

**INDIVIDUALIZED EDUCATION PROGRAM (IEP)**

**Los Angeles Unified School District**

**Student Identification Number**  **SSID**

**Eligible (SLI)**

**Student**     
**Last First MI**

**Date of Birth:**

**Section A: Meeting Information**

Pertinent Dates	Type of Meeting
Date of Initial IEP Team Meeting <input type="text" value="08-JUN-2017"/>	<input type="radio"/> Initial <input type="radio"/> Amendment of IEP dated <input type="text"/>
Date of Present Meeting <input type="text" value="10-MAY-2019"/>	<input type="radio"/> Annual Review <input type="radio"/> Early Start Transition
Annual Review to be conducted by <input type="text" value="10-MAY-2020"/>	<input checked="" type="radio"/> Three Year Review <input type="radio"/> Expulsion Analysis
Next Three Year Review will be conducted by <input type="text" value="08-JUN-2020"/>	<input type="radio"/> Other <input type="radio"/> Individual Transition Plan
Three Year Review or Evaluation was conducted on <input type="text" value="08-JUN-2017"/>	<input type="text"/>
Transition to Kindergarten to be conducted by <input type="text" value="31-MAY-2019"/>	

**Location of Meeting**  **District Name**

**Section B: Student Information**

**Date of Birth**  **Age**  **Grade**

**Gender**  Male  Female **Limited English Proficient Student**  Yes  No **Ethnic Code**

**Location of the Psych Folder**  **Student has no Psych Folder**

**Location of the Cum Folder**  **Student has no Cum Folder**

**Home Language**  **Student Language**  **Alternate Mode of Communication**

**Home Address of Student**

**City**  CA **ZIP Code**

**Home Telephone**  **Daytime Telephone**  **Emergency Telephone**

**School of Attendance**  **Location Code**

**School of Residence**  **Location Code**

**Name of Parent/Guardian**  **Telephone**

**Address**

**City**  CA **ZIP Code**

**Surogate Parent**  **Telephone**

Attends **CURRENT SCHOOL** as a result of one of the following

Is the student living in a Family Foster Home (FFH)?  No  Yes **FFH#**

Is FFH Provider related to student?  No  Yes **Relationship**

Licensed Children's Institution  No  Yes **LCI Name**

**LCI#**

Out of the home placement made by  Regional Center  Department of Mental Health  Department of Children's Services

Superior Court  Other

Child's family living within LAUSD's boundaries?  No  Yes

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

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**Los Angeles Unified School District**

Student     
 Last First MI

Date of Birth

Meeting Date

**Section C: Language Acquisition**

Language Classification:  Start Date:

Parent Waiver:  Yes  No Reclassification Date:

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 language/communic	<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"/>	
2 Phonology	<input type="radio"/>	<input checked="" type="radio"/>	additional time needed; steady progress noted
Objective 1 met	<input checked="" type="radio"/>	<input type="radio"/>	
Objective 2 met	<input checked="" type="radio"/>	<input type="radio"/>	
3	<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	<input type="radio"/>	<input type="radio"/>	
Objective 1 met	<input type="radio"/>	<input type="radio"/>	
Objective 2 met	<input type="radio"/>	<input type="radio"/>	
5	<input type="radio"/>	<input type="radio"/>	
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 DANIEL MI Date of Birth 28-JUN-2014 Meeting Date 10-MAY-2019
Last First MI

Section E: Present Level of Performance

Performance Area: Health

Assessment/Monitoring Process Used: Review of Health Questionnaire for School Enrollment

State/District Assessment Results:

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

This health assessment is a review of the information obtained from the Health Questionnaire For School Enrollment form. This information was obtained by Nancy Joaquin via interview with Meital Gershoni, parent on 4/29/19 and follow-up phone call on 5/6/19. HEALTH SUMMARY: It was reported he had an allergy to milk and peanut butter in the past. Parent reports he no longer has the allergies and currently he drinks milk and eats peanut butter without any reaction. STRENGTHS: Parent reports no current health condition or past major medical diagnosis such as diabetes, asthma, chronic ear infections, seizure/convulsions and immunizations are up to date. Parent reports no current use of prescription medication or medical treatments/procedures. No history of surgery or hospitalizations in the last 2-3 years. Parent reports no vision problem and does not require corrective lenses. Parent reports no hearing problems. No assistance needed for ambulation, feeding or toileting. AREAS OF NEED: There are no areas of health to be addressed. IMPACT OF DISABILITY: Health does not impact his ability to access, participate or progress in the educational program. ACCOMMODATIONS: None based on health. Christine Odom, RN Early Childhood Education 5/6/19

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 DANIEL MI Date of Birth 28-JUN-2014 Meeting Date 10-MAY-2019
Last First MI

Section E: Present Level of Performance

Performance Area: Language-Articulation

Assessment/Monitoring Process Used: Preschool Language Scales-5 Articulation Screener, language sample, teacher

State/District Assessment Results: consultation, review of records, observations

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

Summary: Daniel has been attending Canoga Park Early Education Center since August 2018, and he is enrolled in the Preschool Collaborative Class (PCC). Daniel also receives DIS LAS services with the eligibility of a Speech or Language Impairment (SLI), to address delays in articulation skills. Daniel is an English language learner, whose primary language is Hebrew.
Strengths: Based on assessment results, Daniel presents with receptive/expressive language skills that are within developmental limits. He is very talkative with adults and peers. Daniel is social and gets along well with peers. Daniel has partially met his articulation goal. His overall clarity of speech to familiar listeners is deemed 70-80%, and unfamiliar listeners 60-70% when context is known. Daniel's imitation skills of words, phrases, and sentences have improved in accuracy and frequency. Daniel's English language skills have improved significantly, especially in the area of vocabulary. Daniel has many interests, especially animals (snakes, lizards, dinosaurs).
Needs: Based on assessment results, Daniel presents with mild delays in articulation skills, which negatively impact his speech when he speaks with longer utterances, or attempts to explain himself when context is unknown. The following phonological processes are evident in spontaneous speech; initial sound omissions (ello/yellow), consonant cluster reductions (muhkey/monkey), syllable reductions, fronting, (papilah/caterpillar), gliding (w/r). These multiple phonological processes, some which are still within acceptable developmental limits, reduce Daniel's clarity of speech when he is speaking in the classroom

Performance Area: continued

Assessment/Monitoring Process Used:

State/District Assessment Results:

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

Impact: Daniel's mild speech delays, related to his eligibility of a Speech or Language Impairment, negatively impact his ability to speak clearly to adults and peers in the classroom.
Aldona Butkys, MA CCC-SLP
Speech or Language Impairment

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

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Student LEVI DANIEL MI Date of Birth 28-JUN-2014 Meeting Date 10-MAY-2019
Last First MI

Section E: Present Level of Performance

Performance Area: Social Emotional Development
Assessment/Monitoring Process Used: Informal Assessment
State/District Assessment Results: DRDP 2015

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

Strengths: Daniel participates in social interactions with multiple peers and enjoys sharing about his interest of animals/insects. He participates in dramatic play and cooperative play with his peers. He is able to share materials and take-turns with occasional reminders, which is developmentally appropriate for his age. He is able to express his feelings and will seek out an adult for help when needed. He follows classroom expectations with occasional reminders. He follows basic safety practices with occasional reminders about using gentle hands with bugs/insects or not picking up insects that could injure him (bees, spiders). He is able to follow personal care routines with minimal reminders (hand-washing, wiping his nose).
Areas of need: None at this time.
Impact of disability: Daniel's eligibility of speech and language impairment (SLI) does not impair his ability in the area of social emotional development. This does not impact his involvement and progress in the general education curriculum.

Performance Area: Physical Development
Assessment/Monitoring Process Used: Informal Assessment
State/District Assessment Results: DRDP 2015

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

Strengths: Gross Motor Skills: Daniel participates in active physical play during outdoor activities. He is able to catch and throw a medium sized ball. He is able to run, jump, crawl under obstacles, climb over objects, and use a tricycle. He is able to walk across the balance beam independently. He is able to kick a stationary ball. He is able to dress himself in the dramatic area with clothes/props provided with minimal assistance. He participates in music and movement in response to music, rhythm, or adult cues.
Fine Motor Skills: Daniel begins to use various writing utensils (markers, crayons, pencils) to trace his name, make scribbles, and drawings using a tripod grasp, with occasionally switching to a palmer grasp. He is able compete a 6-9 piece puzzle, string beads, and manipulate small toys (Legos, Lincoln logs). During mealtimes he opens containers, plastic packages, and his milk carton. On occasion, he may need assistance and will as for help. He continues to develop his scissor skills and is able to cut along simple shapes, straight and curved lines, with minimal assistance.
Areas of needs: None at this time.
Impact of disability: Daniel's eligibility of speech and language impairment (SLI) does not impair his ability in the area of physical development. This does not impact his involvement and progress in the general education curriculum.

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Los Angeles Unified School District

Student LEVI DANIEL MI Date of Birth 28-JUN-2014 Meeting Date 10-MAY-2019
Last First MI

Section E: Present Level of Performance

Performance Area: Language Development
Assessment/Monitoring Process Used: Informal Assessment
State/District Assessment Results: DRDP 2015

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

Strengths: Daniel demonstrates an understanding of familiar vocabulary, phrases, used in conversations, stories or learning activities. He continues to increased his conversational skills and vocabulary. He participates in back-and-forth conversations with familiar adults and peers with on a shared focus or preferred topic of interest. He is able to carry out a three step request to a new or an unfamiliar activity or situation. He shares information from a past experience, 'I like go in water. The beach.'
Areas of need: Daniel engages in conversations, but at times it may be unclear what he is trying to convey due to pronunciation. For example, during lunch time he shares about his favorite food item but it is unclear at first. After asking him to repeat his answer, he says 'Icken (Chicken) that's my favorite.' When he is unsure about the name of an object he points to the item. For example, he says 'Help, me. Help with this.' (Points to the tray). When asked a question or sharing information he may combine two ideas that may need further clarification in order to understand what he is trying to say, such as, 'This is my rainbow building, I go to Chuck E. Cheese.'
Impact of disability: Daniel's eligibility of speech and language impairment (SLI) impairs his ability to clearly communicate information in order for adults and peers to understand what he is trying to convey. This impacts his involvement and progress in the general education curriculum.

Performance Area: Cognitive Development
Assessment/Monitoring Process Used: Informal Assessment
State/District Assessment Results: DRDP 2015

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

Strength: Daniel demonstrates awareness of living things, earth materials, or events in the environment based on how they feel, sound, or behave. During outdoor play, he enjoys looking for rocks and communicates similarities and differences in the characteristics of his rock collection (shiny, smooth, rough). He explores living things in his environment, especially animals. He engages in sustained explorations of bugs/insects using magnifiers and nets to catch insects. He will frequently request binoculars to observe birds or squirrels. He is able to maintain his attention on activities that he prefers for an extended period of time. He is curious and takes initiative in learning about preferred topics of interest.
Areas of need: None at this time.
Impact of disability: Daniel's eligibility of speech and language impairment (SLI) does not impair his ability in the area of cognitive development. This does not impact his involvement and progress in the general education curriculum.

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Student LEVI DANIEL MI Date of Birth 28-JUN-2014 Meeting Date 10-MAY-2019
Last First MI

Section E: Present Level of Performance

Performance Area: Literacy Development
Assessment/Monitoring Process Used: Informal Assessment
State/District Assessment Results: DRDP 2015

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

Strengths: Daniel attends to literacy activities and makes comments or asks questions about the story. He enjoys adults reading informational books about animals. He self-selects books based on his interest and 'reads' to himself pointing to the pictures in the story. He demonstrates awareness on how books are handled and turns pages from front to back. He sings simple songs and repeats nursery rhymes. He is able to recognize the first letter in his name and can select his name tag from a group of other names. He begins to make scribble marks to represent his name. Daniel is able to recognize 3-5 letters of the alphabet and is inconsistent in letter recognition at this time. However, based on the DRDP he is within the developmental progress for his age, but should be monitored in the school year for progress.
Areas of needs: None at this time.
Impact of disability: Daniel's eligibility of speech and language impairment (SLI) does not impair his ability in the area of literacy development. This does not impact his involvement and progress in the general education curriculum.

Performance Area: Mathematics
Assessment/Monitoring Process Used: Informal Assessment
State/District Assessment Results: DRDP 2015

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

Strengths: Daniel begins to sort items based on one attribute (shape, size, color). He is able to identify a small quantity without counting, up to three. He is able to label quantities that have more or less. He rote counts up to 5 and begins to skip numbers. He shows an understanding of measurable properties (length, size, and weight). He is able to identify items that are big/small, long/short, and heavy/light. He is able to copy an AB pattern using a model. He is able to identify some shapes in his environment (circle, triangle, diamond, oval). Daniel's math skills are within the developmental progress for his age at this time, but should be monitored in the school year for progress.
Areas of needs: None at this time.
Impact of disability: Daniel's eligibility of speech and language impairment (SLI) does not impair his ability in the area of mathematics. This does not impact his involvement and progress in the general education curriculum.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student LEVI DANIEL MI Last First MI

Date of Birth 28-JUN-2014

Meeting Date 10-MAY-2019

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: [Empty]

- 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): [Empty]

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

Final IEP Reason: [Empty] Final IEP Effective Date: [Empty]

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

- Social Maladjustment, Temporary Physical Disability, Lack of instruction in reading, Lack of instruction in math, Limited English Proficiency, Environmental, Cultural or Economic Factors



INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student LEVI DANIEL MI Last First MI

Date of Birth 28-JUN-2014

Meeting Date 10-MAY-2019

Section G: Annual Goals and Objectives

Performance Area: Language-Articulation Annual Goal #:

Daniel will reduce phonological processes (initial sound omissions (ello/yellow), consonant cluster reductions (muhkey/monkey), syllable reductions, fronting, (papilah/caterpillar), gliding (w/r) in utterances ranging up to five words in length, with minimal verbal cueing, at 70% intelligibility.

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, Observation, Other, Norm Referenced, Portfolio, Criterion Referenced, Work Samples, Curriculum Based, Informal

Incremental objective #1 related to the goal:

Daniel will reduce phonological processes (initial sound omissions (ello/yellow), consonant cluster reductions (muhkey/monkey), syllable reductions, fronting, (papilah/caterpillar), gliding (w/r) in utterances ranging up to five words in length, with models and maximum verbal cueing, at 70% intelligibility.

Incremental objective #2 related to the goal:

Daniel will reduce phonological processes (initial sound omissions (ello/yellow), consonant cluster reductions (muhkey/monkey), syllable reductions, fronting, (papilah/caterpillar), gliding (w/r) in utterances ranging up to five words in length, with fading models and moderate verbal cueing, at 70% intelligibility.

Date to be achieved: Septeml 2019 MO/YR

Date to be achieved: January 2020 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

Table with 5 columns: 1st Reporting Period, 2nd Reporting Period, 3rd Reporting Period, 4th Reporting Period (Secondary Only), Goal Achievement. Includes progress marks, sufficiency questions, and 'No' comments.

**INDIVIDUALIZED EDUCATION PROGRAM (IEP)**

**Los Angeles Unified School District**

**Student**

LEVI

DANIEL

**Date of Birth**

28-JUN-2014

**Meeting Date**

10-MAY-2019

**Last**

**First**

**MI**

**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.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student LEVI DANIEL MI  
Last First MI

Date of Birth 28-JUN-2014

Meeting Date 10-MAY-2019

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 Hebrew

Specify the Individual Pages to be translated:

PLPS and Goals

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.

Los Angeles Unified School District

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Student LEVI DANIEL MI Last First MI

Date of Birth 28-JUN-2014

Meeting Date 10-MAY-2019

Section Q: Parent Participation and Consent

Parent Participation

- Parent/Student (18-21) has participated in the IEP meeting.
Parent/Student (18-21) indicated before the meeting that they would not be able to attend.
Parent/Student (18-21) was notified 3 times of the meeting time and place.
Parent/Student (18-21) did not respond to any of the meeting notifications and the meeting was held without the Parent/Student (18-21) present.
Parent/Student (18-21) did not attend and gave permission to proceed without them if they did not attend.

Parent Notification

Table with 3 columns: Method, Whom, When. Row 1: Student, Nancy Joaquin, 29-APR-2019. Row 2: Unknown, Sandy.

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

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

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

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

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

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

Parent Concerns and Comments

Signature(s)

Signature(s)

Date 10-MAY-2019

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

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

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

Signature(s)

Signature(s)

Date 10-MAY-2019

### PARENT INPUT SURVEY

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

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

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

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

<b>B. Regarding your child's previous IEP (if relevant):</b>	
20. I am satisfied that my child received the services described on the previous IEP. (If your answer to this question is "No", please write concerns below.)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<small>Additional Comments</small>	

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!

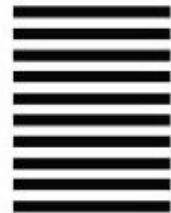


NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**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 613307  
LOS ANGELES CA 90099-4093



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

**INDIVIDUALIZED EDUCATION PROGRAM (IEP)**

**Los Angeles Unified School District**

**Reconvened Meeting Date**

**Student**     
**Last First MI**

**Date of Birth**

**Meeting Date**

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

<b>Team Member</b>	<b>Print Name</b>	<b>Signature</b>
Parent/Guardian	<input type="text" value="Meital Gershoni"/>	<input type="text"/>
Parent/Guardian	<input type="text"/>	<input type="text"/>
Student Age 18 - 21 years	<input type="text"/>	<input type="text"/>
Student Under Age 18 years	<input type="text"/>	<input type="text"/>
Surrogate Parent	<input type="text"/>	<input type="text"/>
Foster Parent	<input type="text"/>	<input type="text"/>
Family Foster Home Provider	<input type="text"/>	<input type="text"/>
Administrator	<input type="text" value="Sara Vasquez"/>	<input type="text"/>
Administrative Designee	<input type="text"/>	<input type="text"/>
Special Education Teacher	<input type="text" value="Nancy Joaquin"/>	<input type="text"/>
General Education Teacher	<input type="text" value="Sandy Chen"/>	<input type="text"/>
School Psychologist	<input type="text"/>	<input type="text"/>
School Nurse	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text" value="LAS"/>	<input type="text" value="Aldona Butkys MA CCC"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Related Service Staff <input type="text"/>	<input type="text"/>	<input type="text"/>
Interpreter	<input type="text"/>	<input type="text"/>
Sign Language Interpreter	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Agency Representative	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student LEVI DANIEL MI Last First MI

Date of Birth 28-JUN-2014

Meeting Date 10-MAY-2019

LEAST RESTRICTIVE ENVIRONMENT ANALYSIS

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

Student's Current Placement Type:

Form with radio buttons for placement options: General Education Class, Special Day Program, Home/Hospital, etc.

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.

Step A: Can the supports, services, accommodations and/or modifications in the student's IEP be made available in a general education classroom/setting?

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?



INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Los Angeles Unified School District

Student LEVI DANIEL MI  
Last First MI

Date of Birth 28-JUN-2014

Meeting Date 10-MAY-2019

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?

Yes  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.

Yes  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?

Yes  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.

Yes  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?

Yes  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

Student     
Last First MI

Date of Birth

Meeting Date

ANNUAL LEAST RESTRICTIVE ENVIRONMENT ANALYSIS (Continued)

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

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

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

IEP FAPE Part 1 - Eligibility, Placements and Supports

Los Angeles Unified School District

Student     
 Last First MI

Date of Birth

Meeting Date

		Effective With this IEP	Future Changes Related to this IEP
	As of Date:	<input type="text" value="10-MAY-2019"/>	<input type="text" value="20-AUG-2019"/>
Eligibility: (from Page 4)		<b>Eligible (SLI)</b>	
	Final IEP Reason Final IEP Effective Date:		
Curriculum		<input type="text" value="General Education"/>	<input type="text" value="General Education"/>
Placement	Type of School	<input type="text" value="District Early Education Center"/>	<input type="text" value="District Resident School"/>
	Name of School	<input type="text" value="CANOGA PARK EEC"/>	<input type="text" value="CALABASH CA"/>
Instructional Setting	Setting	<input type="text" value="General Education"/>	<input type="text" value="General Education"/>
	Program	<input type="text" value="PCC"/>	<input type="text" value="GE"/>
	Special Day Minutes/Wk	<input type="text" value="0"/>	<input type="text" value=""/>
	Addresses Goals	<input type="text" value="(Language-Articulatio)"/>	<input type="text" value="(Language-Articulatio)"/>
Additional Factors	Low Incident Support	<input type="text" value="None"/>	<input type="text" value="None"/>
	Assistive Technology Support	<input type="text" value="No"/>	<input type="text" value="No"/>
	Transportation	<input type="text" value="Home to School"/>	<input type="text" value="None"/>
	Extended School Year/Intersession	<input checked="" type="radio"/> Yes <input type="radio"/> No	
	Parent Counseling and Training (PCT)	<input checked="" type="radio"/> Yes <input type="radio"/> No	
	ESY Transportation	<input type="text" value="Home to School"/>	
Accommodation, Modifications, Supports	Instructional Accommodations	<input type="text" value="Repetition, modeling, rephrasing with additional time for verbal processing and responding to questions, adult facilitated peer interactions, repetitive verbal routines, daily visual routine of activities, review classroom rules regularly, breaking up tasks into workable and obtainable steps, signal transitions provide redirection"/>	<input type="text" value="Repetition, modeling, rephrasing with additional time for verbal processing and responding to questions, adult facilitated peer interactions, repetitive verbal routines, daily visual routine of activities, review classroom rules regularly, breaking up tasks into workable and obtainable steps, signal transitions provide redirection"/>
	Instructional Modifications	<input type="text" value=""/>	<input type="text" value=""/>
	Other Supports, including Non-Academic and Extra-curricular Activities	<input type="text" value=""/>	<input type="text" value=""/>
Preparation for Three Year Review IEP (At the second Annual Review IEP Meeting, the team must discuss and document the decision to conduct or not conduct a three-year comprehensive reassessment.)	Do the Parent and the District (local educational agency) agree that a reassessment is unnecessary?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
	If the Parent does not agree, specify the area(s) to be reassessed.	<input type="text" value=""/>	<input type="text" value=""/>

Comments, as appropriate

Low Incidence

<b>Equipment</b>	
<b>Assistive Technology Equipment</b>	
<b>Participation in General Education</b>	

**INDIVIDUALIZED EDUCATION PROGRAM (IEP)**

Los Angeles Unified School District

IEP FAPE Part 2 - Summary of Services

Student     
 Last First MI

Date of Birth  Meeting Date

		Effective With This IEP	Future Changes Related To This IEP
<b>Service 1</b>	Start Date:	Effective on Signature Date 10-MAY-2019	
<b>10</b>	End Date:		
<b>Language/Speech</b>	Service applies to:	Regular	
	Frequency:	10-40	
This service addresses the following goals:  <input type="text" value="(Language-Articulation)"/>	Interval:	Yearly	
	Minutes/Interval:	1200	
	Minutes/Interval (Pullout from Gen Ed):	1200	
	Service Delivery Model:	Direct Service (Collaborative)*	
	Area:	School-Based	
	Responsible Personnel:	Licensed/Credentialed Provider	
		General Education Teacher	

\*

**Notes:**

Parents of students who are Medi-Cal eligible authorize LAUSD to submit claims for reimbursement by Medi-Cal funded services unless parent(s) signs a Parent Medi-Cal Non-Authorization to Bill form. Please see Parent's Guide to Special Education Services (including Procedural Rights and Safeguards).

**Part 3 - Percentage of Time Outside of General Education**

	Effective With this IEP	Future Changes Related to this IEP
<b>% of Time per Week outside of General Education</b>	<input type="text" value="1"/>	

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

Parent Counseling and Training (PCT) workshop was discussed. Information packet for participation was provided.

**INDIVIDUALIZED EDUCATION PROGRAM (IEP)**

Los Angeles Unified School District

**IEP FAPE Part 2 - Summary of Services**

Student     
 Last First MI

Date of Birth

Meeting Date

**FAPE Summary Grid**

<b>Program:</b>	PCC	<b>Setting:</b>	General Education
<b>Eligibility:</b>	Eligible (SLI)	<b>Curriculum:</b>	General Education
<b>Transportation:</b>	Home to School	<b>Low Incident Support:</b>	None
<b>Date District Received Parent Signature:</b>	10-May-2019		

Service Code	Service Desc	Start Date	Service Applies To	Interval	Frequency	Area	Total Minutes	Addresses Goal(s)	No Consent
10	Language/Speech	Effective on Signature Date	Regular	Yearly	10-40	School-Based	1200	Language-Articulatio	--

**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  
SPEECH LANGUAGE IMPAIRMENT (SLI) ELIGIBILITY CERTIFICATION**

**Los Angeles Unified School District**

**ATTACHMENT A**

Student

Date of Birth

Meeting Date

This page is to be completed for initial IEPs, 3-year evaluations, or when a comprehensive speech-language evaluation has been conducted to determine whether SLI eligibility is appropriate.

**Complete Step 1a or 1b**

**Step 1a. General Education Interventions - Check items as completed**

- Intervention strategies implemented, including English Language Instruction or RtI2 prevention support (including but not limited to school staff development regarding language standards in the curriculum and referral for Special Education, consultation between the classroom teacher and school speech therapist for appropriate classroom accommodations, consultation with the SSPT that includes an EL expert if student is identified as an English Learner).
- Intervention support monitored over several weeks, and modified interventions as necessary based on student response.
- Interventions were not successful, student referred for special education assessment.
- Screening by a speech therapist or a student success team meeting (including a speech therapist) with the focus being speech and language concerns OR an appropriate screening for non-LAUSD enrolled preschoolers.

**Step 1b. Interventions Not Applicable**

- Interventions not applicable for non-LAUSD enrolled preschoolers or when determined unnecessary by the speech therapist.

**Step 2. Review of Pre-referral Information - Check items as applicable**

- The speech or language delay does not appear to be due to unfamiliarity with English.
- The delay does not appear to be due to a lack of instruction in English, dialectical factors or limited language experience.
- The delay does not appear to be due to environmental factors.
- The delay does not appear to be due to economic factors.
- The delay does not appear to be due to social or cultural factors.

**Step 3. Assessment - Check either A or B, and complete the remaining items**

- A.** Student has received an assessment by a school psychologist that gives an indication of where the student's general ability lies. (if a language impairment is suspected) **OR**
- B.** A psychological assessment is not required if the suspected area of disability is voice, fluency or articulation.
  - Student has received a health assessment that rules out whether an inability to communicate effectively is a result of a health or sensory condition.
  - A credentialed or licensed speech therapist has conducted a comprehensive evaluation, including assessment in the student's primary language, that consists of multiple measures of assessment, including but not limited to standardized test instruments (or alternate forms of assessment if necessary), formal speech/language sample, parent interview or checklist, teacher interview or checklist, and observation in various communication settings.

**Complete Step 4**

**Step 4. Determination of Eligibility of Speech Language Impairment (as the only identified special education eligibility)**

- A.** Student meets one or more of the following criteria (check each disorder that applies):
  - A language disorder, which has been identified in an assessment that includes use of two or more standardized tests in one or more of the following areas of language development: morphology, syntax, semantics, or pragmatics where the resulting scores are at least 1.5 S.D. below the mean or below the 7th percentile for the student's chronological age or developmental level and a 50-utterance representative spontaneous language sample where the student displays inappropriate or inadequate usage of receptive and/or expressive language. Note: When standardized tests are considered to be invalid for the specific student, the expected language performance level shall be determined by alternative means as specified on the assessment plan [5 CCR 3030 (c)(4)].
  - An articulation disorder (e.g., Pronunciation), which draws adverse attention, significantly interferes with communication and has been identified in an assessment that includes a conversational speech sample which reveals significant interference with communication and identifies single or multiple speech sound errors that are below the student's chronological age or developmental level.
  - A fluency disorder (e.g., Stuttering), which has been identified in an assessment that demonstrates that the flow of verbal expression adversely affects communication between the student and the listener in multiple communication settings and the dysfluency has persisted over time.
  - A voice disorder (e.g., Chronic Hoarseness, Pitch Variations), which has been identified in an assessment by a speech therapist after the etiology has been cleared by a Medical Doctor, in writing.
- B.** The impairment has a significant adverse affect on the student's academic performance.
- C.** The presenting Speech Language Impairment is not due to: social maladjustment, health factors, poor school attendance, environmental, economic, or social disadvantage, lack of instruction or the unfamiliarity with the English language.

**Complete Step 5**

**Step 5. Consideration for additional special education service(s): Complete A or B.**

- A.** In the event a student with eligibility of Speech Language Impairment is being considered for special education academic services and/or support, an updated District psychoeducational evaluation has been completed to determine that SLI is the overarching eligibility.
- B.** Student is not being considered for additional special education academic services and/or support.

**If the student is eligible, the IEP Team must consider service delivery models based on the student's identified needs and appropriate placement in the least restrictive environment. Additionally, the IEP team should also include teacher and parent participation in the implementation of goals and supports and accommodations to ensure achievement of goals and objectives in a time-efficient manner and carry-over to multiple communication contexts.**