

ELEMENTARY INDIVIDUALIZED EDUCATION PROGRAM

COVER PAGE

Student Name Page 1 of 48

Student ID Number Testing ID Grade 04 DOB Age 10

Disability(ies) Specific Learning Disability Other Health Impairment Orthopedic Impairment

Parent Name

Home Address Phone (H)

Phone (W)

Parent Name

Other Address Phone (H)

Phone (W)

Date of IEP Meeting 06/25/12

Date parent notified of IEP Meeting 06/20/12

This IEP will be reviewed no later than 06/24/13

Most recent eligibility date 06/12/12

Next re-evaluation, including eligibility, must occur before 06/12/15

Copy of IEP given to parent (Name) On (Date) 06/25/12

IEP Teacher/Manager Phone Number

The Individual Education Plan (IEP) that accompanies this document is meant to support the positive process and team approach. The IEP is a working document that outlines the student's vision for the future, strengths and needs. The IEP is not written in isolation. The intent of an IEP is to bring together a team of people who understand and support the student in order to come to consensus on a plan and an appropriate and effective education for the student. No two teams are alike and each team will arrive at different answers, ideas and supports and services to address the student's unique needs. The student and his/her family members are vital participants, as well as teachers, assistants, specialists, outside service providers, and the principal. When all team members are present, the valuable information shared supports the development of a rich student profile and education plan.

PARTICIPANTS INVOLVED:

The list below indicates that the individual participated in the development of this IEP and the placement decision; it does not authorize consent. Parent consent is indicated on the "Prior Notice" page.

PARTICIPANT/POSITION

PARTICIPANT/POSITION

**INDIVIDUALIZED EDUCATION PROGRAM
FACTORS FOR IEP TEAM CONSIDERATION**

Student Name Date 06/25/12 Page 2 of 49

Student ID Number

During the IEP meeting, the following factors must be considered by the IEP team. Best practice suggests that the IEP team document that the factors were considered and any decision made relative to each. The factors are addressed in other sections of the IEP if not documented on this page. (for example: see Present Level of Academic Achievement and Functional Performance)

1. Results of the initial or most recent evaluation of the student;
See Present Level of Academic and Functional Performance page.

2. The strengths of the student;
See Present Level of Academic and Functional Performance page.

3. The academic, developmental, and functional needs of the student;
See Present Level of Academic and Functional Performance page.

4. The concerns of the parent(s) for enhancing the education of their child;
See Present Level of Academic and Functional Performance page.

5. The communication needs of the student;
See Present Level of Academic and Functional Performance page.

6. The student's needs for benchmarks or short-term objectives:
None are needed as student is taking SOLs.

7. Whether the student requires assistive technology devices and services;
See Present Level of Academic and Functional Performance page.

8. In the case of a **student whose behavior impedes his or her learning or that of others**, consider the use of positive behavioral interventions, strategies, and supports to address that behavior;
 struggles to maintain focus in the classroom but is easily redirected.

9. In the case of a **student with limited English proficiency**, consider the language needs of the student as those needs relate to the student's IEP;
 is not a student with limited English proficiency.

10. In the case of a **student who is blind or is visually impaired**, provide for instruction in Braille and the use of Braille unless the IEP team determines after an evaluation of the student's reading and writing skills, needs, and appropriate reading and writing media, including an evaluation of the student's future needs for instruction in Braille or the use of Braille, that instruction in Braille or the use of Braille is not appropriate for the student; When considering that Braille is not appropriate for the child the IEP team may use the Functional Vision and Learning Media Assessment for Students who are Pre-Academic or Academic and Visually Impaired in Grades K-12 (FVLMMA) or similar instrument; and
 is not a student who is blind. She does have visual field deficits.

11. In the case of a **student who is deaf or hard of hearing**, consider the student's language and communication needs, opportunities for direct communications with peers and professional personnel in the student's language and communication mode, academic level, and full range of needs, including opportunities for direct instruction in the student's language and communication mode. The IEP team may use the Virginia Communication Plan when considering the student's language and communication needs and supports that may be needed.
 is not a student who is deaf or hard of hearing.

Individualized Education Program (IEP)

PRESENT LEVEL OF ACADEMIC AND FUNCTIONAL PERFORMANCE

Student's Name: Date: 06/25/12 Grade: 04

The Present Level of Academic Achievement and Functional Performance summarize the results of assessments that identify the student's interests, preferences, strengths and areas of need. It also describes the effect of the student's disability on his or her involvement and progress in the general education curriculum, and for preschool children as appropriate, how the disability affects the student's participation in appropriate activities. This includes the student's performance and achievement in academic areas such as writing, reading, math, science, and history/social sciences. It also includes the student's performance in functional areas, such as self-determination, social competence, communication, behavior and personal management. Test scores, if included, should be self-explanatory or an explanation should be included, and the Present Level of Academic Achievement and Functional Performance should be written in objective measurable terms, to the extent possible. There should be a direct relationship among the desired goals, the Present Level of Academic Achievement and Functional Performance, and all other components of the IEP.

Results of most recent evaluations:

most recent eligibility was 6/12/12. She was found eligible to receive special education services as a student with a Specific Learning Disability. She also continues to be eligible to receive special education services as a student with an Other Health Impairment and Orthopedic Impairment. displayed average verbal ability and nonverbal reasoning. Processing deficits in visual scanning, processing speed, rapid naming, and auditory discrimination impact her academic achievement in math, reading, and academic fluency. She has motor deficits and fatigue that result from a perinatal stroke and seizure disorder. Cont'd on p. 5

Recent state assessments:

participated in SOLs in the third grade with the following scores(400 is pass proficient, 500 is pass advanced, and 600 is a perfect score): Reading - 377, Math - 333, Social Studies - 325, Science - 389. She also participated in SOL testing in the fourth grade with the following scores: Reading - 310, Math - 296, Virginia Studies - 369

The strengths of the child:

comes to school each day ready to learn. She attempts to complete all that is asked of her to do and will ask for help as needed. She enjoys writing in spite of it being laborious for her.

Concerns of the parent(s) for enhancing the education of their child:

is concerned about transition to middle, especially accommodations that will be needed in order for to participate in middle school physical education.

Description of how the disability affects the student's involvement and progress in the general curriculum and any other areas of education including academic, functional, and non-academic areas (for preschool children, how the disability affects the child's participation in appropriate activities). This description shall include the child's strengths and weaknesses (academic and behavioral) in relationship to the educational needs:

currently receives direct instruction for language arts and math in a resource setting. For science and social studies, she receives collaborative instruction in the general education classroom.

reading progress has been inconsistent. She began 4th grade on a guided reading level M with 96% accuracy and 90% comprehension(instructional). At mid-year, she was given a passage on a guided reading level N with 95% accuracy and 80% comprehension(instructional) and a guided reading level O with 96% accuracy and 36% comprehension(frustrational). At the end-of-the-year, she was given a passage on a guided reading level M with 98% accuracy and 82% comprehension(instructional). Additionally, she was given a passage on a guided reading level N with 95% accuracy and 71% comprehension(instructional). A guided reading level N is a beginning third grade reading level. Her fluency remains significantly below average(1st quartile) and she reads slowly and mostly word by word. has been encouraged to work on her fluency nightly during fourth grade. also received reading instruction through the Voyager Passport reading program starting in late November.

Student's Name: _____ Date: 06/25/12 Grade: 04

Present level of Academic and Functional Performance (continued)

made steady progress with her spelling skills. She started the fourth grade on a mid-Within Word spelling level and had made some progress by mid-year, moving towards a late Within Word level. She finished the year on a late Within Word spelling level. This is a mid-year third grade level.

enjoys writing stories and will frequently choose to write sentences as one of her weekly word study activities. She has good ideas for her stories, even though it can take her a long time to complete a written activity. On her last writing sample, she scored 20.5 out of a possible 35 points. She received a score of "3"(developing) in every category except Usage/Mechanics: Conventions where she received a 2(emerging). Her sample had a good introduction and conclusion, but was missing end punctuation on most of her sentences(even after she was given a reminder about this) and her paragraph was not indented.

was provided 4th grade math instruction using the Voyager Math program. struggles with most math concepts, especially multi-step. She has a weak number sense foundation which will impact most math concepts. It also takes her much longer to solve a problem because of the amount of writing involved. is not fluent with her recall of math facts, but she will use a hundreds chart to help with addition and subtraction. She also uses strategies such as skip counting for multiplication. She benefits from having instruction at a slower pace in a smaller classroom setting and more opportunities for practice.

Cont'd on p. 6

Describe any behaviors that impede the student's learning or the learning of others:

struggles to maintain focus, but is easily redirected.

Additional Information (e.g. medical diagnosis, medication, outside services, etc.):

See page 7

Is the student eligible for public insurance, such as Medicaid, Medicaid Expansion, or Famis? Yes No If so, insert the IEP Parental Consent to Bill Public Insurance form.

The following nursing services will be provided to _____ for the medical/nursing diagnosis of _____:

- Medications will be administered as ordered by the physician and provided by the parents.
- Procedures for _____ will be completed as ordered by the physician with supplies provided by the parents.
- Assistance with activities of daily living will be provided based on the student's level of function with supplies provided by the parents as needed.
- An Individualized Healthcare Plan will be implemented and a copy will be available in the school health office.

The IEP team considered the need for short-term objectives/benchmarks:

- Short-term objectives/benchmarks are included for this student. (Required for student participating in VAAP).
- Short-term objectives/benchmarks are not included for this student.

ASSISTIVE TECHNOLOGY - A variety of Assistive Technology tools were tried with _____ in May and June 2012 to help _____ with written assignments. It was determined that handwriting continues to be an efficient and effective means of expressing what she knows for short answers and daily activities such as journaling. _____ likes to write and her handwriting is neat and legible. It is laborious secondary to physical weaknesses so continued strategies to reduce the writing demand are appropriate. Visual glancing from paper to page did not appear to interfere with _____ productivity as much as general distractibility (true with all methods explored, but less with voice insert/audio recording). It was determined that the most effective and least restrictive new strategy explored appears to be using the "insert voice recording" feature within Word documents when _____ is given assignments/assessments that require a more lengthy written response. It was also recommended that _____ continue to be exposed to a variety of modes of expression. In addition to continuing with both handwriting and voice recordings, it was suggested to continue to explore the speech to text technology. While _____ speed and accuracy with voice to text are not yet as efficient as other methods, she should continue to work on improving these components.

EDUCATIONAL _____ was assessed in May 2012 by HCPS. Current assessment results indicate academic skills that range from average to deficient across measures. On the WJIII NU, reading fell in the low average range overall, with below average fluency. On the KTEA2, phonological awareness was assessed as average, while decoding skills measured within the upper limits of the low average range. Auditory comprehension skills were assessed as average, and are a relative strength for _____. Math skills fell in the below average range, with low average math problem solving skills. Written language was assessed as below average as well, with low average spelling and writing skills and deficient writing fluency. Results indicate that _____ will likely continue to need additional time to complete assignments, especially if writing is involved.

PSYCHOLOGICAL _____ was evaluated in May 2012 by HCPS. The WJ-III NU was used to assess cognitive abilities and findings were fairly consistent with Dr. _____ results. _____ verbal ability was average as was her visual-spatial thinking, visual-auditory learning, and sound blending skills. However, significant weaknesses were evident in her visual scanning and processing speed, rapid naming, and auditory discrimination. These likely contribute to her academic underachievement. _____ is also experiencing some social-emotional concerns that she perceives as significant. They are not as evident in the classroom setting, but were reported as at-risk concerns.

NEUROPSYCHOLOGICAL _____ was evaluated in March 2012 by Dr. _____ at VCU. His findings suggested significant central nervous system dysfunction likely resulting from the perinatal stroke and seizure disorder. Intellectual skills were varied on the WISC-IV and consistent with previous findings. Verbal comprehension (VCI=99) was average as was her nonverbal reasoning and immediate recall of auditory information. Deficits were apparent in Perceptual Reasoning (PRI=88), Working Memory (WMI=83), and Processing Speed (PSI=70) with below average spatial reasoning, auditory sequencing, and motor processing speed. Additional measures suggested relative weaknesses in word finding skills, visual orientation, and visual-auditory learning. Fine motor performances varied. While visual motor copying was adequate, grip strength and motor speed were weak. Attention concerns varied by respondent as more difficulties were reported at home than in school. By self-report, _____ identified some features of depression and a sense of inadequacy.

Per letter from Dr. _____ 1/18/12, _____ has had a small decrease in refractive error and a small increase in vertical strabismus compared to recent measurements. We continue to follow these trends, the second of which might result in some eye muscle surgery at some point down the road. For now, she needs to continue wearing glasses with bifocals to give her the best chance of capturing all the details of her schoolwork. She needs to continue to guard against blunt trauma that could result from the hemi-neglect that can come about as a result of this visual field deficit.

Per letter from Dr. _____ dated 9/22/2011, he had reviewed the list of suggested modifications for children with disabilities for the FITNESSGRAM and advised that _____ not participate in any upper body strength exercises or testing. _____ agreed that the modified endurance exercises such as walking and light/running are appropriate.

Physical Therapy evaluations were completed in January 2011 by HCPS. She tried all activities asked of her during testing with a positive attitude. At this time, she is able to access her educational environment with accommodations for seating and line placement, adult support for going down the stairs, and using the elevator instead of going up the stairs. She also has adult supervision during outside recess time. _____ is able to maneuver around her classroom and school building. On the gross motor portion of the SFA _____ increased her scores in recreational movement and manipulation with movement, decreased her scores slightly on stairs (due to being slow and safe coming down stairs), and remained the same in travel and maintaining/changing positions as compared to her assessment in 2008. During the assessment, _____ did well on the playground and on the stairs, but it should be noted that it was a more one-to-one setting and there were no other distractions. At the time of this assessment, _____ gross motor skills are not affecting her ability to receive an education so Physical Therapy does not recommend services.

Occupational Therapy evaluations completed in December 2010 by HCPS: Developmental Test of Visual Motor Integration - 5 with the following scores: VMI standard score 94 (average), visual perceptual standard score 85 (average), motor coordination standard score 91 (average); results from Written Productivity Profile as follows: speed of writing ranges from 2.6 words per minute to 4.4 words per minute during sentence copy and independently composed sentence written speed is 3.6 words per minute. Range of motion and strength is within functional limits in the right upper extremity. Left upper extremity exhibits functional range of motion to assist in stabilizing paper on desk. The left arm lacks full supination and lacks graded control for precise control. The left hand lacks the ability to sense pin-point touch. Localization of pin-point touch is slow beginning at the left wrist/forearm. Cont'd on p. 6

Evaluations cont'd from p. 5

Social History was completed in December 2008 with []. [] had a stroke "in utero" and as a result, development was delayed in area of motor skills. [] began receiving early intervention services of PT/OT. Speech developed normally. She was diagnosed with a seizure disorder at age 4. She currently takes medications for seizures and gastro concerns. Vision was also impacted by the stroke. [] received Part B services and was released from services in Spring '07 due to good progress. Family system has been stable though Mr. [] lost his job during the Summer '08 and recently found a new job. Siblings are all good students with no academic concerns. Rating scales: BASC scores significant in areas of aggression, conduct problems, somatization, atypicality, withdrawal, attention problems, and activities of daily living. Brown ADD scales: scores were elevated in the areas of activation and action, but overall the scale was not significantly elevated.

Description of Disability cont'd form p. 4

[] does struggle to maintain focus in both classroom settings, but is easily redirected.

As the pace picked up in fourth grade, [] required more monitoring to make sure she was completing assignments correctly as she did not always let the teacher know when she needed assistance in a timely fashion. Written assignments, such as answering fill-in-the blank questions, copying a math problem, or showing her work for math problems, can take [] a long time to complete. Minimizing the amount of writing required of [] took on more importance as the school year progressed. Copying a day's worth of homework assignments in her agenda can take +20 minutes. [] was given a typed copy of weekly homework assignments after returning from winter break. Reading an A to Z passage on her instructional level can take her up to an hour to complete in class. [] is capable of completing most assignments, but she usually requires more time than her classmates to complete the assignments.

Per orders from her neurologist and agreed upon by Hanover County Public Schools, [] must be with an adult at all times during the school day. Mrs. [] brings her to school each day and [] is met by school personnel and walked to class. Fatigue is one of the triggers for her seizures and is an ongoing concern. [] classroom is located upstairs, so she takes the elevator upstairs to her classroom and is accompanied by an adult. She is able to walk down the stairs with adult assistance. An adult must walk with her to and from her classes. If [] must use the restroom or go to the clinic during math or language arts classes, the teacher sends the rest of the students back to their classroom and accompanies [] where she needs to go. [] can use the restroom independently for the most part with an adult standing outside the restroom in the event that she needs assistance. [] requires an adult to go to encores with her each day (art, music, guidance, library, PE) as well as going to recess/walk and talk after lunch. If [] brings a drink with a screw top or food that is not in a zip-lock baggie, she requires assistance to open the drink/food. [] sometimes requires assistance taking her needed materials to and from the classroom as well as with packing needed materials to go home at the end of the day. She can usually unpack her backpack each morning with teacher reminders. Because she has very limited use of her left side, simple tasks such as turning pages in a book and cutting activities have become more of a challenge to her and she requires assistance. An adult walks [] to the bus each afternoon and helps her get up the bus steps safely. [] also has occupational therapy exercises that she needs to do each day with adult assistance such as using her left hand to open doors, use the water fountain, and press the elevator buttons, interlocking her hands, raising them up and down as well as side to side, and making sure that she keeps the left arm in a weight bearing position.

Occupational Therapy 2012 update: Occupational therapy provides consultative services monthly to develop and monitor a functional upper extremity strengthening/stretching program. [] is guided through functional activities that requires the left upper extremity to reach and manipulate objects/materials on a daily basis. The program also provides structure for positioning the left arm/hand when seated at a desk to maintain a weight bearing position. Consultative services have also included exploring assistive technology tools to help [] with written assignments.

Adapted P.E. 2012 Update: [] attends regular P.E. each week and participates in a variety of fitness and skill activities with her classmates. She currently receives monthly consultation of adapted P.E. services. Each month the adapted P.E. teacher observes her in P.E. class and provide her P.E. teacher with ideas on modifying/adapting games for that unit and the next unit (if necessary). Some activities [] has done this year include football, soccer, jump rope, team handball, basketball, and station activities. [] really enjoys being with her class and successfully participates in each unit. She stays active throughout class and does skills with a few modifications/adaptations or independently, depending on the skill.

Additional Medical Information provided by the parent is as follows:

has the following medical diagnoses and effects:

Cerebral Vascular Accident(stroke) - numerous issues related to brain injury, one significant issue being her non-recognition of dangerous situations and overestimation of her own capabilities.

Cerebral palsy - decreased strength, vitality, and endurance, muscular/skeletal issues presenting on both sides of her body

Epilepsy - both grand mal and petit mal seizures/takes medications

Although at one point her physician thought was suffering from Migraines, there has not been a diagnosis and no longer takes the medication that was originally prescribed for her head aches. She does have occasional head pain, dizziness, and nausea.

Left-sided hemiplegia - partial paralysis, spastic contracture, lack of sensation, muscular weakness involving the entire left side of her body, but most evidenced in the limbs

Multiple vision issues - blindness on the left side of each eye, and inability to detect movement overhead/ any moving objects in her environment are difficult for her to detect

Mild hearing loss on left-lack of hearing on her left adds to her inability to detect activities on that side

Medications that takes bear warning labels regarding side effects of sleepiness and dizziness.

**PARENTAL CONSENT FOR BILLING PUBLIC INSURANCE LANGUAGE
FOR THE IEP or IEP AMENDMENT**

Student Name: Date: 06/25/12

For Medicaid or FAMIS (Family Access to Medical Insurance Securities) Insured Only

Consent to Release Information: I consent for Hanover County Public Schools (LEA) to release information about my child's participation in services billed to Medicaid to participating physicians, other health care providers, the Department of Medical Assistance Services, and any Department of Medical Assistance Services billing agents, and any LEA billing agent as necessary to process Medicaid claims for reimbursement Medicaid covered health-related services and the evaluations for services outlined in the IEP.

Procedural Safeguard: I understand my right to deny consent for the school system to access my child's Medicaid coverage to seek reimbursement for the health-related services provided will not affect delivery of these services to my child. I understand that my permission is voluntary and may be revoked at anytime. I also understand that I have the right to request a copy of the records disclosed.

- I give consent for claims to be submitted to the State Medicaid Agency, as described above, for the services outlined in the Individualized Education Program (IEP), including duration and frequency and/or evaluations for IEP services.
- I do not give consent

INDIVIDUALIZED EDUCATION PROGRAM (IEP) MEASURABLE ANNUAL GOALS, PROGRESS REPORT

Student Name Date 06/25/12 Page 9 of 49
 Student ID Number Area of Need Focus

1 MEASURABLE ANNUAL GOAL:

By June 2013, will participate in a discussion led by the teacher by listening, raising her hand and waiting to be recognized on 9 out of 10 teacher observations each 9 week grading period.

How will progress toward this annual goal be measured? (check all that apply)							
<input checked="" type="checkbox"/> Classroom Participation	<input checked="" type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input type="checkbox"/> Class work	<input type="checkbox"/> Tests and Quizzes	<input checked="" type="checkbox"/> Other: <u>teacher data</u>					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
Progress Code							

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. **ES** - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. **IP** -The student has demonstrated insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. **NI** -The student has Not been provided Instruction on this goal. **MI** -The student has Mastered this annual goal.

COMMENTS:

MP1:
MP2:
MP3:
MP4:

At each interim and marking period, this goal page will be copied and sent home to this student's parent(s)/guardian(s). At the end of each marking period, parents will receive comments specific to this student's goal progress with attached supporting documents, if appropriate. At the interim marking period, this goal page will include progress codes only. At the end of this annual IEP, the completed progress report with attached supporting documents will be filed with the student's IEP in his/her cumulative record.

**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name Date 06/25/12 Page 10 of 49
 Student ID Number Area of Need Work Completion

2 MEASURABLE ANNUAL GOAL:

By June 2013, will check and correct school assignments for errors and neatness in 10 out of 10 trials each 9 week grading period.

How will progress toward this annual goal be measured? (check all that apply)							
<input type="checkbox"/> Classroom Participation	<input checked="" type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input checked="" type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input type="checkbox"/> Class work	<input type="checkbox"/> Tests and Quizzes	<input checked="" type="checkbox"/> Other: <u>teacher data</u>					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
Progress Code							

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. ES - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. IP -The student has demonstrated Insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. NI -The student has Not been provided Instruction on this goal. M -The student has Mastered this annual goal.

COMMENTS:

MP1:
MP2:
MP3:
MP4:

At each interim and marking period, this goal page will be copied and sent home to this student's parent(s)/guardian(s). At the end of each marking period, parents will receive comments specific to this student's goal progress with attached supporting documents, if appropriate. At the interim marking period, this goal page will include progress codes only. At the end of this annual IEP, the completed progress report with attached supporting documents will be filed with the student's IEP in his/her cumulative record.

**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name Date 06/25/12 Page 11 of 49
 Student ID Number Area of Need Task Initiation

3 MEASURABLE ANNUAL GOAL:

By June 2013, will begin the required task after receiving directions or instructions on 5 out of 5 opportunities each 9 week grading period.

How will progress toward this annual goal be measured? (check all that apply)							
<input type="checkbox"/> Classroom Participation	<input checked="" type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input type="checkbox"/> Class work	<input type="checkbox"/> Tests and Quizzes	<input checked="" type="checkbox"/> Other: <u>teacher data</u>					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
Progress Code							

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. **ES** - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. **IP** -The student has demonstrated Insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. **NI** -The student has Not been provided Instruction on this goal. **M** -The student has Mastered this annual goal.

COMMENTS:

MP1:
MP2:
MP3:
MP4:

At each interim and marking period, this goal page will be copied and sent home to this student's parent(s)/guardian(s). At the end of each marking period, parents will receive comments specific to this student's goal progress with attached supporting documents, if appropriate. At the interim marking period, this goal page will include progress codes only. At the end of this annual IEP, the completed progress report with attached supporting documents will be filed with the student's IEP in his/her cumulative record.

**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name Date 06/25/12 Page 12 of 49

Student ID Number Area of Need Reading Fluency

4 MEASURABLE ANNUAL GOAL:

By June 2013, will be able to read 60 words per minute on a passage on her instructional level with no more than 8 errors per 100 words as measured weekly for seven out of nine weeks.

How will progress toward this annual goal be measured? (check all that apply)							
<input type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input type="checkbox"/> Class work	<input type="checkbox"/> Tests and Quizzes	<input checked="" type="checkbox"/> Other: <u>running records</u>					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
Progress Code							

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. ES - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. IP -The student has demonstrated Insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. NI -The student has Not been provided Instruction on this goal. M -The student has Mastered this annual goal.

COMMENTS:

MP1:
MP2:
MP3:
MP4:

At each interim and marking period, this goal page will be copied and sent home to this student's parent(s)/guardian(s). At the end of each marking period, parents will receive comments specific to this student's goal progress with attached supporting documents, if appropriate. At the interim marking period, this goal page will include progress codes only. At the end of this annual IEP, the completed progress report with attached supporting documents will be filed with the student's IEP in his/her cumulative record.

Add More Goals

**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name _____ Date 06/25/12 Page 13 of 49
 Student ID Number _____ Area of Need Reading Comprehension

5 **MEASURABLE ANNUAL GOAL:**

By June 2013, _____ will demonstrate comprehension of passages with 80% average accuracy when presented with material at her instructional level, evaluated weekly each 9 week marking period.

How will progress toward this annual goal be measured? (check all that apply)								
<input type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____						
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____						
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____						
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports							
Date of Progress Report								
Progress Code								

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. **ES** - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. **IP** -The student has demonstrated Insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. **NI** -The student has Not been provided Instruction on this goal. **M** -The student has Mastered this annual goal.

COMMENTS:

MP1:	
MP2:	
MP3:	
MP4:	

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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name _____ Date 06/25/12 Page 14 of 49
 Student ID Number _____ Area of Need Whole Number - Addition and Subtraction

6 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will estimate and determine the sum or difference of two whole numbers each 999,999 or less using paper and pencil and a calculator with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)		
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports	

Date of Progress Report									
Progress Code									

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. **ES** - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. **IP** -The student has demonstrated Insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. **NI** -The student has Not been provided Instruction on this goal. **M** -The student has Mastered this annual goal.

COMMENTS:

MP1:
MP2:
MP3:
MP4:

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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name _____ Date 06/25/12 Page 15 of 49
 Student ID Number _____ Area of Need Whole Numbers - Multiplication

7 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will estimate and find the product of two whole numbers when one factor has two digits or fewer and the other factor has three digits or fewer, using paper and pencil and a calculator with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)									
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____							
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____							
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____							
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports								
Date of Progress Report									
Progress Code									

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COMMENTS:

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MP2:
MP3:
MP4:

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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name _____ Date 06/25/12 Page 16 of 49
 Student ID Number _____ Area of Need Whole Numbers - Division

8 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will estimate and divide whole numbers, finding quotients with and without remainders, given a one-digit divisor and a two- or three-digit dividend with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)								
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____						
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____						
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____						
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports							
Date of Progress Report								
Progress Code								

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MP2:
MP3:
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INDIVIDUALIZED EDUCATION PROGRAM (IEP) MEASURABLE ANNUAL GOALS, PROGRESS REPORT

Student Name Date 06/25/12 Page 17 of 49
 Student ID Number Area of Need Fractions - Addition and Subtraction

9 MEASURABLE ANNUAL GOAL:

By June 2013, will add and subtract fractions having like and unlike denominators that are limited to 2, 3, 4, 5, 6, 8, 10, and 12 with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)							
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
Progress Code							

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MP3:
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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name Date 06/25/12 Page 18 of 49
 Student ID Number Area of Need Decimals - Addition and Subtraction

10 MEASURABLE ANNUAL GOAL:

By June 2013, will add and subtract with decimals through thousandths, using concrete materials, pictorial representations, and paper and pencil with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)							
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
Progress Code							

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COMMENTS:

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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name _____ Date 06/25/12 Page 19 of 49
 Student ID Number _____ Area of Need Whole Numbers - Word Problems

11 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will solve single-and multi-step addition, subtraction, multiplication, and division problems with whole numbers with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)								
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____						
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____						
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____						
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports							
Date of Progress Report								
Progress Code								

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INDIVIDUALIZED EDUCATION PROGRAM (IEP) MEASURABLE ANNUAL GOALS, PROGRESS REPORT

Student Name _____ Date 06/25/12 Page 20 of 49
 Student ID Number _____ Area of Need Fractions and Decimals - Word Problems

12 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will solve single- and multi-step practical problems involving addition and subtraction with fractions and decimals with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)							
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
Progress Code							

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MP3:
MP4:

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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name Date 06/25/12 Page 21 of 49
 Student ID Number Area of Need Common Multiples and Factors

13 MEASURABLE ANNUAL GOAL:
 By June 2013, will determine common multiples and factors, including least common multiple and greatest common factor with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)								
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____						
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____						
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____						
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports							
Date of Progress Report								
Progress Code								

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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name _____ Date 06/25/12 Page 22 of 49
 Student ID Number _____ Area of Need Decimals - Comparing and Ordering

14 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will compare decimals using symbols greater than, less than, and equal to, and order decimals from least to greatest and greatest to least with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)							
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
Progress Code							

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COMMENTS:

MP1:
MP2:
MP3:
MP4:

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INDIVIDUALIZED EDUCATION PROGRAM (IEP) MEASURABLE ANNUAL GOALS, PROGRESS REPORT

Student Name Date 06/25/12 Page 23 of 49
 Student ID Number Area of Need Fractions - Comparing and Ordering

15 MEASURABLE ANNUAL GOAL:

By June 2013, will compare and order fractions (like and unlike denominators) and mixed numbers having denominators of 12 or less with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)								
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____						
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____						
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____						
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports							
Date of Progress Report								
Progress Code								

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COMMENTS:

MP1:	
MP2:	
MP3:	
MP4:	

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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name _____ Date 06/25/12 Page 24 of 49
 Student ID Number _____ Area of Need Decimal/Fraction Equivalents

16 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will write the decimal and fraction equivalents when given a model with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)

Classroom Participation Observation Criterion-referenced test: _____

Checklist Special Projects Norm-referenced: _____

Class work Tests and Quizzes Other: _____

Homework Written Reports

Date of Progress Report									
Progress Code									

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COMMENTS:

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INDIVIDUALIZED EDUCATION PROGRAM (IEP) MEASURABLE ANNUAL GOALS, PROGRESS REPORT

Student Name Date 06/25/12 Page 25 of 49
 Student ID Number Area of Need Decimals - Rounding

17 **MEASURABLE ANNUAL GOAL:**

By June 2013, will round decimals to the nearest whole number, tenth, and hundredth with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Classroom Participation | <input type="checkbox"/> Observation | <input type="checkbox"/> Criterion-referenced test: _____ |
| <input type="checkbox"/> Checklist | <input type="checkbox"/> Special Projects | <input type="checkbox"/> Norm-referenced: _____ |
| <input checked="" type="checkbox"/> Class work | <input checked="" type="checkbox"/> Tests and Quizzes | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Homework | <input type="checkbox"/> Written Reports | |

Date of Progress Report									
Progress Code									

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MP2:	
MP3:	
MP4:	

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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name _____ Date 06/25/12 Page 26 of 49
 Student ID Number _____ Area of Need Geometry - Polygons

18 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will define polygon and identify polygons with 10 or fewer sides with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)								
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____						
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____						
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____						
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports							
Date of Progress Report								
Progress Code								

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MP2:
MP3:
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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name _____ Date 06/25/12 Page 27 of 49
 Student ID Number _____ Area of Need Geometry - Points, lines, line segments, rays, angles

19 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will identify and describe representations of points, lines, line segments, rays, and angles, including endpoints and vertices with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)								
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____						
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____						
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____						
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports							
Date of Progress Report								
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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name Date 06/25/12 Page 28 of 49
 Student ID Number Area of Need Geometry - Lines

20 MEASURABLE ANNUAL GOAL:

By June 2013, will identify representations of lines that illustrate intersection, parallelism, and perpendicularity with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)							
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
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MP2:
MP3:
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INDIVIDUALIZED EDUCATION PROGRAM (IEP) MEASURABLE ANNUAL GOALS, PROGRESS REPORT

Student Name _____ Date 06/25/12 Page 29 of 49
 Student ID Number _____ Area of Need Geometry - Congruence

21 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will investigate congruence of plane figures after geometric transformations, such as reflection, translation, and rotation, using mirrors, paper folding, and tracing with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)							
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
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MP1:	
MP2:	
MP3:	
MP4:	

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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name _____ Date 06/25/12 Page 30 of 49
 Student ID Number _____ Area of Need Geometry - Transformations

22 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will recognize the images of figures resulting from geometric transformations, such as translation, reflection, and rotation with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)							
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
Progress Code							

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. **ES** - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. **IP** -The student has demonstrated Insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. **NI** -The student has Not been provided Instruction on this goal. **M** -The student has Mastered this annual goal.

COMMENTS:

MP1:
MP2:
MP3:
MP4:

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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name Date 06/25/12 Page 31 of 49
 Student ID Number Area of Need Measurement - Elapsed Time

23 MEASURABLE ANNUAL GOAL:

By June 2013, will determine elapsed time in hours and minutes within a 12-hour period with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)							
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
Progress Code							

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. **ES** - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. **IP** -The student has demonstrated Insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. **NI** -The student has Not been provided instruction on this goal. **M** -The student has Mastered this annual goal.

COMMENTS:

MP1:
MP2:
MP3:
MP4:

At each interim and marking period, this goal page will be copied and sent home to this student's parent(s)/guardian(s). At the end of each marking period, parents will receive comments specific to this student's goal progress with attached supporting documents, if appropriate. At the interim marking period, this goal page will include progress codes only. At the end of this annual IEP, the completed progress report with attached supporting documents will be filed with the student's IEP in his/her cumulative record.

INDIVIDUALIZED EDUCATION PROGRAM (IEP) MEASURABLE ANNUAL GOALS, PROGRESS REPORT

Student Name Date 06/25/12 Page 32 of 49
 Student ID Number Area of Need Measurement - Volume

24 MEASURABLE ANNUAL GOAL:

By June 2013, will estimate and measure liquid volume and describe the results in U S Customary units with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)							
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
Progress Code							

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. **ES** - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. **IP** -The student has demonstrated Insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. **NI** -The student has Not been provided Instruction on this goal. **MI** -The student has Mastered this annual goal.

COMMENTS:

MP1:	
MP2:	
MP3:	
MP4:	

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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name Date 06/25/12 Page 33 of 49
 Student ID Number Area of Need Measurement - Equivalent Liquid Measurements

25 MEASURABLE ANNUAL GOAL:

By June 2013, will identify equivalent measurements between units within the U S Customary system (cups, pints, quarts, and gallons) with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)								
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____						
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____						
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____						
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports							
Date of Progress Report								
Progress Code								

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. ES - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. IP -The student has demonstrated Insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. NI -The student has Not been provided Instruction on this goal. M -The student has Mastered this annual goal.

COMMENTS:

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MP2:
MP3:
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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name Date 06/25/12 Page 34 of 49
 Student ID Number Area of Need Measurement - Equivalent Length Measurements

26 MEASURABLE ANNUAL GOAL:

By June 2013, will identify equivalent measurements between units within the U S Customary system (inches and feet; feet and yards; inches and yards; yards and miles) and between units within the metric system (millimeters and centimeters; centimeters and meters; and millimeters and meters) with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)							
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
Progress Code							

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. **ES** - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. **IP** -The student has demonstrated Insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. **NI** -The student has Not been provided Instruction on this goal. **M** -The student has Mastered this annual goal.

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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name _____ Date 06/25/12 Page 35 of 49
 Student ID Number _____ Area of Need Measurement - Equivalent Weight Measurements

27 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will identify equivalent measurements between units within the U S Customary system (ounces, pounds, and tons) and between units within the metric system (grams and kilograms) with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)							
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
Progress Code							

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. **ES** - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. **IP** -The student has demonstrated Insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. **NI** -The student has Not been provided Instruction on this goal. **M** -The student has Mastered this annual goal.

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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name _____ Date 06/25/12 Page 36 of 49
 Student ID Number _____ Area of Need Patterns

28 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will recognize, create, and extend numerical and geometric patterns using tables, symbols, or words with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)							
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
Progress Code							

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. **ES** - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. **IP** -The student has demonstrated Insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. **NI** -The student has Not been provided Instruction on this goal. **M** -The student has Mastered this annual goal.

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INDIVIDUALIZED EDUCATION PROGRAM (IEP) MEASURABLE ANNUAL GOALS, PROGRESS REPORT

Student Name _____ Date 06/25/12 Page 37 of 49
 Student ID Number _____ Area of Need Algebra

29 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will write an equation to represent equivalent mathematical relationships with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)							
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____					
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____					
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____					
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports						
Date of Progress Report							
Progress Code							

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. **ES** - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. **IP** -The student has demonstrated Insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. **NI** -The student has Not been provided instruction on this goal. **M** -The student has Mastered this annual goal.

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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name _____ Date 06/25/12 Page 38 of 49
Student ID Number _____ Area of Need Associative Property - Addition and Multiplication

30 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will investigate and describe the associative property for addition and multiplication with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)								
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____						
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____						
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____						
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports							
Date of Progress Report								
Progress Code								

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. **ES** - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. **IP** -The student has demonstrated Insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. **NI** -The student has Not been provided Instruction on this goal. **M** -The student has Mastered this annual goal.

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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name _____ Date 06/25/12 Page 39 of 49
 Student ID Number _____ Area of Need Probability

31 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will represent probability as a number between 0 and 1 (e.g. impossible/0, equally likely/ 1/2, and certain/ 1) with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)								
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____						
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____						
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____						
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports							
Date of Progress Report								
Progress Code								

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MP2:
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**INDIVIDUALIZED EDUCATION PROGRAM (IEP)
MEASURABLE ANNUAL GOALS, PROGRESS REPORT**

Student Name _____ Date 06/25/12 Page 40 of 49
 Student ID Number _____ Area of Need Graphs

32 MEASURABLE ANNUAL GOAL:

By June 2013, _____ will collect, organize, display, and interpret data from a variety of graphs with 80% accuracy on three consecutive trials.

How will progress toward this annual goal be measured? (check all that apply)									
<input checked="" type="checkbox"/> Classroom Participation	<input type="checkbox"/> Observation	<input type="checkbox"/> Criterion-referenced test: _____							
<input type="checkbox"/> Checklist	<input type="checkbox"/> Special Projects	<input type="checkbox"/> Norm-referenced: _____							
<input checked="" type="checkbox"/> Class work	<input checked="" type="checkbox"/> Tests and Quizzes	<input type="checkbox"/> Other: _____							
<input type="checkbox"/> Homework	<input type="checkbox"/> Written Reports								
Date of Progress Report									
Progress Code									

SP -The student is making Sufficient Progress to achieve this annual goal within the duration of this IEP. **ES** - The student demonstrates Emerging Skill but may not achieve this goal within the duration of this IEP. **IP** -The student has demonstrated Insufficient Progress to meet this annual goal and may not achieve this goal within the duration of this IEP. **NI** -The student has Not been provided Instruction on this goal. **M** -The student has Mastered this annual goal.

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Individualized Education Program (IEP)

ACCOMMODATIONS/MODIFICATIONS

Student's Name: Date: 06/25/12 Grade: 04

This student will be provided access to general education classes, special education classes, other school services and activities including nonacademic activities and extracurricular activities, and education related settings:

- with no accommodations/modifications
 with the following accommodations/modifications

Accommodations/modifications provided as part of the instructional and testing/assessment process will allow the student equal opportunity to access the curriculum and demonstrate achievement. Accommodations/modifications also provide access to nonacademic and extracurricular activities and educationally related settings. Accommodations/modifications based solely on the potential to enhance performance beyond providing equal access are inappropriate.

Accommodations may be in, but not limited to, the areas of time, scheduling, setting, presentation and response. Additionally, supports for school personnel may be listed. The impact of any modifications listed should be discussed.

ACCOMMODATIONS/MODIFICATIONS (list, as appropriate)

Accommodation(s)/Modification(s)	Frequency	Instructional Setting	Duration m/d/y to m/d/y
Small group testing	Each school day	Special Education Class	<u>09/04/12</u> to <u>06/13/13</u> to _____
Nonreading tests can be read aloud or by online audio	Each school day	Special Education Class	<u>09/04/12</u> to <u>06/13/13</u> to _____
Make sure understands directions. Ask her to repeat the directions to check for understanding	Each school day	General or Special Education Class	<u>09/04/12</u> to <u>06/13/13</u> to _____
Preferential seating and line placement	Each school day	General or Special Education Class	<u>09/04/12</u> to <u>06/13/13</u> to _____
Present materials on right side and allow extra time to visually scan her surroundings	Each school day	General or Special Education Class	<u>09/04/12</u> to <u>06/13/13</u> to _____
Adult supervision at all times when not in general or special education classroom	Each school day	General or Special Education Class	<u>09/04/12</u> to <u>06/13/13</u> to _____
Reminders to use her left hand	Each school day	General or Special Education Class	<u>09/04/12</u> to <u>06/13/13</u> to _____
Provide copies of notes and homework assignments in a minimum of 12 point font	Each school day	General or Special Education Class	<u>09/04/12</u> to <u>06/13/13</u> to _____
Assistance with cutting tasks	Each school day	General or Special Education Class	<u>09/04/12</u> to <u>06/13/13</u> to _____
Breaks during lengthy assignments	Each school day	General or Special Education Class	<u>09/04/12</u> to <u>06/13/13</u> to _____
Extended time to complete assignments - up to an hour	Each school day	General or Special Education Class	<u>09/04/12</u> to <u>06/13/13</u> to _____
Monitor on-task behavior. Provide visual, verbal, and physical cues to stay on task.	Each school day	General or Special Education Class	<u>09/04/12</u> to <u>06/13/13</u> to _____

Individualized Education Program (IEP)

ACCOMMODATIONS/MODIFICATIONS

Student's Name: Date: 06/25/12 Grade: 04

This student will be provided access to general education classes, special education classes, other school services and activities including nonacademic activities and extracurricular activities, and education related settings:

- with no accommodations/modifications
 with the following accommodations/modifications

Accommodations/modifications provided as part of the instructional and testing/assessment process will allow the student equal opportunity to access the curriculum and demonstrate achievement. Accommodations/modifications also provide access to nonacademic and extracurricular activities and educationally related settings. Accommodations/modifications based solely on the potential to enhance performance beyond providing equal access are inappropriate.

Accommodations may be in, but not limited to, the areas of time, scheduling, setting, presentation and response. Additionally, supports for school personnel may be listed. The impact of any modifications listed should be discussed.

ACCOMMODATIONS/MODIFICATIONS (list, as appropriate)

Accommodation(s)/Modification(s)	Frequency	Instructional Setting	Duration m/d/y to m/d/y
Adapted physical education consult	40 minutes per month	Physical Education Classroom	<u>09/04/12</u> to <u>06/13/13</u> to _____
Math aids/manipulatives	Each school day	General or Resource classroom	<u>09/04/12</u> to <u>06/13/13</u> to _____
Assistance with lunch tray and/or other objects that require two hands	Each school day	General or Resource classroom	<u>09/04/12</u> to <u>06/13/13</u> to _____
Use of a wheelchair(provided by) during field trips when lengthy walking is required	On field trips	School setting	<u>09/04/12</u> to <u>06/13/13</u> to _____
Occupational therapy consult	30 minutes per month	General or Resource classroom	<u>09/04/12</u> to <u>06/13/13</u> to _____
Use of elevator to go upstairs	Each school day	School setting	<u>09/04/12</u> to <u>06/13/13</u> to _____
Modify assignments to reduce amount of writing that is required.	Each school day	General or Resource classroom	<u>09/04/12</u> to <u>06/13/13</u> to _____
Use of Insert/Audio recording in Word for assignments that require a lengthy written response	Each school day	General or Resource classroom	<u>09/04/12</u> to <u>06/13/13</u> to _____
			to _____ to _____
			to _____ to _____
			to _____ to _____
			to _____ to _____

Individualized Education Program (IEP)

PARTICIPATION IN THE STATE ACCOUNTABILITY/ASSESSMENT SYSTEM

Student's Name: Date: 06/25/12 Grade: 04

This student's participation in state or division-wide assessments must be considered and discussed annually. During the duration of this IEP:

Will the student be at a grade level for which the student is eligible to participate in a state or division-wide assessment? <i>If yes, continue to next question.</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Based on the Present Level of Academic Achievement and Functional Performance, is this student being considered for participation in the Virginia Alternate Assessment Program (VAAP), which is based on Aligned Standards of Learning? <i>If yes, complete the "VAAP Participation Criteria"</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the student meet the VAAP participation criteria? <i>If yes, refer to the Aligned Standards of Learning for development of annual goals and short-term objectives or benchmarks.</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Based on the Present Level of Academic Achievement and Functional Performance, is this student being considered for participation in the Virginia Grade Level Alternative (VGLA) or participation in the Virginia Modified Achievement Standards Test? <i>If yes, complete the "VGLA Participation Criteria" or the "VMAST Participation Criteria" for each content considered.</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the student meet the "VGLA participation criteria" or the "VMAST Participation Criteria"? <i>If yes, determine for specific content area.</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

If Yes to any of the above, check the assessment(s) considered and attach the assessment page(s), which will document the assessments and decisions made about participation and any needed accommodations and/or modifications.

State Assessments:

- SOL Assessments and retake (SOL) Reading Math Science History/Social Science Writing
- Virginia Grade Level Alternative* (VGLA) Reading Science History/Social Science Writing
- Virginia Alternate Assessment Program** (VAAP)
- Other State Approved Substitute(s): _____
- Virginia Modified Achievement Standards Test* (VMAST) Math Reading

* Refer to Procedures for Determining Participation in the Assessment Component of Virginia's Accountability System and the Procedural Manuals for VGLA or VMAST

**Refer to Virginia Alternate Assessment Program (VAAP) Participation Criteria and Procedural Manual.

EXPLANATION FOR NON-PARTICIPATION AND HOW THE STUDENT WILL BE ASSESSED

If no is checked for any SOL Test and/or division-wide assessment, explain in the space below why the student will not participate in this test, the impact relative to promotion or graduation, how the student will be assessed in these areas, and the particular alternate or alternative assessment selected is appropriate. Refer to the VDOE's Procedures for Participation of Students with Disabilities in Virginia's Accountability System for guidance.

SOL TESTS AND ACCOMMODATIONS

Date: 06/25/12

Page 44 of 49

Student Name:

Test Participation (check box)	Current Year Accommodation No.'s	Projected Next Year Accommodation No.'s	SPECIAL TEST ACCOMMODATIONS	
<input type="checkbox"/> Grade 3 Math			1	Flexible schedule: 1A <input checked="" type="checkbox"/> supervised breaks 1B <input type="checkbox"/> multiple sessions (not available online) Online: Breaks during test within one school day
<input type="checkbox"/> Grade 3 Reading			2	Group Size
<input type="checkbox"/> Grade 3 History			3	Environmental modifications: special lighting, noise buffers, study carrel, etc. (Specify)
<input type="checkbox"/> Grade 3 Science			4	Visual aids: 4a <input type="checkbox"/> magnifier 4b <input type="checkbox"/> templates to show 1 item at a time Online: 4c <input type="checkbox"/> large monitor 4d <input type="checkbox"/> screen magnifier
<input type="checkbox"/> Grade 4 Math			5	Amplification equipment: 5A <input type="checkbox"/> hearing aid 5B <input type="checkbox"/> auditory trainer
<input type="checkbox"/> Grade 4 Reading			6	Large-Print paper test *
<input checked="" type="checkbox"/> Grade 4 VA Studies			7	Assistance with directions (simplify or clarify directions)
<input checked="" type="checkbox"/> Grade 5 Math	1A 2 19		8	Increased size of answer circles (enlarge copy of answer document)
<input checked="" type="checkbox"/> Grade 5 Reading	1A 2		9	Braille test / Braille answer document *
<input checked="" type="checkbox"/> Grade 5 Science	1A 2 11A		10	Reading in English of test items (except for reading test)
<input checked="" type="checkbox"/> Grade 5 Writing	1A 2		11	Audio version of test items (except for reading test) 11A <input checked="" type="checkbox"/> Online Audio (NA for writing) 11B <input type="checkbox"/> Paper Audio (cassette tape)
<input type="checkbox"/> Grade 5 History (if given at district)			12	Interpreting / signing / transliteration except for Reading test (must meet VDOE criteria)
<input type="checkbox"/> Grade 6 Math			13	Communication board / pictorial representation
<input type="checkbox"/> Grade 6 Reading			14	Reading test items in English on the Reading test (must meet VDOE criteria)
<input type="checkbox"/> Grade 6 U.S. History			15	Audio Versions of the reading test (must meet VDOE criteria) 15A <input type="checkbox"/> Online Audio (NA for writing) 15B <input type="checkbox"/> Paper Audio (cassette tape)
<input type="checkbox"/> Grade 7 Math			16	Interpreting / signing / transliteration of the Reading test (must meet VDOE criteria)
<input type="checkbox"/> Grade 7 Reading			17	Paper bilingual dictionary (LEP student, only)
<input type="checkbox"/> Grade 7 U.S. History			18	18A <input type="checkbox"/> Mark in booklet (must have documented need for paper per VDOE guidelines) 18B <input type="checkbox"/> Respond verbally, points, indicates a response (requires individual testing)
<input type="checkbox"/> Grade 7 Civics & Econ (if given at district)			19	Math aids (must meet VDOE criteria)
<input type="checkbox"/> Grade 8 Math			20	Large diameter pencil, special pencil, pencil grip
<input type="checkbox"/> Grade 8 Reading			21	21A <input type="checkbox"/> Respond by word processor, typewriter, Braille (writing short paper) 21B <input type="checkbox"/> Respond using Word Prediction Software (writing short paper)
<input type="checkbox"/> Grade 8 Civics & Econ			22	Augmentative communication device
<input type="checkbox"/> Grade 8 Science			23	Spelling aids: spell checker, spelling dictionary 23a <input type="checkbox"/> Writing short paper 23b <input type="checkbox"/> Other (specify)
<input type="checkbox"/> Grade 8 Writing			24	Tape recorder (pre-writing for writing short paper, only)
<input type="checkbox"/> EOC English: Reading			25	Dictation in English to a scribe (writing short paper, only)
<input type="checkbox"/> EOC English: Writing			26	Calculator / math tables on a non-calculator portion of Math 3-7 (must meet VDOE criteria)
<input type="checkbox"/> EOC Algebra I			28	28A <input type="checkbox"/> Calculator w. additional functions on math 3-8 (must meet VDOE criteria) 28B <input type="checkbox"/> Calculator w. additional functions on science 8, EOC science (must meet VDOE criteria)
<input type="checkbox"/> EOC Geometry			A	Plain English math 3-8, Algebra I
<input type="checkbox"/> EOC Algebra II			yy	Other:
<input type="checkbox"/> EOC VA /US History				
<input type="checkbox"/> EOC World History I				
<input type="checkbox"/> EOC World History II				
<input type="checkbox"/> EOC World Geography				
<input type="checkbox"/> EOC Biology				
<input type="checkbox"/> EOC Earth Science				
<input type="checkbox"/> EOC Chemistry				
<input type="checkbox"/> Other				

Accommodations should be those the student qualifies for and uses routinely during classroom instruction and assessments as identified in the IEP / 504 plan. An accommodation based solely on its potential to enhance performance beyond providing equal opportunity to perform is inappropriate. The IEP team cannot override allowable accommodations. Special Forms: * Starred accommodations require special forms for paper tests. These are ordered in early January for spring testing. End-of-Course Tests: These tests are administered online. The use of a paper test format for these tests requires a documented need for paper.

Individualized Education Program (IEP)

Student's Name: Date: 06/25/12 Grade: 04

Least Restrictive Environment (LRE)

When discussing the least restrictive environment and placement options, the following must be considered:

- To the maximum extent appropriate, the student is educated with children without disabilities.
- Special classes, separate schooling or other removal of the student from the regular educational environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.
- The student's placement should be as close as possible to the child's home and unless the IEP of the student with a disability requires some other arrangement, the student is educated in the school that he/she would attend if he/she did not have a disability.
- In selecting the LRE, consideration is given to any potential harmful effect on student or on the quality of services he/she needs.
- The student with a disability shall be served in a program with age-appropriate peers unless it can be shown that for a particular student with a disability, the alternative placement is appropriate as documented by the IEP.

Free Appropriate Public Education (FAPE)

When discussing FAPE for this student, it is important for the IEP team to remember that FAPE may include, as appropriate:

- Educational Programs and Services
- Proper Functioning of Hearing Aids
- Assistive Technology
- Transportation
- Nonacademic and Extracurricular Services and Activities
- Physical Education
- Extended School Year Services
- Length of School Day

SERVICES: Identify the service(s), including frequency, duration and location that will be provided to or on behalf of student in order for student to receive a free appropriate public education. These services are the special education services and as necessary, the related services, supplementary aids and services based on peer-reviewed research to the extent practicable, assistive technology, supports for personnel*, accommodations and/or modifications* and extended school year services* the student will receive that will address area(s) of need as identified by the IEP team. Address any needed transportation and physical education services including accommodations and/or modifications. ** IEP teams are required to identify the specific school site (public or private) when the parent expresses concerns about the location of the services or refuses the proposed site. A listing of more than one anticipated location is permissible if the parents do not indicate that they will object to any particular school or state that the team should identify a single school.

Service(s)	Frequency	Instructional Setting	Duration m/d/y to m/d/y
Direct instruction in language arts	90 minutes each school day	Resource classroom	<u>09/04/12</u> to <u>06/13/13</u> _____ to _____
Direct instruction in math	70 minutes each school day	Resource classroom	<u>09/04/12</u> to <u>06/13/13</u> _____ to _____
Collaborative instruction for science/social studies	45 minutes each school day	Gen Ed classroom	<u>09/04/12</u> to <u>06/13/13</u> _____ to _____
			_____ to _____ _____ to _____
			_____ to _____ _____ to _____
			_____ to _____ _____ to _____
			_____ to _____ _____ to _____

Individualized Education Program (IEP)

Student's Name: _____ Date: 06/25/12 Grade: 04

Extended School Year Services:

- The IEP team determined that the student needs ESY services. *
- The IEP team determined that the student does not need ESY services.

Describe: _____ does not appear to be at a critical breaking point or does not show significant regression.

*These services are listed on the "Services" page and/or the "Extended School Year Services" page, if required.

Transportation: Regular Special**

**Please complete Special Education Transportation (SPED T) form and submit to Lead Teacher Specialists. Provide parents with a copy of the HCPS Transportation Guide for Parents.

Is the student's length of school day less than that of non-disabled peers? Yes No If yes, explain why:

PLACEMENT

No single model for the delivery of services to any population or category of children with disabilities is acceptable for meeting the requirement for a continuum of alternative placements. All placement decisions shall be based on the individual needs of each student. The team may consider placement options in conjunction with discussing any needed supplementary aids and services, accommodations/modifications, assistive technology, and supports for school personnel. In considering the placement continuum options, check those the team discussed. Then, describe the placement selected in the **PLACEMENT DECISION** section below. Determination of the Least Restrictive Environment (LRE) and placement may be one or a combination of options along the continuum.

Placement Continuum Options Considered (check all that have been considered):

Services provided in:

- General education class(es)
- Special class(es)
- Special education day school
- State special education program / school
- Residential facility
- Home-based
- Hospital
- Other (describe): _____

Placement Decision: General and special education classrooms

Based upon identified services and the consideration of least restrictive environment (LRE) and placement continuum options, describe in the space below the placement. Additionally, summarize the discussions and decision around LRE and placement. This must include an explanation of why the student **will not** be participating with students without disabilities in the general education class(es), programs, and activities. Attach additional pages as needed.

Explanation of Placement Decision:

_____ is a student with a specific learning disability, other health impairment, and an orthopedic impairment. She displayed average verbal ability and nonverbal reasoning. Processing deficits in visual scanning, processing speed, rapid naming, and auditory discrimination impact her academic achievement in math, reading, and academic fluency. She also has motor deficits and fatigue that result from a perinatal stroke and seizure disorder. She requires these levels of service and accommodations to access the grade level curriculum and to master her goals.

Excused Team Members

Student's Name: ID #: DOB: 04/29/02

Attending School: Grade: 04

Home School:

Parent/Guardian/Surrogate Name:

Address/City/State/Zip:

Home #: Work #:

There is a meeting in reference to your child to be held on (date) 06/25/12 at (time) 3:00
 at (place)

The following team members have requested excusal from the meeting:

Name	Title	Reason
<input type="text"/>	Occupational Therapist	Out-of-town
<input type="text"/>	Adaptive PE Teacher	Prior commitment
<input type="text"/>		
<input type="text"/>		
<input type="text"/>		
<input type="text"/>		
<input type="text"/>		

If the member's area of the curriculum or related service will not be discussed, the member may be excused without submitting comments in writing. If the members area of curriculum or related service will be discussed, they may be excused but must provide comments in writing and submit this to the team in lieu of their appearance.

We agree to excuse the above team members from the meeting.

		<u>6-25-12</u>
		Date
		<u>6-25-12</u>
		Date

PRIOR NOTICE

Written notice must be given to the parent or parents of a child with disability within a reasonable time before HCPS: **proposes** to initiate or change the identification, evaluation or educational placement (including graduation with a standard or advanced studies diploma) of the child, or the provision of a free appropriate public education for the child; or **refuses** to initiate or change the identification, evaluation, or educational placement of the child, or the provisions of a free appropriate public education for the child.

Date: 06/25/12 Student's Name: Date of Birth: School:

Describe each evaluation procedure, test, record, or report the school system used as a basis for the proposed or refused action, using results of most recent evaluations, current classroom performance, teacher, therapist, and parent input:

Assessments used for most recent eligibility on June 12, 2012, assistive technology consideration update, teacher and special education teacher reports, and parent input.

Describe the action proposed by HCPS:

HCPS proposes to implement an IEP for to include direct special education instruction in language arts and math and collaborative special education instruction in science and social studies during her 5th grade year in 2012-2013. She also will receive consultative services with the occupational therapist and the adaptive physical education teacher, as well as other accommodations due to her orthopedic impairment (visual field deficits and cerebral palsy) and other health impairment (epilepsy).

Explain HCPS's proposal:

is a student with a specific learning disability, an other health impairment, and an orthopedic impairment. She requires these services and accommodations in order to progress on her IEP goals, access the regular education curriculum, and receive a free, appropriate public education.

Description of any other options that the Individualized Education Program (IEP) team considered:

asked about possible functional daily living skills that might require OT goals and services, particularly things such as tying shoes and dressing out for Physical Education in middle school.

Description of reasons why those choices were rejected:

Prior to this IEP meeting it was agreed that the OT and Adaptive PE teacher would be excused from this particular meeting. The IEP meeting which will be scheduled for transition to middle school in spring 2013 will include these staff members. Addition of OT goals for the current IEP may be discussed in the fall if needed.

Description of actions refused:

Nothing refused.

Explanation of HCPS's refusal:

None

Description of any other factors that are relevant to HCPS's proposal or refusal:

If this notice is not the initial referral for evaluation, document when the parent was provided a copy of the procedural safeguards and how a copy may be obtained, if the parent requests an additional copy: 6/12/2012

Please Note: Parent and adult student rights are explained in the Procedural Safeguards. If you, the parent(s) and adult student, need another copy of the Procedural Safeguards or need assistance in understanding this information please contact: Parent Resource Center at 365-4596 or e-mail hanoverprc@hcps.us

ELEMENTARY INDIVIDUALIZED EDUCATION PROGRAM

PRIOR NOTICE AND PARENT CONSENT

Student Name Date 06/25/12 Page 48 of 48

Student ID Number

PRIOR NOTICE

The school division proposes to implement this IEP. This proposed IEP will allow the student to receive a free appropriate public education in the least restrictive environment. This decision is based upon a review of current records, current assessments and the student's performance as documented in the Present Level of Academic Achievement and Functional Performance. Other options considered, if any, and the reason(s) for rejection is attached, or can be found in the Placement Decision section of this IEP. Additionally, other factors, if any that are relevant to this proposal are attached. Parent and adult student rights are explained in the Procedural Safeguards. If you, the parent(s) and adult student, need another copy of the Procedural Safeguards or need assistance in understanding this information please contact

at or e-mail or
 at or e-mail

Parent(s) initials here indicate that the parent(s) has read the above prior notice and attachments, if any, before giving permission to implement this IEP.

PARENT/ADULT STUDENT CONSENT: Indicate your response by checking the appropriate space and sign below.

- I give permission to implement this IEP.
- I do not give permission to implement this IEP.

_____ 6-25-12
Date