

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student Identification Number 012404F003

Eligible (SLD)

Student LEVI HODAYA MI

Date of Birth 24-JAN-2004

Section A: Meeting Information

Table with columns: Pertinent Dates, Type of Meeting. Includes fields for meeting dates, types (Initial, Annual Review, etc.), and location (Roy Romer Middle School).

Section B: Student Information

Form containing student details: Date of Birth, Age, Grade, Gender, Ethnic Code, Location of folders, Home Language, Home Address, City, Telephone, School of Attendance, School of Residence, Parent/Guardian info, and placement details.

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 LEVI HODAYA Date of Birth 24-JAN-2004 Meeting Date 09-MAY-2017

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. Reading	<input type="radio"/>	<input type="radio"/>	Progress toward IEP goals can not be measured as
Objective 1 met	<input type="radio"/>	<input type="radio"/>	IEP was not implemented due to private
Objective 2 met	<input type="radio"/>	<input type="radio"/>	school enrollment
2. Written Language	<input type="radio"/>	<input type="radio"/>	
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	
3. ELD	<input type="radio"/>	<input type="radio"/>	
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	
4. Articulation	<input type="radio"/>	<input checked="" type="radio"/>	Not yet reached the level of accuracy with
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	consistency
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
5. Mathematics	<input type="radio"/>	<input type="radio"/>	
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"/>	
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"/>	
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 LEVI HODAYA **Date of Birth** 24-JAN-2004 **Meeting Date** 05-JUN-2017

Section E: Present Level of Performance

Performance Area: Language
 Assessment/Monitoring Process Used: Formal and informal tests, direct observation
 State/District Assessment Results: NA


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

Summary of Service:
 Hodaya is currently enrolled at Emek Hebrew Academy (private school). IEP records show that she only received LAS services from 11/08/2010 to 11/08/2011 for compensatory time. Hodaya has been eligible to receive LAS services in the area of articulation, but due to her enrollment in a private school, she has not been receiving any services. At the present, she does not have any goals in the area of language. Hodaya is currently not receiving LAS services.

Strengths:
 Hodaya is able to communicate in the classroom, especially when she is comfortable in the environment. She is able to spontaneously use complete sentences when responding to questions. She is able to express her wants and needs as well as ask for help. Results from the OWLS-II, with a standard score of 82 for listening comprehension and 81 for oral expression, indicate that she is within the average range, placing her in the 12 and 10%ile respectively. She is able to use the following during spontaneous language: contractible auxiliary and copula verbs, complex sentences when explaining reasons, infinitive clauses, regular and irregular past tense, appropriate subject-verb conjugation, prepositions. She is also able to make self-repairs during conversation. Hodaya is able to ask clarifying questions and assistance as well as give answers on topic during class. She is able to communicate clearly with her peers adults. Hodaya's voice and speech fluency appear to be comparable to that of her peers. Hodaya is 95-100% intelligible to known and unknown subjects.

(continued)

Performance Area: Language (continuation)
 Assessment/Monitoring Process Used: Formal and informal tests, direct observation
 State/District Assessment Results: NA

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

Needs:
 None in the areas of speech (articulation) and language.

Impact of Disability:
 Although Hodaya's one-word expressive and receptive skills indicate that she is below the average range in these areas, this need can best be met in the classroom. Hodaya's speech and language do not impact her ability to access her present classroom curriculum; she is able to access his classroom curriculum. Hodaya's speech and language do not have any adverse effect on her educational performance. According to the California Code of Regulations, Title 5, Section 3030, as well as LAUSD Bulletin REF-4568.1, Hodaya does not qualify for language and speech (LAS) support and services. She is successfully communicating in all school environments. At this time Hodaya does not demonstrate a need for LAS services.

Greg Casino, MS, CCC-SLP
 LAUSD Speech-Language Pathologist

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student LEVI

HODAYA

Date of Birth 24-JAN-2004


Meeting Date 05-JUN-2017

Section E: Present Level of Performance

Performance Area: Articulation

Assessment/Monitoring Process Used: Formal and informal tests, direct observation

State/District Assessment Results: NA

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

Summary of Service:

Hodaya is currently enrolled at Emek Hebrew Academy (private school). IEP records show that she only received LAS services from 11/08/2010 to 11/08/2011 for compensatory time. Hodaya has been eligible to receive LAS services in the area of articulation, but due to her enrollment in a private school, she has not been receiving any services. Her overarching goal from 06/02/2014 IEP was to correctly produce the age appropriate phonemes /s/ and /z/ in all word positions at the conversational level with 70% accuracy given minimal prompts/cues. Formal and informal assessment indicate that Hodaya is able to correctly produce the target sounds in all positions at the conversational level with at least 70% accuracy with minimum cues and prompts. When cued and prompted on proper placement of the articulators, her accuracy is increased. Hodaya is currently not receiving LAS services.

Strengths:


Hodaya is able to intelligibly use speech and language to express her wants and needs as well as her thoughts. She has a full repertoire of sounds. In formal articulation testing (LAT) Hodaya received a standard score of 95, placing her in the 37%ile. She is able to clearly communicate with her peers and adults. When speaking in class, she does not show any apprehension or self-consciousness due to any articulation deficit. Hodaya's voice and speech fluency appear to be comparable to that of her peers. Hodaya is 95-100% intelligible to known and unknown subjects.

(continued)

Performance Area: Articulation (continuation)

Assessment/Monitoring Process Used: Formal and informal tests, direct observation

State/District Assessment Results: NA

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

Needs:

None in the areas of speech (articulation) and language.

Impact of Disability:

Although Hodaya's production of the /s/ sound is inconsistent, her overall intelligibility is 95-100%. Hodaya's speech and language do not impact her ability to access her present classroom curriculum; she is able to access his classroom curriculum. Hodaya's speech and language do not have any adverse effect on her educational performance. According to the California Code of Regulations, Title 5, Section 3030, as well as LAUSD Bulletin REF-4568.1, Hodaya does not qualify for language and speech (LAS) support and services. She is successfully communicating in all school environments. At this time Hodaya does not demonstrate a need for LAS services.

Greg Casino, MS, CCC-SLP
LAUSD Speech-Language Pathologist

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District


Student LEVI


HODAYA

Date of Birth 24-JAN-2004

Meeting Date 05-JUN-2017

Section E: Present Level of Performance

Performance Area:	Reading
Assessment/Monitoring Process Used:	KTEA III, informal assessments, teacher observations, report cards
State/District Assessment Results:	Private School
Current Performance/Assessment Summary (include student strengths, student needs and impact of disability on student performance): 	
<p>According to KTEA III results, Hodaya scored in the Below Average range for Reading Comprehension and Letter & Word recognition</p> <p>Strengths: Hodaya can decode most one and some two syllable words independently. She is able to identify parts of a three-syllable word. She is able to read her sight words fluently. She was able to read simple passages and demonstrate basic literal comprehension.</p> <p>Needs: Hodaya was able to read some one and two syllable words. However, she was not able to complete the passages in the stories because she was not able to comprehend what she was reading. As she read, when she discovered a difficult to pronounce word she would just mumble through it but not attempt to decode it. She needs to be able to read letter patterns, diphthongs, silent letters and other words with the English rules. She needs to be able to read and comprehend passages and be able to answer questions about the passages read.</p> <p>Impact of Disability: Hodaya's specific learning disability effects her ability to read and comprehend grade level material which impacts her ability to be involved and progress in the general curriculum.</p>	

Performance Area:	Writing
Assessment/Monitoring Process Used:	KTEA III, informal assessments, teacher observations, report cards
State/District Assessment Results:	Private School
Current Performance/Assessment Summary (include student strengths, student needs and impact of disability on student performance): 	
<p>According to KTEA III results, Hodaya scored in the Low range for Written Expression and Spelling.</p> <p>Strengths: Hodaya can spell most one syllable such as : it, to place, leave, fake, etc. Hodaya spells phonetically. Her printing is clear and easy to read. She can write short three to five word sentences with good ideas.</p> <p>Needs: Hodaya needs to learn word spellings and patterns. She omits a lot of important sounds of a word when she is spelling them on paper. She needs to learn to write compound sentences using conjunctions and complex sentences using independent and dependent clauses. Overall, she needs to improve her writing vocabulary and writing conventions.</p> <p>Impact of Disability: Hodaya's specific learning disability effects her ability to read and write grade level material which impacts her ability to be involved and progress in the general curriculum.</p>	

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Student LEVI

HODAYA

Date of Birth 24-JAN-2004


Meeting Date 05-JUN-2017

Section E: Present Level of Performance

Performance Area: Mathematics

Assessment/Monitoring Process Used: KTEA III, informal assessments, teacher observations, report cards

State/District Assessment Results: Private School

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

KTEA III results indicate that Hodaya fell in the Below average range for Math Computation and Low range for Math Applica.

Strengths:

Hodaya can add and subtract with regrouping. She knows some of her multiplication facts. She can add and subtract fractions with common denominators. She is able to to read analog time. She is able to multiply fractions.

Needs:

Hodaya needs to know her basic four math processes and use them in a given problem. She needs to understand the relationship between fractions, decimals and percents. Hodaya needs to read and solve a math problems and identify the steps needed to solve it. She needs to solve for variable, identify which integer rule to use, in any given math problem.


Impact of Disability:

Hodaya's specific learning disability effects her ability to solve grade level math problems which impacts her ability to be involved and progress in the general curriculum.

Performance Area: ELD

Assessment/Monitoring Process Used: KTEA III, informal assessments, teacher observations, report cards

State/District Assessment Results: Private School

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

According to the KTEA III results, Hodaya tested in the below and low average range in Letter and Word recognition, below average in Reading Comprehension and a low in spelling.

Strengths:

Hodaya can communicate with staff and peers. She can answer questions when called on. She can follow step by step instructions. She can answer questions verbally and she can write simple sentences in her responses.

Needs:

Hodaya needs to increase her grade level vocabulary and use it in her daily responses. to develop a much larger academic vocabulary. She needs to expand her sentences verbal and written and write grade level sentences in her responses. Hodaya needs to improve her reading comprehension inorder to improve her spelling and English Language skills.

Impact of Disability:

Hodaya's specific learning disability effects her ability to read and comprehend grade level material which impacts her ability to be involved and progress in the general curriculum.

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Los Angeles Unified School District

Student LEVI HODAYA Date of Birth 24-JAN-2004 Meeting Date 05-JUN-2017

Section E: Present Level of Performance

Performance Area: Cognitive Ability/Processing
Assessment/Monitoring Process Used: Psycho-Educational Assessment
State/District Assessment Results:

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

Current Ability/Strengths: Results of the current assessment indicate Hodaya is functioning within the Low Average range of cognitive ability based upon alternative assessment procedures. She demonstrated strength in Matrices, Visual Sequential Memory, and some Phonological skills. Motor skills appear to be adequate.
Areas of Need: Hodaya demonstrated areas of need in Planning and Auditory Processing skills. Her short term auditory memory weakness appeared to impact her performance on a number of different tasks presented. Hodaya does evidence cognitive and/or psychological processing deficits which adversely impact educational access and performance at this time. Hodaya's oral vocabulary appears to fall below grade level expectations.
Impact: Hodaya's Specific Learning Disability impacts her ability to participate and progress within the general education curriculum.

Performance Area: Social-Emotional
Assessment/Monitoring Process Used: Psycho-Educational assessment
State/District Assessment Results:

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

Current Ability/Strengths: Hodaya is described as cooperative and respectful, however, her motivation and home work skills were reported as poor. Hodaya has a couple of good friends in the school, but does not appear to be connected to most of her classmates. She enjoys shopping, singing and dancing.
Areas of Need: None
Impact: None at this time


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Section E: Present Level of Performance

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

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

Health assessment completed on 6/2/17 for the Triennial IEP with health information obtained from separate telephone interviews with mother and father, and from review of the electronic school health record. Hodaya attends private school. She is a 13 year 4 month old female student currently enrolled in the 7th grade general education setting at Emek Hebrew Academy. Roy Romer Middle School is her school of residence. Hodaya is reported to be in good general health. No medication is taken on a regular basis. There is no history of major medical illness, serious injury or accident, surgery, or hospitalization reported for the past three years. No known allergy to food or medication. She has an unhealthy weight.

STRENGTHS: Hodaya is in good general health with the exception of her unhealthy weight. She receives optometry vision care at Kaiser Permanente and she wears prescription glasses in the classroom. There are no vision or hearing concerns at this time. She last passed an LAUSD hearing screening on 9/28/10.


AREAS OF NEED: Health is not an area of need.

IMPACT OF DISABILITY: Student's health does not impact her participation, progress, and access in her educational program.

ACCOMMODATIONS AND MODIFICATIONS: None related to health.

Linda Munster, R.N., Credentialed School Nurse
June 2, 2017

Performance Area:
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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Student LEVI

HODAYA

Date of Birth 24-JAN-2004


Meeting Date 05-JUN-2017

Section E: Present Level of Performance

Performance Area: Vocational Ed

Assessment/Monitoring Process Used: teacher observation and reports

State/District Assessment Results:

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

Strengths:

Hodaya is a nice young lady who is quiet and isolative. She has at least one peer friendship and she gets along with most of her classmates.


Needs:

Hodaya needs to complete her class work and her home work on time to earn better grades. Her teachers report that she often comes to school late and she does not complete her work. Hodaya needs to ask for help when she doesn't understand an assignment or instruction. Teachers report that she doesn't put in effort needed to do better in class.

Performance Area:

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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Student LEVI HODAYA

Date of Birth 24-JAN-2004

Meeting Date 05-JUN-2017

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: SLD Specific Learning Disability

- Not Applicable, Blind or Partially Sighted

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

Code: [] []

- Not Applicable, Blind or Partially Sighted

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

or

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

No Longer Eligible (Effective Date): []

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

Final IEP Reason: []

Final IEP Effective Date: []

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

- Social Maladjustment
- 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 LEVI [] HODAYA [] **Date of Birth** 24-JAN-2004 **Meeting Date** 05-JUN-2017

Section G: Annual Goals and Objectives

Performance Area: ELD []

Annual Goal # 1 [] GB []

Hodaya will use the relationship between particular words to better understand each of the words in class as measured by teacher in 8 out of 10 trials with 80% accuracy

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

Methods of Evaluation:

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

Incremental objective #1 related to the goal:

Hodaya will use the relationship between particular words to better understand each of the words in class as measured by teacher in 7 out of 10 trials with 70% accuracy

Date to be achieved November [] 2017 [] MO/YR

Incremental objective #2 related to the goal:

Hodaya will use the relationship between particular words to better understand each of the words in class as measured by teacher in 7 out of 10 trials with 75% accuracy

Date to be achieved April [] 2018 [] 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: []	Date: []	Date: []	(Secondary Only) Date: []	
Progress Mark: []	Progress Mark: []	Progress Mark: []	Progress Mark: []	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 []	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 []	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 []	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 []	If "No" please explain: []

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student LEVI [] HODAYA [] **Date of Birth** 24-JAN-2004 **Meeting Date** 05-JUN-2017

Section G: Annual Goals and Objectives

Performance Area: Reading []

Annual Goal # 2 [] GB []

Hodaya will determine a central idea of an informational text and analyze its development over the course of the text, including its relationship to supporting ideas in class as measured by teacher in 8 out of 10 trials with 80% accuracy.

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

Methods of Evaluation:

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

Incremental objective #1 related to the goal:

Hodaya will determine a central idea of an informational text and analyze its development over the course of the text, including its relationship to supporting ideas in class as measured by teacher in 7 out of 10 trials with 70% accuracy.

Date to be achieved November [] 2017 [] MO/YR

Incremental objective #2 related to the goal:

Hodaya will determine a central idea of an informational text and analyze its development over the course of the text, including its relationship to supporting ideas in class as measured by teacher in 7 out of 10 trials with 70% accuracy.

Date to be achieved April [] 2018 [] 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: []	Date: []	Date: []	(Secondary Only) Date: []	
Progress Mark: []	Progress Mark: []	Progress Mark: []	Progress Mark: []	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 []	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 []	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 []	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 []	If "No" please explain: []

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student LEVI [] HODAYA [] **Date of Birth** 24-JAN-2004 **Meeting Date** 05-JUN-2017

Section G: Annual Goals and Objectives

Performance Area: Math []

Annual Goal # 3 [] GB []

Hodaya will use the properties of integer exponents to generate equivalent numerical expressions in class as measured by teacher in 8 out of 10 trials with 80% accuracy.

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

Methods of Evaluation:

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

Incremental objective #1 related to the goal:

Hodaya will use the properties of integer exponents to generate equivalent numerical expressions in class as measured by teacher in 7 out of 10 trials with 70% accuracy.

Date to be achieved November [] 2017 [] MO/YR

Incremental objective #2 related to the goal:

Hodaya will use the properties of integer exponents to generate equivalent numerical expressions in class as measured by teacher in 7 out of 10 trials with 75% accuracy.

Date to be achieved April [] 2018 [] 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: []	Date: []	Date: []	(Secondary Only) Date: []	
Progress Mark: []	Progress Mark: []	Progress Mark: []	Progress Mark: []	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 []	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 []	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 []	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 []	If "No" please explain: []

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 #

With some guidance and support from peers and adults, Hodaya will develop and strengthen writing as needed by planning, revising, editing, rewriting, or trying a new approach, focusing on how well audience and purpose have been addressed in class as measured by teacher in 8 out of 10 trials with 80% accuracy.

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

Methods of Evaluation:

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

Incremental objective #1 related to the goal:

With some guidance and support from peers and adults, Hodaya will develop and strengthen writing as needed by planning, revising, editing, rewriting, or trying a new approach, focusing on how well audience and purpose have been addressed in class as measured by teacher in 7 out of 10 trials with 70% accuracy.

Date to be achieved MO/YR

Incremental objective #2 related to the goal:

With some guidance and support from peers and adults, Hodaya will develop and strengthen writing as needed by planning, revising, editing, rewriting, or trying a new approach, focusing on how well audience and purpose have been addressed in class as measured by teacher in 7 out of 10 trials with 75% accuracy.

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 LEVI HODAYA Date of Birth 24-JAN-2004 Meeting Date 05-JUN-2017

Section G: Annual Goals and Objectives

Performance Area: Vocational Ed

Annual Goal # 5 GB

Hodaya will complete assignments and turn them in for a grade in 8 out of 10 trials with 80% accuracy.

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

Methods of Evaluation:

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

Incremental objective #1 related to the goal:

Hodaya will complete assignments and turn them in for a grade in 8 out of 10 trials with 70% accuracy.

Date to be achieved November 2017 MO/YR

Incremental objective #2 related to the goal:

Hodaya will complete assignments and turn them in for a grade in 8 out of 10 trials with 75% accuracy.

Date to be achieved April 2018 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: _____	Date: _____	Date: _____	Date: _____	
Progress Mark: _____	Progress Mark: _____	Progress Mark: _____	Progress Mark: _____	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 _____	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 _____	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 _____	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 _____	If "No" please explain: _____

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student LEVI HODAYA **Date of Birth** 24-JAN-2004 **Meeting Date** 05-JUN-2017

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.

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

CAASPP Subject

ELA and Math

Designated Supports:

- Text-to-speech software enabled (for math items and ELA items except for reading passages)

Accommodations:

- Multiplication table for single digits 1-9 (paper-based; not allowed for Grade 3; non-embedded accommodation)

CELDT - (Variations, Accommodations or Modifications identified below are applicable)

CELDT Subject

ELD

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student	LEVI	HODAYA		Date of Birth	24-JAN-2004	Meeting Date	05-JUN-2017
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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 LEVI HODAYA Date of Birth 24-JAN-2004 Meeting Date 30-MAY-2017

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

Parent was offered a FAPE at Romer. However, he chooses to continue her education at a private school.

Signature(s) / Date 05-JUN-2017
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 29-MAY-2017

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):	Yes	No	Does Not Apply
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!

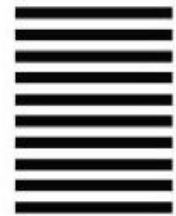


NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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"/>	<input type="text"/>
Parent/Guardian	<input type="text"/>	<input type="text"/>
Student Age 18 - 21 years	<input type="text" value="Levi Hodaya"/>	<input type="text"/>
Student Under Age 18 years	<input type="text"/>	<input type="text"/>
Surrogate Parent	<input type="text"/>	<input type="text"/>
Foster Parent	<input type="text"/>	<input type="text"/>
Family Foster Home Provider	<input type="text"/>	<input type="text"/>
Administrator	<input type="text"/>	<input type="text"/>
Administrative Designee	<input type="text" value="Sara Jaghelian"/>	<input type="text"/>
Special Education Teacher	<input type="text" value="Aida Crosthwaite"/>	<input type="text"/>
General Education Teacher	<input type="text" value="Brooke Morales"/>	<input type="text"/>
School Psychologist	<input type="text" value="Laurie Bernhard"/>	<input type="text"/>
School Nurse	<input type="text" value="Linda Munster"/>	<input type="text"/>
Related Service Staff <input type="text" value="LAS"/>	<input type="text" value="Gregory Casino"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Interpreter	<input type="text"/>	<input type="text"/>
Sign Language Interpreter	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Other <input type="text" value="Pri Sch Consultant"/>	<input type="text" value="Nancy Essenpreis"/>	<input type="text"/>
Other <input type="text" value="Priv School Rep"/>	<input type="text" value="Stephie Bregman"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student LEVI HODAYA

Date of Birth 24-JAN-2004

Meeting Date 30-MAY-2017

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 checked="" 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 checked="" type="radio"/> NO	If not currently available, can the required supports, services, accommodations and/or modifications be made available in a general education classroom/setting? If YES, all required supports, services, accommodations and/or modifications must be provided within a reasonable timeline. If the answer is NO, please articulate why in the box below. Then go to Step B.
Needs additional academic supports.		

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 checked="" type="radio"/> YES <input type="radio"/> NO	If not currently available, can the required supports, services, accommodations and/or modifications be made available in a 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.

Los Angeles Unified School District

Student LEVI

HODAYA

Date of Birth 24-JAN-2004

Meeting Date 30-MAY-2017

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:	<input type="text" value="05-JUN-2017"/>	<input type="text"/>
Eligibility: (from Page 4)		Eligible (SLD)	
	Final IEP Reason Final IEP Effective Date:		//
Curriculum		General Education	
Placement	Type of School	District Resident School	
	Name of School	ROMER MS	
Instructional Setting	Setting	Special Education	
	Program	SLD	
	Special Day Minutes/Wk	1036	
	Addresses Goals	4(Writing),3(Math),1(ELD),2(Reading)	//
Additional Factors	Low Incident Support	None	
	Assistive Technology Support	No	
	Transportation	None	
	Extended School Year/Intersession	Yes <input type="radio"/> No <input checked="" type="radio"/>	
	Parent Counseling and Training (PCT)	Yes <input type="radio"/> No <input checked="" type="radio"/>	
	ESY Transportation		
Accommodation, Modifications, Supports	Instructional Accommodations	Scaffolding, writing templates, extra time, preferential seating, accommodated grading for work completion, break down information, step by step instruction, edit writing samples, model writing skills	//
	Instructional Modifications		//
	Other Supports, including Non-Academic and Extra-curricular Activities		//
Preparation for Three Year Review IEP (Complete at second annual review IEP Meeting)	Is formal assessment needed to re-establish eligibility?	Yes <input type="radio"/> No <input checked="" type="radio"/>	
	If yes, specify area(s) to be reassessed		
Comments, as appropriate			
Low Incidence Equipment			
Assistive Technology Equipment			
Participation in General Education			

Hodaya will participate in a general education physical education class and a general education elective.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student LEVI HODAYA

Date of Birth 24-JAN-2004

Meeting Date 05-JUN-2017

Effective With This IEP

**Future Changes
Related To This IEP**

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	55 %	

Part 4 - Additional Discussion (This section is optional)

This is Hodaya's Tri-Annual. The IEP discussed all placement options and concluded that the most appropriate placement for Hodaya would be in a Special Day Program with a general education elective and a general education physical education class.

Los Angeles Unified School District **INDIVIDUALIZED EDUCATION PROGRAM**

(SLD, pg. 1 of 1)

Student LEVI HODAYA **Date of Birth** 24-JAN-2004 **Meeting Date** 05-JUN-2017

SPECIFIC LEARNING DISABILITIES CERTIFICATION

Use this form at Initial, Three Year Reviews and comprehensive assessments for students eligible as having a Specific Learning Disability. This form is not required at Annual Review meetings.

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

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

If Yes, describe

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

If Yes, describe

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

- Listening Comprehension
- Basic Reading Skills
- Oral Expression
- Reading Comprehension
- Written Expression
- Math Calculation
- Math Reasoning

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

- Attention
- Visual Processing
- Auditory Processing
- Sensory Motor Skills
- Cognitive abilities including association, conceptualization and expression

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

- Limited school experience
- Poor school attendance
- Environmental, economic or cultural disadvantage

- Social maladjustment
- Intellectually Disabled
- Visual, hearing or motor impairment
- Unfamiliarity with the English language

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 (SLD)	Curriculum:	General Education
Transportation:	None	Low Incident Support:	None

Service Code	Service Desc	Start Date	Service Applies To	Interval	Frequency	Area	Total Minutes	Addresses Goal(s)
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For IEP Team Information

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

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

(ITP, pg. 1 of 3)

Student LEVI HODAYA Date of Birth 24-JAN-2004 Meeting Date 05-JUN-2017

INDIVIDUAL TRANSITION PLAN (ITP)

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

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

Area	Completed	If no, indicate reason
Education/Training Activity	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> First ITP	first ITP
Employment Activity	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> First ITP	first ITP
Independent Living Skills Activity (as needed)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	

Section 1: Education/Training

Assessment (at least one assessment must be completed in this area).	Date	Assessment Name and Results: Indicate interests/abilities and area(s) of need (if applicable)
Transition Surveys, Checklists, or Informal Questionnaires <input type="text"/> If other?	15-MAY-2017	Hodaya would like to listen to music
<input type="text"/> If other?		

Education/Training Postsecondary Goal

Upon completion of high school, the student will:

enroll in and attend 2 or 4 year college If other?

Education/Training Activity to Support Goal

Education/Training Activity to Support Goal	Timeline	Person/Agency Responsible
develop a personal career / education plan	28-MAY-2018	General Education Teacher <input type="text"/> Parent/Guardian/Family <input type="text"/> Student <input type="text"/> Special Education Teacher <input type="text"/>
If other?		

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

(ITP, pg. 2 of 3)

Student LEVI HODAYA

Date of Birth 24-JAN-2004

Meeting Date 05-JUN-2017

INDIVIDUAL TRANSITION PLAN (ITP)

Section 2: Employment

Assessment (At least one assessment must be completed in this area).	Date	Assessment Name and Results: Indicate interests/abilities and area(s) of need (if applicable)
Transition Surveys, Checklists, or Informal Questionnaires If other?	15-MAY-2017	Hodaya is undecided at the moment what she would like to do in the future.

Employment Postsecondary Goal If other?
 Upon completion of high school, the student will:
 be competitively employed

Employment Activity to Support Goal	Timeline	Person/Agency Responsible
develop a career plan and identify career goals If other?	28-MAY-2018	General Education Teacher Special Education Teacher Counselor Parent/Guardian/Family

Section 3: Independent Living (as needed)

Assessment (at least one assessment must be completed in this area, if needed)	Date	Assessment Name and Results: Indicate interests/abilities and area(s) of need (if applicable)

Independent Living Postsecondary Goal If other?
 Upon completion of high school, the student will:

Independent Living Activity to Support Goal	Timeline	Person/Agency Responsible

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

(ITP, pg. 3 of 3)

Student LEVI HODAYA

Date of Birth 24-JAN-2004

Meeting Date 05-JUN-2017

INDIVIDUAL TRANSITION PLAN (ITP)

Course of study: A multi-year description of student's coursework from current year to anticipated exit year, in order to enable the student to meet their postsecondary goal.

A course of study (or IGP) was reviewed with parent and student in relation to:

Courses completed: Yes No Courses currently enrolled in: Yes No Courses still needed: Yes No

IGP or course of study was provided to the parent or student over age 18 as required: Yes

Student is working towards: Certificate of Completion Diploma

Additional courses/activities discussed that may support post secondary goals (e.g. SLC participation, electives or instruction related to postsecondary goals, community experiences, participation in other school clubs or organizations, etc.) NOTE: these are suggestions and contingent to availability:

Hodaya will be encouraged to participate in a school activity or club.

Future Agency Involvement:

Are there agencies currently or prospectively providing or paying for transition services? Yes No

Do you give permission to the District to invite these agencies to the next IEP in which transition services will be reviewed? Yes No

Agency Name: [dropdown]
Agency Name: [dropdown]
Agency Name: [dropdown]

- 1. Does the student's IEP include appropriate measurable postsecondary goals that cover education/training, employment and, as needed, independent living? info
2. Are the postsecondary goals updated annually? info
3. Is there evidence that the measurable postsecondary goals were based on age appropriate transition assessment? info
4. Are there transition services that will reasonably enable the student to meet their postsecondary goals? info
5. Do the transition services include a course of study that is a multi-year description of coursework from the student's current year to anticipated exit year and that is designed to help the student achieve the identified postsecondary goals? info
6. Is (are) there annual IEP goal(s) related to the student's transition services needs? info
7. Is there evidence that the student was invited to the IEP team meeting where transition services were discussed? info
8. If appropriate, is there evidence that a representative of any participating agency was invited to the IEP team meeting with the prior consent of the parent or student who has reached the age of majority? info

1. Yes
2. Yes
3. Yes
4. Yes
5. Yes
6. Yes
7. Yes
8. Yes N/A