Side-by-Side Comparison of the Current Connecticut IEP and the New IEP

For New IEPs Created After July 1, 2022

CSDE
CONNECTICUT STATE
DEPARTMENT OF EDUCATION

Connecticut State Department of Education | April 2022

Introduction

In the summer of 2018, the Connecticut State Department of Education's Bureau of Special Education (BSE) initiated a process to revise the individualized education program (IEP) document used to record supports and services for students receiving special education and related services in Connecticut.

In partnership with the IEP Revision Stakeholder Group and input from education partners across the state, the BSE created a new IEP document that is designed to be easier for both educators and parents to use and understand.

Over the past few years, the work of improving the IEP document has been complemented by the development of a new comprehensive professional learning series on developing high quality IEPs, as well as a new Connecticut Special Education Data System (CT-SEDS), which will be used to generate IEPs starting July 1, 2022.
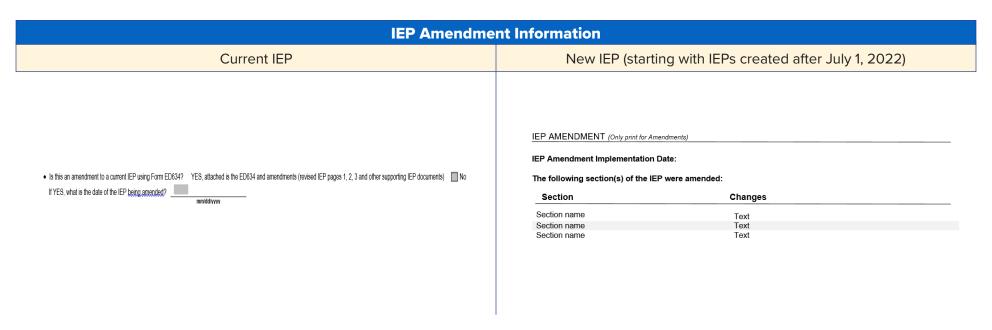
In preparation for the transition to the new IEP document and the CT-SEDS platform, this resource was developed to provide a high-level overview of the differences between Connecticut's current and new IEP document.

Student Information

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
PLANNING AND PLACEMENT TEAM (PPT) COVER PAGE Current Enrolled School: __ Age: __ Current Grade: __ H.S. Credits: __ Grade Next Yr: __ Gender: ☐ Female ☐ Male Current Home School: _____ School Next Year: __ Home School Next Year: __ SASID #: _____ If your school district does not have its own high school, is the student attending his/her designated high school? Case Manager: _____ ☐ Yes ☐ No ☐ NA Student Address: _____ Student Instructional Lang: ☐ English ☐ Other: (specify) __ Parent/Guardian (Name): _____ Home Dominant Lang: ☐ English ☐ Other: (specify) __ Parent/Guardian (Address): ☐ Same _____ Student Home Phone: __ Parent Home Phone: __ Surrogate Name: _____ Parent Work Phone: __ Misc. Phone: __ Surrogate Address: _____ Most Recent Eval. Date: __ Next Reevaluation Date: __ Most Recent Annual Review Date: __ Next Annual Review Date: __ **Reason for Meeting:** ☐ Review Referral ☐ Plan Eval/Reeval ☐ Review Eval/Reeval ☐ Determine Eligibility ☐ Determine Continuing Eligibility ☐ Develop IEP ☐ Review or Revise IEP ☐ Conduct Annual Review ☐ Transition Planning ☐ Manifestation Determination ☐ Other (specify) __ **Primary Disability:** ☐ Autism ☐ Emotional Disturbance ☐ Multiple Disabilities ☐ Orthopedic Impairment ☐ Speech or Language Impaired ☐ Other Health Impairment ☐ Deaf – Blindness ☐ Hearing Impairment (Deaf or Hard of Hearing) ☐ Specific Learning Disabilities ☐ Traumatic Brain Injury ☐ OHI – ADD/ADHD ☐ Developmental Delay (ages 3-5 only) ☐ Intellectual Disability ☐ Specific Learning Disabilities/Dyslexia ☐ Visual Impairment ☐ To be determined	**Student Name:** **Meeting Date:** **SASID:** **Case Manager** **Date of Birth:** **Parent/Guardian Name:** **Current Grade:** **Primary Disability:** **Current Enrolled School:** **School Next Year:** **Most Recent Evaluation Date:** **Next Reevaluation Date:** **Most Recent Annual Review Date:** **Next Annual Review Date:** **Surrogate Parent:** *(if applicable)* --- **Reason for Meeting:**

Changes: *Some data will still be collected and stored in CT-SEDS but not printed on the IEP document.*

IEP Amendment Information

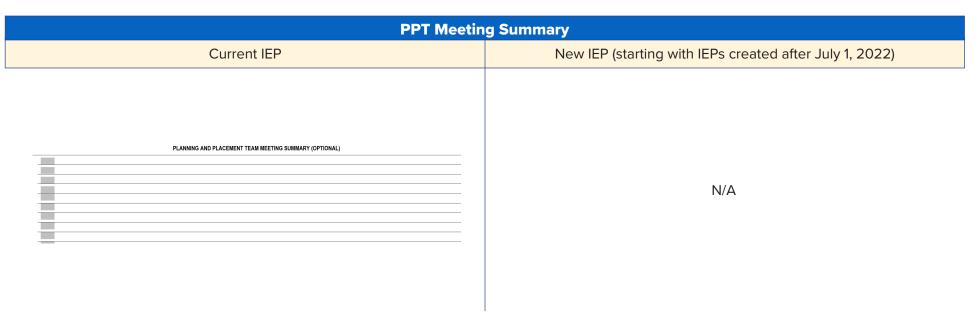| Current IEP	New IEP (starting with IEPs created after July 1, 2022)

• Is this an amendment to a current IEP using Form ED634? YES, attached is the ED634 and amendments (revised IEP pages 1, 2, 3 and other supporting IEP documents) ☐ No
 	
  If YES, what is the date of the IEP being amended? __
  mm/dd/yyyy
	IEP AMENDMENT *(Only print for Amendments)*
	
	IEP Amendment Implementation Date:
	
	The following section(s) of the IEP were amended:
	
	| Section
		Changes

Section name	Text
Section name	Text
Section name	Text	

Changes: *The IEP Amendment section will contain more details on what revisions were made.*

PPT Members

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Team Member Present (required)

Admin/Designee:	Spec. Educ. Teacher:	OT:
Parent/Guardian:	School Psych:	PT:
Parent/Guardian:	Social Work:	Agency:
Surrogate Parent:	Speech/Lang:	Other: (specify)
Student:	Guidance:	Other: (specify)
Student's Reg. Ed. Teacher:	Nurse:	Other: (specify)

[1] Address of student's primary residence. [2] May choose more than one

PLANNING AND PLACEMENT TEAM (PPT) MEMBERS PRESENT

Name	Role
Student Name	Student
Parent/Guardian Name	Parent/Guardian
Name 1	Role 1
Name 2	Role 2
Name 3	Role 3

(Additional rows will be added as needed)

Changes: *Minor formatting*

PPT Recommendations

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

LIST OF PPT RECOMMENDATIONS

Planning and Placement Team Recommendations

The PPT recommends the following:

Recommendation 1
Recommendation 2
Recommendation 3 *(Additional rows will be added as needed)*

Changes: *Minor formatting*

PPT Meeting Summary	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)
PLANNING AND PLACEMENT TEAM MEETING SUMMARY (OPTIONAL)	N/A

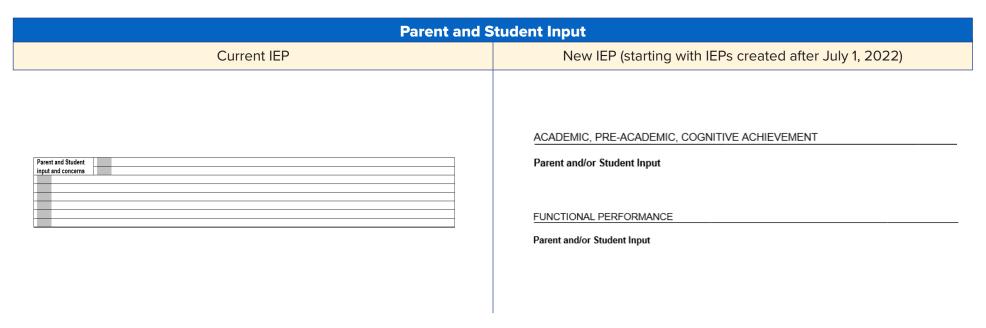**Changes:** *The optional PPT Meeting Summary is not part of the new IEP but will be available as a separate document.*

Prior Written Notice	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)
PRIOR WRITTEN NOTICE	N/A

Changes: *Prior Written Notice will be a separate document and not part of the new IEP; formatting is significantly different.*

Parent and Student Input	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)
Parent and Student input and concerns	ACADEMIC, PRE-ACADEMIC, COGNITIVE ACHIEVEMENT **Parent and/or Student Input** FUNCTIONAL PERFORMANCE **Parent and/or Student Input**

Changes: Input will be collected separately for (1) academic achievement and (2) functional performance.

Present Levels of Performance and Impact Statement	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)
Area (briefly describe current performance) / Strengths (include data as appropriate) / Concerns/Needs (requiring specialized instruction) / Impact of student's disability on involvement and progress in the general education curriculum or appropriate preschool activities. Academic/Cognitive Language Arts: ☐ Age Appropriate	GOAL AREA: *(E.g., Reading)* **Present Level of Performance** **Strengths** **Concerns/Needs** **Impact of student's disability on involvement and progress in the general education curriculum or appropriate preschool activities**

Changes: Present Levels information will be collected for each Goal Area and be printed above the annual goals related to the goal area.

Transition Planning — Student Preferences	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)
Summarize student preferences/interests as they relate to planning for transition services: _____	**Summary of the student's preferences and interests** *Text appears here*

Changes: Minor formatting

Transition Planning — Transition Assessments	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)
Age Appropriate Transition Assessment(s) performed: (Specify assessment(s) and dates administered) _____	**Transition Assessment** — **Date** *Example 1* — *Date* *Example 2* — *Date* **Assessment Data Summary** *Enter summary information here* **History of transition assessments** **Transition Assessment** — **Date** *Example 1* — *Date* *Example 2* — *Date* *Example 3* — *Date*

Changes: A list of previous transition assessments will be included.

Transition Planning — PSOGS

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
Post-School Outcome Goal Statement(s) and Transition Services recommended in this IEP a) **Post-School Outcome Goal Statement - Postsecondary Education or Training:** _____ ☐ Annual goal(s) and related objectives regarding Postsecondary Education or Training have been developed and are included in this IEP b) **Post-School Outcome Goal Statement – Employment:** _____ ☐ Annual goal(s) and related objectives regarding Employment have been developed and are included in this IEP c) **Post-School Outcome Goal Statement - Independent Living Skills (if appropriate):** _____ ☐ Annual goals and related objectives regarding Independent Living have been developed and are included in this IEP (may include Community Participation)	Postsecondary Outcome Goal Statements **Postsecondary Education or Training** **Employment** **Independent Living Skills**

Changes: Minor formatting

Transition Planning — Course of Study

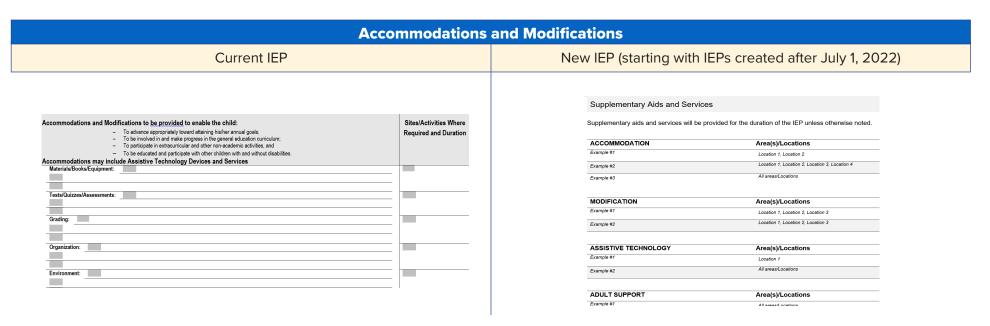| Current IEP	New IEP (starting with IEPs created after July 1, 2022)
☐ **The course of study** needed to assist the child in reaching the transition goals and related objectives **will include** (including general education activities): ☐ **Student has completed academic requirements**; no academic course of study is required – student's IEP includes **only** transition goals and services.	**Course of Study** **Has the student completed academic requirements?** ☐ Yes ☑ No **Course of Study:** Description of coursework and/or activities needed to assist the student in achieving postsecondary goals, from the student's current year to the anticipated exit year **Anticipated Exit Criteria:** The student will be exited from special education upon:

Changes: Minor formatting

Transfer of Rights

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
	Transfer of Rights At least one year prior to reaching the age of 18, students must be informed of their rights under the IDEA that will transfer at age 18. **Will the student be 17 within one year from today's date?** ☐ Yes ☐ No **Date of supporting documentation** *(Will appear if transfer of rights = No)*

At least one year prior to reaching the age of 18, the student must be informed of her/his rights under IDEA which will transfer at age 18.

☐ NA (Student will not be 17 within one year) ☐ The student has been informed of her/his rights under IDEA which will transfer at age 18 ☐ No IDEA rights will transfer

Changes: Includes the upload of supporting documentation for cases in which parental rights do not transfer.

Annual Goals and Short-term Objectives

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Current IEP form fields:

☐ Academic/Cognitive ☐ Social/Behavioral ☐ Communication ☐ Gross/Fine Motor ☐ Postsecondary Education/Training
☐ Self Help ☐ Employment ☐ Independent Living ☐ Health ☐ Other: (specify)

Enter Dates for Evaluating and Reporting Progress in Boxes Below

☐ Check here if the student is 13 years of age. (Note: Page 6, Transition Planning must be completed if this box is checked)

Measurable Annual Goal* (Linked to Present Levels of Performance) #

Eval. Procedure:
Perf. Criteria:
(%, Trials, etc.)

Report Progress Below (Use Reporting Key)

Short Term Objectives/Benchmarks (Linked to achieving progress towards Annual Goal)

Objective #1

Eval. Procedure:
Perf. Criteria:
(%, Trials, etc.)

Report Progress Below (Use Reporting Key)

Objective #2

Eval. Procedure:
Perf. Criteria:
(%, Trials, etc.)

Report Progress Below (Use Reporting Key)

New IEP:

Annual Goal 1	**Evaluation Method**
Goal Statement #1 for Reading	*Eval Procedure*
Short-term Objectives/Benchmarks	**Progress Monitoring Schedule**
Obj. 1	*Eval Schedule*
Obj. 2	*Eval Schedule*
Obj. 3 (and more, if needed)	*Eval Schedule*
CT Core Standards Aligned to this Goal *(Early Learning Development Standards)*	
Standard 1	
Standard 2	
Related Service(s) necessary to achieve this goal (if any)	
Related Service Name	

Changes: Short-term Objectives will include a schedule for progress monitoring and a "by when" date for the achievement of objectives; Related CT Core Standards (or ELDS) will be included for Academic Goals; Associated related services will be indicated.

Accommodations and Modifications

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Current IEP:

Accommodations and Modifications to be provided to enable the child:
- To advance appropriately toward attaining his/her annual goals;
- To be involved in and make progress in the general education curriculum;
- To participate in extracurricular and other non-academic activities, and
- To be educated and participate with other children with and without disabilities.

Accommodations may include **Assistive Technology Devices and Services**

Materials/Books/Equipment:

Tests/Quizzes/Assessments:

Grading:

Organization:

Environment:

Sites/Activities Where Required and Duration

New IEP:

Supplementary Aids and Services

Supplementary aids and services will be provided for the duration of the IEP unless otherwise noted.

ACCOMMODATION	Area(s)/Locations
Example #1	Location 1, Location 2
Example #2	Location 1, Location 2, Location 3, Location 4
Example #3	All areas/Locations

MODIFICATION	Area(s)/Locations
Example #1	Location 1, Location 2, Location 3
Example #2	Location 1, Location 2, Location 3

ASSISTIVE TECHNOLOGY	Area(s)/Locations
Example #1	Location 1
Example #2	All areas/Locations

ADULT SUPPORT	Area(s)/Locations
Example #1	All areas/Locations

Changes: The Supplementary Aids and Services section will include: Accommodations, Modifications, Assistive Technology, and direct Adult Support. Specific locations/classes will be selected for each.

Supports for Personnel

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Current IEP:

Note: When specifying required supports for personnel to implement this IEP, include the specific supports required, how often they are to be provided (frequency) and for how long (duration)

Frequency and Duration of Supports Required for School Personnel to Implement this IEP include:

New IEP:

Indirect Services

Are supports required for school personnel to implement this IEP?

☐ Yes   ☐ No   *(If Yes, the following will appear)*

Supports required for school personnel to implement this IEP include:

Service	Goal ID	Frequency	Duration	Responsible Staff	Start Date	End Date

Changes: The services that are currently recorded on the bottom of page 8 (e.g., consultation, classroom para) will be documented in the Indirect Services section of the new IEP

Statewide Assessments	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Current IEP:

Check the grade the student will be in when the test is given.

☐ Grade Pre-K ☐ Grade K ☐ Grade 1 ☐ Grade 2 ☐ **Grade 3**
☐ **Grade 4** ☐ **Grade 5** ☐ **Grade 6** ☐ **Grade 7** ☐ **Grade 8**
☐ Grade 9 ☐ Grade 10 ☐ **Grade 11** ☐ Grade 12

Standard Assessments and Alternate Assessments
Smarter Balanced Assessments (**Grades 3-8**), Connecticut SAT (**Grade 11**) and the Connecticut Alternate Assessments (CTAA), include English Language Arts and Mathematics (**Grades 3-8 & 11**). Standard Science Assessment or Alternate Science Assessment required in **Grades 5, 8 and 11**.

Assessment Options: (Select ONE Option)
☐ 1. Smarter Balanced Assessments (Includes Standard Science Assessment – Grades 5 & 8)
☐ 2. CTAA– (Includes Alternate Science Assessment for Grades 5, 8, and 11) ★
☐ 3. Connecticut SAT and Standard Science Assessment (Grade 11)

Administration Options – Accommodations will be provided. (Select One Option):
☐ The student is participating in the Smarter Balanced Assessments & Standard Science Assessment and requires designated supports and/or accommodations*
☐ The student is participating in the Connecticut SAT & Standard Science Assessment and will request accommodations**

New IEP:

The student will participate in the Smarter Balanced Assessment.

Assessment: *Assessment Name*

Participation
With Accommodations

Designated Supports and Accommodation(s)

Example 1

Example 2

The student will participate in the Next Generation Science Standards Assessment.

Assessment: *Assessment Name*

Participation
With Accommodations

Designated Supports and Accommodation(s)

Example 1

The student will participate in the CTAA Assessment.

The student will participate in the CT School Day SAT Assessment

Assessment: *Assessment Name*

Participation
With Accommodations

Designated Supports and Accommodation(s)

Example 1

Changes: Individualized statewide assessment information will be included based on each student's grade, type of assessment, and need for designated supports or accommodations, which for Smarter Balanced will be submitted directly to the testing vendor on behalf of the district.

ELP Assessments	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Current IEP:

English Language Proficiency Assessment

☐ **English Language Proficiency Assessment** required for all English Learners Grades K-12

☐ Student requires designated supports/accommodations on the ELP assessment

New IEP:

ENGLISH LANGUAGE PROFICIENCY (ELP) ASSESSMENT

Has the student been identified as an English Learner?

☐ Yes ☐ No

English Language Proficiency Assessment is required for all English Learners Grades K-12. *(Display if Yes)*

The student will participate in the ELP / Alternate ELP Assessment *(One option will display)*

Participation
Participation level displayed here – with or without accommodations

Designated Supports and Accommodation(s)

Example 1

Changes: *The ELP Assessment information will be required if the student has been identified as an English Learner.*

Districtwide Assessments	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Current IEP:

Districtwide Assessments
(Select all appropriate options.)

☐ **N/A** - No districtwide assessments are scheduled during the term of this IEP.

☐ **Alternate Assessment(s)** ★

Select one of the following options:

☐ **No accommodations will be provided,** *OR*

☐ **Accommodations will be provided as specified on Page 8,** *OR*

☐ **Accommodations will be provided as specified below.**

New IEP:

DISTRICTWIDE ASSESSMENTS

District Assessment participation displayed here

Assessment	Participation
Example #1	Example #1
Example #2	Example #2
Example #3	Example #3

Designated Supports and Accommodations
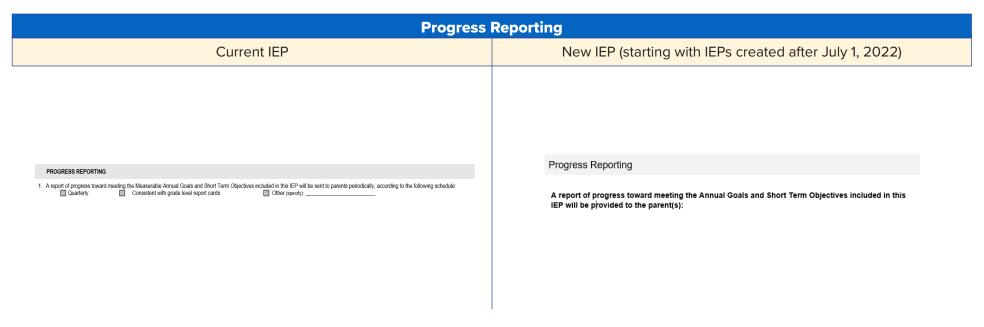
Displayed here, if any

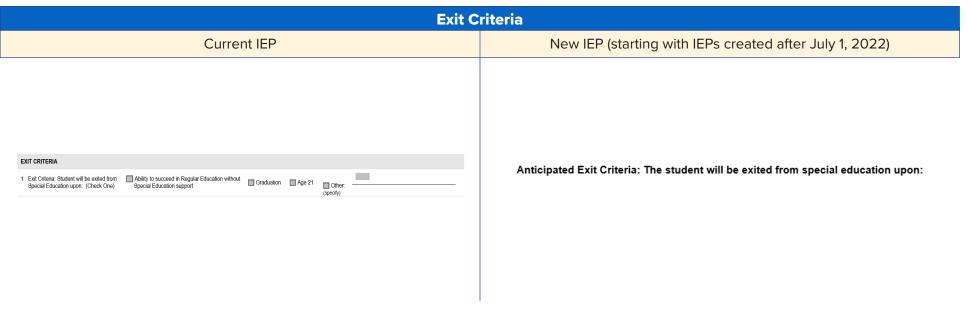**Changes:** *The name of the district assessment(s) will be included.*

Alternate Assessment Eligibility Form and Justification Statement

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
☐ **The *Alternate Assessment Eligibility Form* must be submitted and approved for Statewide Assessments.** The form is recommended for use in determining the need for alternate Districtwide Assessments. Alternate assessments must be specified and a statement provided for each as to why the child cannot participate in the standard assessment and why the particular alternate assessment selected is appropriate for the child.	**Alternate assessments must be specified and a statement provided for each as to why the student cannot participate in the standard assessment and why the particular alternate assessment selected is appropriate for the student.** *Statement displays here*

Changes: *While technically not part of the IEP, the Alternate Eligibility Assessment Form is built into the CT-SEDS process flow with minor formatting changes*

Special Factors Information

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

1. For students whose behavior impedes her/his learning or that of others, the PPT has considered strategies, including positive behavioral interventions and supports to address that behavior, and : ☐ NA ☐ A behavioral intervention plan has been developed. ☐ IEP Goals and Objectives have been developed to address the behavior. ☐ Other (specify): _____
 	
2. For students with limited English proficiency, the PPT has considered the language needs of the student as they relate to the student's IEP and recommended the following: ☐ NA ☐ Recommendation: (specify)
 	
3. For students who are blind/visually impaired (VI): ☐ NA ☐ Instruction in braille or use of braille is being provided, as required. ☐ The PPT has determined, 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 need for instruction in braille or the use of braille), that instruction in braille or the use of braille is not appropriate for this student.
 	
4. For students with print-related disabilities (such as SLD/Dyslexia, blind/VI, physical limitations or organic dysfunction): ☐ NA ☐ The PPT has considered accessible instructional/educational material (AEM) and/or accommodations noted on *page 8 of the IEP*– if so which format/accommodation utilized: ☐ Large Print ☐ Digital Text ☐ Audio ☐ Other (specify):_____.
 	
5. For students who are deaf or hard of hearing: ☐ NA ☐ See attached **required** *Language and Communication Plan* (Form ED638) – The PPT has determined (after considering the student's language and communication needs), opportunities for direct communications with peers and professional personnel in the child'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, and considering whether the student requires assistive technology.
	Special Considerations
	
	Does the student exhibit behaviors that impede learning for self or others?
	☐ No
	☐ Yes (check all that apply)
	  ☐ IEP goal(s) and objectives will be developed to address the behavior.
	  ☐ A behavioral intervention plan based on a functional behavior assessment has been developed.
	  ☐ Other:
	
	Is the student deaf or hard of hearing?
	☐ No
	☐ Yes – Language and Communication Plan is **required**.
	
	Is the student blind or visually impaired?
	☐ No
	☐ Yes
	  ☐ Instruction in braille or use of braille is being provided, as required.
	  ☐ The PPT determined that instruction in braille or the use of braille is not appropriate for this student after an evaluation of the student's skills, needs, and appropriate reading and writing media (including an evaluation of the student's future need for instruction in braille or the use of braille).
	
	Does the student have limited English proficiency? (Student qualifies as an EL)
	☐ No
	☐ Yes – Student's native language is: *(Populate with PSIS native language data).* The PPT considered the language needs of the student as they relate to the student's IEP and recommends the following:
	
	Does the student require accessible educational materials (AEM)?
	☐ No
	☐ Yes – The PPT determined that the student has a print-related disability (e.g., SLD/Dyslexia, blind/VI, physical limitations). See annual goals/objectives and/or supplementary aids and services for details.
	
	Does the student require an alternative mode of communication?
	☐ No
	☐ Yes – The PPT reviewed the communication needs of the student. See annual goals/objectives and/or supplementary aids and services for details.

Changes: *Special Factors Information is included in the Special Considerations section near the beginning of the IEP.*

Progress Reporting

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
PROGRESS REPORTING 1. A report of progress toward meeting the Measurable Annual Goals and Short Term Objectives included in this IEP will be sent to parents periodically, according to the following schedule: ☐ Quarterly ☐ Consistent with grade level report cards ☐ Other (specify): _____	Progress Reporting **A report of progress toward meeting the Annual Goals and Short Term Objectives included in this IEP will be provided to the parent(s):**

Changes: *Minor formatting*

Exit Criteria

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
EXIT CRITERIA 1. Exit Criteria: Student will be exited from Special Education upon: (Check One) ☐ Ability to succeed in Regular Education without Special Education support ☐ Graduation ☐ Age 21 ☐ Other: _____ (specify)	**Anticipated Exit Criteria: The student will be exited from special education upon:**

Changes: *Renamed to Anticipated Exit Criteria*

Information on IEPs and Secondary Transition

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

INFORMATION ON IEPs and SECONDARY TRANSITION

1. Parents, including Surrogate Parents and the student if 18 or older have been provided (☐ electronically or ☐ in hard copy) with relevant information and resources relating to IEPs created by the CSDE (including, but not limited to, information relating to transition resources and services for high school students) immediately upon the formal identification of _any_ child as a child requiring special education and at _each_ PPT meeting thereafter: ☐ _Building a Bridge_ ☐ _Parent's Guide to Special Education_ ☐ _IEP Manual_ ☐ OTHER: _____

2. The _Parent's Transition Bill of Rights_ has been provided to parents of students in sixth through twelfth grade to ensure that the PPT discusses transition services: _Parent's Transition Bill of Rights_: ☐ is available on the school district website; ☐ is enclosed with this document; ☐ was already provided, reviewed and discussed this school year (date) _____

Resources

The following documents were provided to the parent(s) at this meeting on MeetingDate or sent electronically with parental permission:

☐ Procedural Safeguards in Special Education

☐ Parental Notification of the Laws Relating to Physical Restraint and Seclusion in the Public Schools

☐ A Parent's Guide to Special Education

☐ IEP Manual

☐ Building a Bridge

☐ Transition Bill of Rights

☐ Other

Changes: _Included in the Resources section of the new IEP._
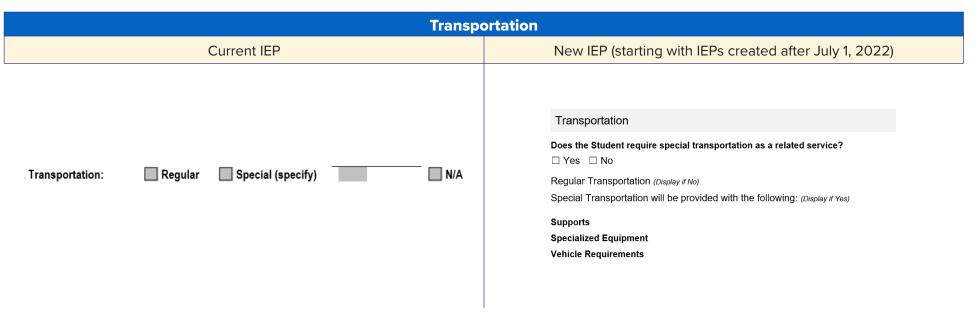_Documents will be made available to parents via the parent portal or can be printed and mailed._

Special Education and Related Services Grids

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

SPECIAL EDUCATION, RELATED SERVICES, AND REGULAR EDUCATION

Special Education Services	Goal(s) #	Frequency	Responsible Staff	Service Implementer	Start Date (mm/dd/yyyy)	End Date (mm/dd/yyyy)	Site*	If needed, description of Instructional Service Delivery (e.g. small group, team taught classes, etc.)
Related Services								
*Instructional Site:	1. Regular Classroom	2. Resource/Related Service Room		3. Self-Contained Classroom		4. Community-Based	5. Other:	

Special Education and Related Services

SPECIAL EDUCATION SERVICES

Service	Goal ID	Frequency	Duration	Responsible Staff	Service Implementer	Start Date	End Date	Site	Instructional Service Delivery

RELATED SERVICES

Service	Goal ID	Frequency	Duration	Responsible Staff	Service Implementer	Start Date	End Date	Site	Instructional Service Delivery

Changes: _Minor formatting with a revised list of instructional sites_

Special Education and Related Services — Extended School Year (ESY)

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

SPECIAL EDUCATION, RELATED SERVICES, AND REGULAR EDUCATION

Special Education Services	Goal(s) #	Frequency	Responsible Staff	Service Implementer	Start Date (mm/dd/yyyy)	End Date (mm/dd/yyyy)	Site*	If needed, description of Instructional Service Delivery (e.g. small group, team taught classes, etc.)
Related Services								
*Instructional Site:	1. Regular Classroom	2. Resource/Related Service Room		3. Self-Contained Classroom		4. Community-Based	5. Other:	

Extended School Year Services: ☐ Not Required ☐ Required: See service delivery grid above or an additional page 11 for services to be provided ☐ Required: Continue to implement current IEP

ESY Services

Are extended school year (ESY) services required for the Student to receive FAPE?

☐ Yes ☐ No *(If Yes, the following will appear)*

ESY SPECIAL EDUCATION SERVICES

Service	Goal ID	Frequency	Duration	Responsible Staff	Service Implementer	Start Date	End Date	Site	Instructional Service Delivery

ESY RELATED SERVICES

Service	Goal ID	Frequency	Duration	Responsible Staff	Service Implementer	Start Date	End Date	Site	Instructional Service Delivery

Changes: If needed, ESY Services will be documented separately.

Transportation

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Transportation: ☐ Regular ☐ Special (specify) _____ ☐ N/A

Transportation

Does the Student require special transportation as a related service?

☐ Yes ☐ No

Regular Transportation *(Display if No)*

Special Transportation will be provided with the following: *(Display if Yes)*

Supports

Specialized Equipment
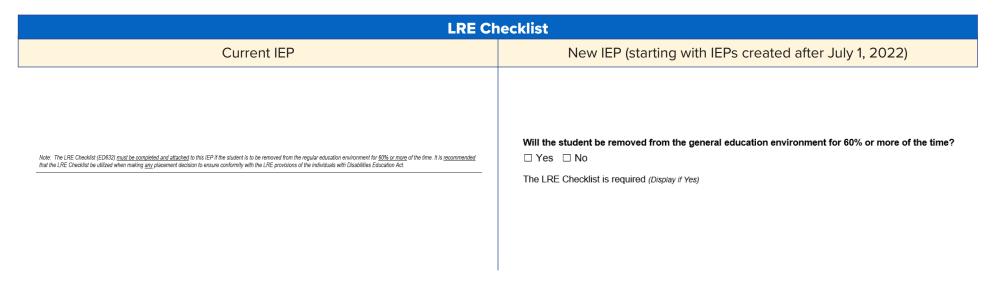
Vehicle Requirements

Changes: Special transportation requirements are separated into three categories.

Special Education Hours and Time with Non-Disabled Peers (TWNDP)

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Current IEP

Length of School Day: (Specify)
Number of Days/Week: (Specify)
Length of School Year: (Specify)

8. Total School Hours/Week: (Specify)	9. Special Education Hours/Week: (Specify)	10. Hours per week the student will spend with children/students who do not have disabilities (time with non-disabled peers):

New IEP

SCHOOL YEAR: 2022-23

Length of School Year	Length of School Day	Total School Hours/Week
XXX Days	X.XX Hours	XX Hours

Start Date	End Date	Special Education Hours/Week	Hours/Week with Non-Disabled Peers	Percentage of Time with Non-Disabled Peer
9/4/22	1/22/23	X.XX	XX	XX %
1/23/23	6/15/23	X.XX	XX	XX %

Changes: More specificity in TWNDP (e.g., a change from Semester 1 to Semester 2) will be provided.
CT-SEDS will also allow for displaying different years if IEP is in effect over two school years.

Justification Statement for Removal from General Education Setting

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Current IEP

13. a) The extent, if any, to which the student will not participate in regular classes and in extracurricular and other nonacademic activities, including lunch, recess, transportation, etc., with students who do not have disabilities:
☐ Not Applicable: Student will participate fully
b) If the IEP requires any removal of the student from the school, classroom, extracurricular, or nonacademic activities, (e.g., lunch, recess, transportation, etc.) that s/he would attend if not disabled, the PPT must justify this removal from the regular education environment.   ☐ Not applicable: Student will participate fully
☐ The IEP requires removal of the student from the regular education environment because: (provide a detailed explanation – use additional pages if necessary)

New IEP

Explain the extent to which the student will not participate in general education classes and non-academic activities with non-disabled peers

Justification for the removal from the general education environment

Changes: Minor formatting

LRE Checklist	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)
Note: The LRE Checklist (ED632) must be completed and attached to this IEP if the student is to be removed from the regular education environment for 60% or more of the time. It is recommended that the LRE Checklist be utilized when making any placement decision to ensure conformity with the LRE provisions of the Individuals with Disabilities Education Act.	**Will the student be removed from the general education environment for 60% or more of the time?** ☐ Yes ☐ No The LRE Checklist is required *(Display if Yes)*

Changes: While technically not part of the IEP, the LRE Checklist is built into the CT-SEDS process flow.

Required Date Collection (Page 12)	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Required Data Collection
(Collect and/or update at every PPT)

For Children 3 years of age

Free Appropriate Public Education (FAPE) by age 3.   ☐ Yes ☐ No

If the Oct 1st reported "Annual Review/PPT Meeting Date" and child's DOB indicate that the child did not receive FAPE by their 3rd birthday, why?
☐ Late referral (less than 90 days before 3rd birthday)   ☐ Moved into district late   ☐ Other (Specify) _____
☐ Child initially found not eligible at age 3 (re-referred to district at a later date)   ☐ Parent Choice   ☐ FAPE met via earlier PPT. Date of initial PPT was _____

Early Childhood (E.C.) Placement Settings (children ages 5 or younger OR grade is preschool):

1. Provide the hours per week the child participates in an early childhood program which is not provided as a part of the IEP (hours from pg 2): _____

2. Identify the E.C. Placement Setting where the child spends the majority of the week which is a combination of programming from both pages 2 AND 11:
☐ Regular E.C. Preschool or Kindergarten Program
☐ E.C. Special Education Program in **Separate Class**
☐ E.C. Special Education Program in **Separate School**
☐ E.C. Special Education Program in **Residential Facility**
☐ Home
☐ Service Provider Location (Itinerant Services) – applies only when a child does not spend time in any environment with non-disabled peers

Education Placement 3 to 21 years of age

1. Does the student live at any of the following locations?
☐ None of these locations (Default - 00)
☐ Temporary Housing Situation: Foster Home, Group Home, Safe Home, Supported Housing; and Temporary Shelters. (02)
  (Housing that is subsidized by DCF, DDS, DMHAS or other state agency.)
☐ Hospital (03)
☐ Private Residential Facility (09)

⌄ Additional Placement Information

ⓘ   Complete the following Education Placement information for the student.

At the time of this IEP implementation, will the student be living at a hospital?

  ☐ Yes   ☐ No
(Required)

At the time of this IEP implementation, will the student be living at a Private Residential Facility? ⓘ

  ☐ Yes   ☐ No
(Required)

Changes: Some data elements will be collected during the IEP development process.

CONNECTICUT STATE
DEPARTMENT OF EDUCATION