section A: Meeting Information

Table with columns: Pertinent Dates, Type of Meeting. Includes fields for meeting dates, location (Coughlin), and district name (Los Angeles Unified School District).

Section B: Student Information

Form containing student details: Date of Birth (21-DEC-2011), Age (6), Grade (0), Gender (Female), Ethnic Code (White), Home Address (12401 FILMORE ST 109, SYLMAR, CA 91342), School of Attendance (Coughlin El), and Parent/Guardian (Victoria Berkley).

If the student is 18 years old or older or is an emancipated minor, does he/she have educational decision-making rights? No Yes

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Date of Birth Meeting Date

Section C: Language Acquisition

Language Classification: Start Date: Reclassification Date:

Parent Waiver: Yes No

Elementary English Language Development Level: Start Date:

Secondary English Language Development Level: Start Date:

Communication Observation Matrix Level: Start Date:

Section D: Goal Achievement from Current IEP

Goal for: (example - Reading)	Achieved		If No, explain the reason the goal/objective was not achieved
	Yes	No	
1. Artic/ Phono	<input type="radio"/>	<input checked="" type="radio"/>	Not at the conversational speech level yet
Objective 1 met	<input type="radio"/>	<input checked="" type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
2. Expressive Language	<input type="radio"/>	<input checked="" type="radio"/>	Needs more time
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
3. Social Emotional	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
4. Mathematics	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
5. Language	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
6. Reading	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
7.	<input type="radio"/>	<input type="radio"/>	
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"/>	
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"/>	
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"/>	
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 COHEN LORI C Date of Birth 21-DEC-2011 Meeting Date 01-MAR-2018

Section E: Present Level of Performance

Performance Area: Reading
Assessment/Monitoring Process Used: Brigance, Teacher-made Tests, Informal Observations
State/District Assessment Results: DIBELS

Current Performance/Assessment Summary (include student strengths, student needs and impact of disability on student performance):
Strengths:Lori is demonstrating skills at the building earlier level in the area of reading, and comprehension of age-appropriate text, concepts about print, phonological awareness.
During the testing, Lori was cooperative most of the time and able to receptively and expressively recognize all the letter names and letter sounds of the alphabet.
Areas of Need: Lori needs to independently maintain her attention through an entire reading of a story. She needs to stay on topic when answering questions about the details of stories read in the class.
Impact of Disability: Lori's disability of Language Impairment may affect her ability to access the general education curriculum because of difficulties with receptive language when participating in reading activities, like reading a book and singing a song, and expressive language when answering questions.

Performance Area: Writing
Assessment/Monitoring Process Used: Brigance, Teacher-made Tests, Informal Observation
State/District Assessment Results: N/A

Current Performance/Assessment Summary (include student strengths, student needs and impact of disability on student performance):
Strengths:Lori is demonstrating skills at the building earlier level in the area of writing for the measures of interest in letter formation, lines, shapes, figures and concepts about print and emergent writing skills.
Areas of Need: Lori needs to write her full name and personal information more independently with correct letter formation, sizing and proper spacing.
Impact of Disability: Lori's disability may affect her ability to access the general education curriculum because of difficulties with receptive language when participating in writing activities, like copying and creating sentences, writing personal information and developing paragraphs.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student COHEN LORI C Date of Birth 21-DEC-2011 Meeting Date 01-MAR-2018

Section E: Present Level of Performance

Table with 2 columns: Label (Performance Area, Assessment/Monitoring Process Used, State/District Assessment Results) and Value (Mathematics, Brigance, Teacher-made Tests, Informal Observations, N/A)

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

Strengths: Lori receptively and expressively identified numbers up to 20, correctly chooses from answer choices e.g. 3, 1, 2. Lori has correctly identified basic colors and shapes, largest and smallest objects, and rote count over 50. Lori can fill in missing numbers before, after and in between given number with prompts and support. Currently, Lori is demonstrating skills at the building earlier level in the area of measurement, number sense quantity, patterning, and skip counting. With movement prompts (punching on the air) and visual support, Lori can skip count by 5's and by 10's up to a 100. She understands and uses the words bigger and smaller, more and less, longer and shorter. She claps along with simple sequences during carpet time, and will copy a simple pattern with adult modeling, and cues. Areas of Need: Lori was not able to identify and write some dictated numbers. She has difficulty identifying numbers over 20 when presented in random order, however she's able to rote count over 50. Lori is not learning to add and subtract simple equations yet. Impact of Disability: Lori's disability of Speech or Language Impairment may affect her ability to access the general education curriculum because of difficulties with receptive and expressive language when participating in mathematics activities.

Table with 2 columns: Label (Performance Area, Assessment/Monitoring Process Used, State/District Assessment Results) and Value (Pre-vocational, Informal Observation, N/A)

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

Strengths: Lori is able to copy and identify her name, age, address, phone number, and birthday with visual prompts. She knows her way around the classroom and at the school ground. Within school campus, Lori is independent, however, she needed close supervision from the staff especially when outside playing on the ground. She performs her weekly job independently such as: holding doors, throwing trash, passing out tools and materials to class etc. Lori is highly motivated with verbal praises, food reward and tangible objects she could buy with the money (play money) she earns for being on task and appropriate throughout the day. Areas of Need: Lori needs to learn to recognize and count different kinds of dollar bills and coins, however, she knows that money could be exchanged/purchased with the items she likes from the stores. Impact of Disability: Lori's disability of Speech or Language Impairment may affect her ability to access the general education curriculum because of difficulties with receptive and expressive language when participating in pre-vocational activities.


INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student COHEN LORI C **Date of Birth** 21-DEC-2011 **Meeting Date** 01-MAR-2018

Section E: Present Level of Performance

Performance Area:	Language
Assessment/Monitoring Process Used:	Teacher report, informal testing, on-going clinical observation
State/District Assessment Results:	n/a


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

SUMMARY OF SERVICES: Lori is a 6 year, 2 month old kindergarten student at Sara Coughlin Elementary in a specific learning disabilities (SLD) special day class with a special education eligibility of speech and language impairment (SLI). She has been receiving speech and language (DIS-LAS) services since her initial IEP held in August 2016. Currently, Lori receives DIS-LAS services for 30 minutes a week to address her articulation, phonology and language skills.

STRENGTHS: Lori is a sweet and compliant little girl who attends speech sessions willingly and appropriate engages with her peers. In regards to her expressive language skills, Lori produces phrases and sentences for a variety of pragmatic functions during structured and unstructured language activities. She is able to answer what (including the function of items), where, and who questions related common knowledge (e.g. who takes care of you? my mom). Lori asks and answers questions, refers to multiple items by adding an -s, and uses present progressive verbs correctly in her spontaneous speech. Additionally, she is able to maintain a reciprocal conversation with a peer or adult for up to 3 conversational turns. In regards to her receptive language, Lori demonstrates the ability to follow classroom routines, identify common objects (e.g. colors, animals), and complete 1-2 step simple directions.

NEEDS: Lori demonstrates difficulty in her ability to organize her thoughts and formulate complete, coherent sentences. During her spontaneous utterances, Lori will often repeat the first 2-3 words up to three times in a row when gathering her thoughts. A visual model was implemented that proved to be an effective strategy to decrease her number of reformulations. Lori demonstrated difficulty with the following kindergarten level standard skills: identifying opposites, naming items in

Performance Area:	Language cont...
Assessment/Monitoring Process Used:	
State/District Assessment Results:	

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

a specific category, naming the category of listed objects, answering when and why questions , and identifying words that rhyme. Per teacher report, Lori often makes off topic remarks when answering questions related to auditory information which appears to be secondary to her difficulty comprehending spoken language.

IMPACT OF DISABILITY: Lori's speech and language impairment impairs her ability to answer questions and formulate coherent, clear sentences which impacts her progress and involvement in the general education curriculum. Therefore, it is recommended that Lori continue to receive DIS-LAS services for 30 minutes a week to address her expressive and receptive language skills.

Lauren Danner, M.S. CCC-SLP
Speech-Language Pathologist, LAUSD

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student COHEN LORI C Date of Birth 21-DEC-2011 Meeting Date 01-MAR-2018

Section E: Present Level of Performance

Performance Area: Articulation
Assessment/Monitoring Process Used: Teacher report, on-going clinical observation, informal testing
State/District Assessment Results: n/a

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

SUMMARY OF SERVICES: Lori is a 6 year, 2 month old kindergarten student at Sara Coughlin Elementary in a specific learning disabilities (SLD) special day class with a special education eligibility of speech and language impairment (SLI). She has been receiving speech and language (DIS-LAS) services since her initial IEP held in August 2016. Currently, Lori receives DIS-LAS services for 30 minutes a week to address her articulation, phonology and language skills.
STRENGTHS: Per clinical observation and teacher report, Lori has made progress in her articulation, phonological, and overall speech intelligibility skills. In regards to her most recent IEP goal which states, 'Lori will produce consonant blends, final consonants and multisyllabic words (2-3 syllables) to increase her overall intelligibility to 70% accuracy in spontaneous speech activities/ during connected speech, given minimal teacher prompts/ cues, during a 30 minute session, in 7 correct responses out of 10 given opportunities, over 3 consecutive speech sessions, as measured by informal teacher charted observations and SLP documentations', she has made great progress towards this goal. She is currently produced the final consonants of words with 70% accuracy during her spontaneous speech given minimal prompts. Additionally, Lori is producing /s-blends/ and /l-blends/ in structured sentences with 70% accuracy given moderate verbal prompts and models. It should be noted that her articulation skills are inconsistent at this time so she is not yet able to maintain 70% accuracy across 3 consecutive sessions.
NEEDS: Lori continues to demonstrate below grade and age level expectations in her speech intelligibility and articulation skills. During her production of multi-syllabic words, she often will omit syllables or substitute multiple sounds in the word. At the conversational level, Lori's

Performance Area: Articulation cont..
Assessment/Monitoring Process Used:
State/District Assessment Results:

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

accuracy level of consonant blends and multisyllabic words is judged to be 50%. Additionally, she is not yet able to produce /r-blends/ at the sentence or conversational speech level. Lori's speech intelligibility is greatly affected by her inconsistent speech production skills and ability to formulate coherent and cohesive sentences. Currently, her speech intelligibility is judged to be 65% intelligible to a familiar listener.
IMPACT OF DISABILITY: Lori's speech and language impairment impairs her ability to clearly communicate herself during oral language activities which impacts with her progress and involvement in the general education curriculum. Therefore, it is recommended that Lori continue to receive DIS-LAS services for 30 minutes a week to address her articulation and language skills to increase her overall speech intelligibility.
Lauren Danner, M.S. CCC-SLP
Speech-Language Pathologist, LAUSD

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Student COHEN LORI C **Date of Birth** 21-DEC-2011 **Meeting Date** 01-MAR-2018

Section F: Eligibility

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

[Empty text box for disability discussion]

For Initial IEP, interventions attempted prior to determining eligibility:

[Empty text box for interventions]

Eligible as a student with the disability of:

Code: SLI Speech Or Language 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
- Lack of instruction in math
- Temporary Physical Disability
- Limited English Proficiency
- Lack of instruction in reading
- Environmental, Cultural or Economic Factors

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Date of Birth Meeting Date

Section G: Annual Goals and Objectives

Performance Area:

Annual Goal #

By February 2019, after being read a story, Lori will respond to simple questions about the text by responding correctly to 4 out of 5 factual questions with 80% accuracy for 4/5 trials as observed and recorded by teacher.

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:

By June 2018, after being read a story, Lori will respond to simple questions about the text by responding correctly to 4 out of 5 factual questions with 60% accuracy for 3/5 trials as observed and recorded by teacher.

Date to be achieved MO/YR

Incremental objective #2 related to the goal:

By February 2019, after being read a story, Lori will respond to simple questions about the text by responding correctly to 4 out of 5 factual questions with 70% accuracy for 4/5 trials as observed and recorded by teacher.

Date to be achieved MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

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

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

Section G: Annual Goals and Objectives

Performance Area:

Annual Goal #

By February 2019, when writing (Morning Journal, daily log etc.), Lori will use appropriate letter formation and sizing as demonstrated by all letters staying on the line and within 1/8 of the designated areas for 4 out of 5 trials on 9 of 10 trials as observed and charted by staff.

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:

By June 2018, when writing (Morning Journal, daily log etc.), Lori will use appropriate letter formation and sizing as demonstrated by all letters staying on the line and within 1/8 of the designated areas for 3 out of 5 trials on 7 of 10 trials as observed and charted by staff.

Date to be achieved MO/YR

Incremental objective #2 related to the goal:

By October 2018, when writing (Morning Journal, daily log etc.), Lori will use appropriate letter formation and sizing as demonstrated by all letters staying on the line and within 1/8 of the designated areas for 4 out of 5 trials on 8 of 10 trials as observed and charted by staff.

Date to be achieved MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

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

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

Section G: Annual Goals and Objectives

Performance Area:

Annual Goal #

Lori will fluently add and subtract within 30 using manipulative, number line, and/or Touch Math strategies with 80% accuracy in 4 out of 5 trials as measured by student work samples.

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

Methods of Evaluation:

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

Incremental objective #1 related to the goal:

Lori will fluently add and subtract within 30 using manipulative, number line, and/or Touch Math strategies with 60% accuracy in 3 out of 5 trials as measured by student work samples.

Date to be achieved MO/YR

Incremental objective #2 related to the goal:

Lori will fluently add and subtract within 30 using manipulative, number line, and/or Touch Math strategies with 70% accuracy in 4 out of 5 trials as measured by student work samples.

Date to be achieved MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

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

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

Section G: Annual Goals and Objectives

Performance Area:

Annual Goal #

By February 2019, given enough money and access to items which may be purchased at school or in the community, Lori will exchange money for desired items (make purchase) with 80% accuracy on 8 of 10 trials, as measured by data probes.

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:

By June 2018, given enough money and access to items which may be purchased at school or in the community, Lori will exchange money for desired items (make purchase) with 60% accuracy on 6 of 10 trials, as measured by data probes.

Date to be achieved MO/YR

Incremental objective #2 related to the goal:

By October 2018, given enough money and access to items which may be purchased at school or in the community, Lori will exchange money for desired items (make purchase) with 70% accuracy on 7 of 10 trials, as measured by data probes.

Date to be achieved MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

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

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

Section G: Annual Goals and Objectives

Performance Area:

Annual Goal #

By March 2019, Lori will improve her speech intelligibility during 15 minutes of conversational speech in 2 out of 3 opportunities with 80% accuracy as measured by teacher report and clinical observation.

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

Methods of Evaluation:

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

Incremental objective #1 related to the goal:

By June 2018, Lori will improve her speech intelligibility during 5 minutes of conversational speech in 2 out of 3 opportunities with 70% accuracy as measured by teacher report and clinical observation.

Date to be achieved MO/YR

Incremental objective #2 related to the goal:

By November 2018, Lori will improve her speech intelligibility during 10 minutes of conversational speech in 2 out of 3 opportunities with 75% accuracy as measured by teacher report and clinical observation.

Date to be achieved MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

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

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

Section G: Annual Goals and Objectives

Performance Area:

Annual Goal #

By March 2019, Lori will be able to respond appropriately and accurately to WH questions related to grade level semantic language skills (e.g. opposites, synonyms, attributes, categories) in 8 out of 10 opportunities with 80% accuracy as measured by clinical observation and teacher report.

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:

By June 2018, Lori will be able to respond appropriately and accurately to WH questions related to grade level semantic language skills (e.g. opposites, synonyms, attributes, categories) in 8 out of 10 opportunities with 60% accuracy as measured by clinical observation and teacher report.

Date to be achieved MO/YR

Incremental objective #2 related to the goal:

By November 2018, Lori will be able to respond appropriately and accurately to WH questions related to grade level semantic language skills (e.g. opposites, synonyms, attributes, categories) in 8 out of 10 opportunities with 70% accuracy as measured by clinical observation and teacher report.

Date to be achieved MO/YR

IEP REPORT OF PROGRESS AND ACHIEVEMENT FROM CURRENT IEP

EXPLANATION OF MARKS

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

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

Section K: Participation in State and District-wide Assessments

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

Student will participate in Regular State and District Assessments.

ELPAC

(Designated Supports and/or Accommodations identified below are applicable)

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student	COHEN	LORI	C	Date of Birth	21-DEC-2011	Meeting Date	01-MAR-2018
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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 translation services? Yes No

If yes, the parent/guardian has requested a written translation of the IEP in

Specify the Individual Pages to be translated:

Special Requests:

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

THIS SPACE DELIBERATELY LEFT BLANK.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student COHEN LORI C Date of Birth 21-DEC-2011 Meeting Date 01-MAR-2018

Section Q: Parent Participation and Consent

Table with 2 main columns: Parent Participation and Parent Notification. Includes radio button options for meeting attendance and a table for notification details (Method, Whom, When).

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.

- Radio button options for agreement: 'AGREES to all components of the IEP' and 'AGREES to all components of the proposed IEP WITH THE SPECIFIC EXCEPTION(S) stated below:'. Includes checkboxes for Assessment, Eligibility, Instructional Setting, and Services with 'Specify' fields.

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

Large empty box for parent concerns and comments.

Signature(s) _____ / _____ Date _____
Radio button options: Parent, Guardian, Student 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-MAR-2018

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"/>

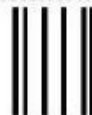
If any of the answers to items 13-16 or 18-19 was No, please discuss your concern(s) with the site administrator or call the Division of Special Education at (213) 241-6701.

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.

Handwriting lines for providing feedback.

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

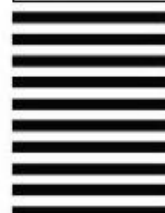


NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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 513307
LOS ANGELES CA 90099-4093



PARENT INPUT SURVEY
English

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Reconvened Meeting Date

Student

Date of Birth

Meeting Date

Section R: Names and Signatures (Signatures on File)

Team Member	Print Name	Signature
Parent/Guardian	<input type="text" value="Victoria Berkley"/>	
Parent/Guardian	<input type="text"/>	
Student Age 18 - 21 years	<input type="text"/>	
Student Under Age 18 years	<input type="text"/>	
Surrogate Parent	<input type="text"/>	
Foster Parent	<input type="text"/>	
Family Foster Home Provider	<input type="text"/>	
Administrator	<input type="text"/>	
Administrative Designee	<input type="text" value="Michele Herrera"/>	
Special Education Teacher	<input type="text" value="Nora Brasileno"/>	
General Education Teacher	<input type="text" value="Guillermina Paz"/>	
School Psychologist	<input type="text"/>	
School Nurse	<input type="text"/>	
Related Service Staff <input type="text" value="LAS"/>	<input type="text" value="Lauren Danner"/>	
Related Service Staff <input type="text"/>	<input type="text"/>	
Related Service Staff <input type="text"/>	<input type="text"/>	
Interpreter	<input type="text"/>	
Sign Language Interpreter	<input type="text"/>	
Agency Representative	<input type="text"/>	
Agency Representative	<input type="text"/>	
Agency Representative	<input type="text"/>	
Other <input type="text"/>	<input type="text"/>	
Other <input type="text"/>	<input type="text"/>	
Other <input type="text"/>	<input type="text"/>	
Other <input type="text"/>	<input type="text"/>	

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student

Date of Birth

Meeting Date

LEAST RESTRICTIVE ENVIRONMENT ANALYSIS
To Be Completed By the IEP Team at the IEP Team Meeting

Student's Current Placement Type:

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

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.

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

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 checked="" 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.
<input type="text"/>		

Los Angeles Unified School District

Student

Date of Birth

Meeting Date

ANNUAL LEAST RESTRICTIVE ENVIRONMENT ANALYSIS (Continued)
To Be Completed By the IEP Team at the IEP Team Meeting

Step C.	Can the supports, services, accommodations and/or modifications in the student's IEP be made available in a special school setting?	
	<input 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.

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.

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.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 1 - Eligibility, Placements and Supports

Student Date of Birth Meeting Date

		Effective With this IEP	Future Changes Related to this IEP
	As of Date:		
Eligibility: (from Page 4)		Eligible (SLI)	
	<i>Final IEP Reason</i> <i>Final IEP Effective Date:</i>		//
Curriculum		General Education	
Placement	Type of School	District Non-Resident School	
	Name of School	COUGHLIN EL	
Instructional Setting	Setting	Special Education	
	Program	SLD	
	Special Day Minutes/Wk	1250	
	Addresses Goals	1(Reading),2(Writing),3(Mathematics),4(Pre-Vocational),6(Language),5(Articulation)	//
Additional Factors	Low Incident Support	None	
	Assistive Technology Support	No	
	Transportation	School to School	
	Extended School Year/Intersession	Yes <input checked="" type="radio"/> No <input type="radio"/>	
	Parent Counseling and Training (PCT)	Yes <input type="radio"/> No <input checked="" type="radio"/>	
	ESY Transportation	School to School	
Accommodation, Modifications, Supports	Instructional Accommodations	Give short, clear directions. Sing songs, recite nursery rhymes, and read books every day. Talk about pictures modeling new vocabulary and concepts. Use visual cues and picture schedules. Use verbal and non-verbal cues. Provide redirection when necessary. Praise successive approximations of desired behaviors. Provide a variety of play activities to help Lori develop her pretend play, joint attention, and reciprocal interactions. Provide modeling, encouragement, and practice in the area of peer interactions (initiating, maintaining play, sharing, taking turns, resolving conflicts , conversing etc.) Break tasks into manageable parts.	//
	Instructional Modifications		//
	Other Supports, including Non-Academic and Extra-curricular Activities		//
	Preparation for Three Year Review IEP (At	Do the Parent and the District (local	Yes <input type="radio"/> No <input type="radio"/>

the second Annual Review IEP Meeting, the team must discuss and document the decision to conduct or not conduct a three-year comprehensive reassessment.)	educational agency) agree that a 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	Lori will mainstream for Language Arts, library, PE, assemblies, field trips and special occasions.		

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student COHEN LORI C **Date of Birth** 21-DEC-2011 **Meeting Date** 01-MAR-2018

Effective With This IEP

Future Changes Related To This IEP

Service 1

10

Language/Speech

Start Date: Effective on Signature Date

End Date:

Service applies to: ESY

Frequency: 1-10

This service addresses the following goals:

Interval: Yearly

5(Articulation)

Minutes/Interval: 80

6(Language)

Minutes/Interval (Pullout from Gen Ed): 0

Service Delivery Model: Direct Service (Collaborative)*

Area: School-Based

Responsible Personnel: Licensed/Credentialed Provider

*

Service 2

10

Language/Speech

Start Date: Effective on Signature Date

End Date:

Service applies to: Regular

Frequency: 10-40

This service addresses the following goals:

Interval: Yearly

5(Articulation)

Minutes/Interval: 960

6(Language)

Minutes/Interval (Pullout from Gen Ed): 0

Service Delivery Model: Direct Service (Collaborative)*

Area: School-Based

Responsible Personnel: Licensed/Credentialed Provider

*

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	78 %	

Part 4 - Additional Discussion (This section is optional)

The IEP team has determined that Lori will not be able to maintain the level of speech and language skills during the summer months, without significant regression. Service Grid #1 refers to LAS during ESY.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Date of Birth Meeting Date

FAPE Summary Grid

Program: SLD **Setting:** Special Education
Eligibility: Eligible (SLI) **Curriculum:** General Education
Transportation: School to School **Low Incident Support:** None

Service Code	Service Desc	Start Date	Service Applies To	Interval	Frequency	Area	Total Minutes	Addresses Goal(s)
10	Language/Speech	Effective on Signature Date	ESY	Yearly	1-10	School-Based	80	Articulation, Language
10	Language/Speech	Effective on Signature Date	Regular	Yearly	10-40	School-Based	960	Articulation, Language

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.