

Building Your Knowledge of Your Child's IEP



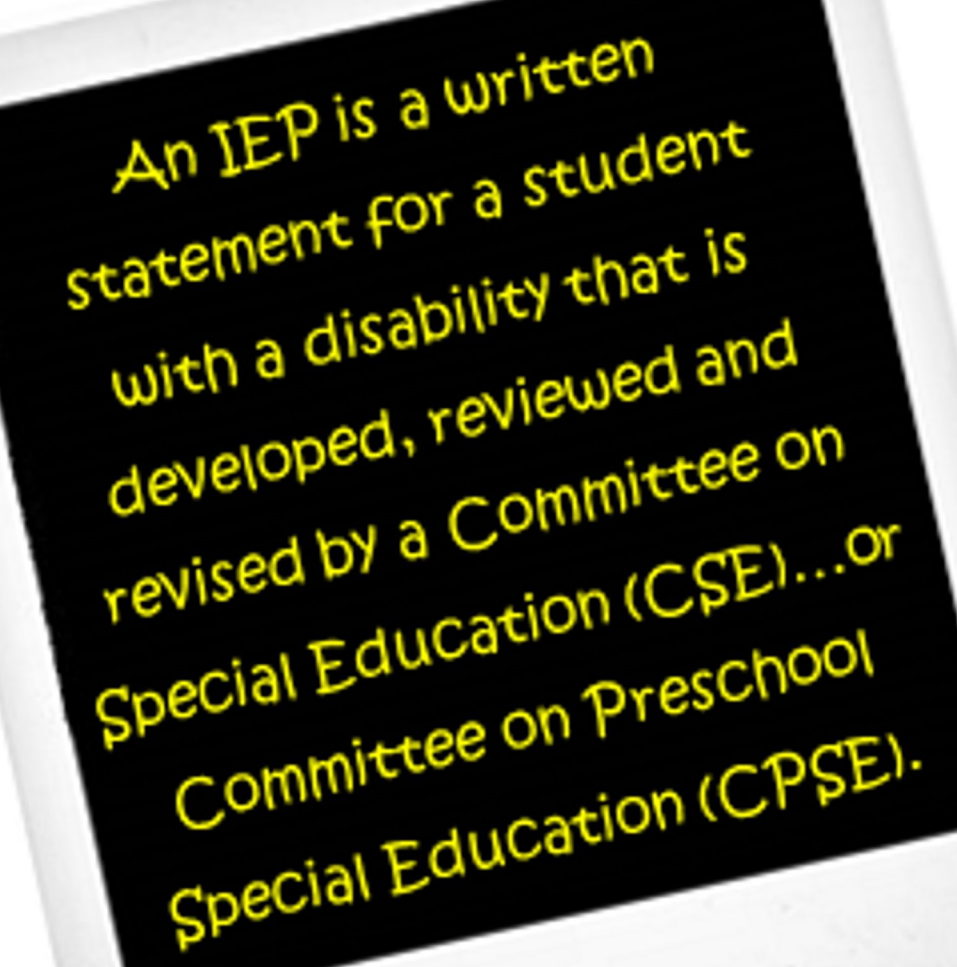


IEP

**stands
for...**

Individualized Education Program





An IEP is a written statement for a student with a disability that is developed, reviewed and revised by a Committee on Special Education (CSE)...or Committee on Preschool Special Education (CPSE).

What is an IEP

- An Individualized Education Program, or IEP, is a program tailored to meet the individual needs of students with disabilities. It is written in collaboration between a child's school staff, their parents/guardians, and sometimes, the student.
- The document outlines the special educational needs based on the student's identified disability with measurable educational goals, and any services or supports the child may need to meet those goals.
- It's a year long plan that is reviewed at least once a year at the Annual Review but can be reviewed at any point during the year.

What is an IEP

- Not every student with a disability is eligible for an IEP. To qualify, a student's disability has to have a "significant adverse effect on school performance".
- The CSE will determine whether the student fits into any of the 13 categories under IDEA that qualify that child for an IEP, according to the law (LD, ED, SLI, OHI etc...)

Individualized Education Program (IEP) vs. a 504 Plan: What's the Difference Between Them?



504: Based on the Rehabilitation Act of 1973

- For individuals diagnosed with a physical or mental impairment that substantially impacts a major life activity. A diagnosis alone does not qualify a student for a 504 plan.
- A 504 plan provides accommodations in a general education classroom.
- A 504 plan does not provide specialized instruction. If a student needs specialized instruction, they must have an IEP.

Sections of the IEP

Identifying
Information

Present Levels of
Performance /
Individual Needs

Measurable Post-
Secondary Goals /
Transition Needs

Measurable
Annual Goals,
Short-Term
Objectives &
Benchmarks

Reporting Progress
to Parents

Recommended
Special Education
Programs &
Services

Coordinated Set of
Transition
Activities

Recommendation
Placement

Testing
Accommodations

Participation in
State and District-
Wide
Assessments

Participation with
Students Without
Disabilities

Transportation

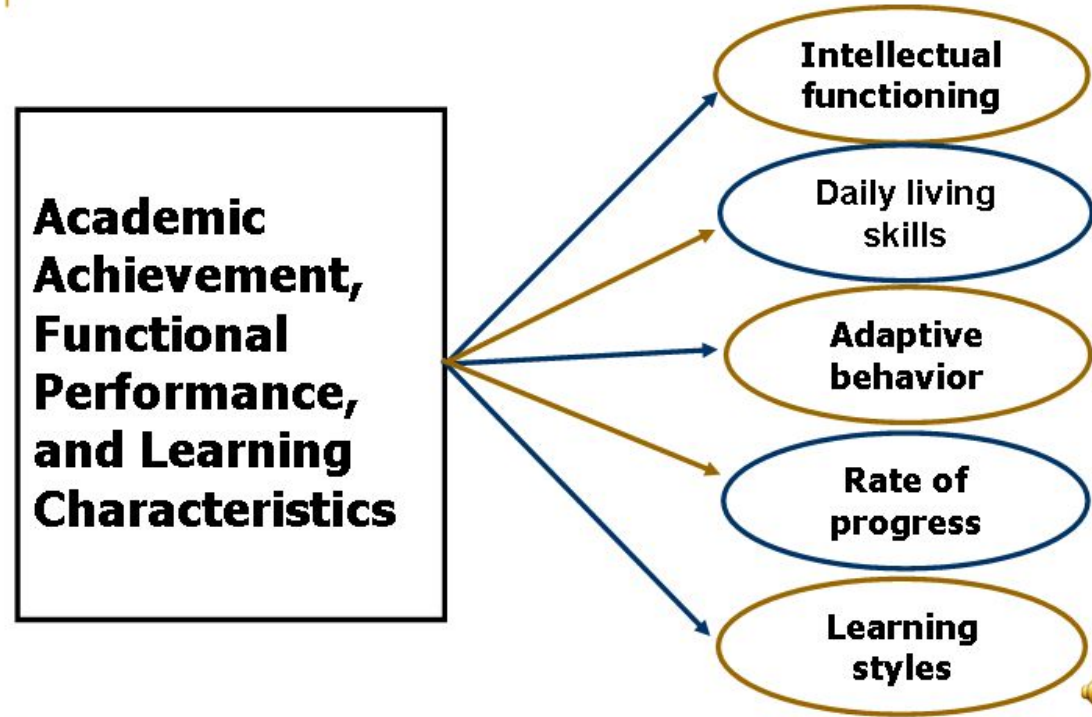
IEP Identifying Information (1)

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

STUDENT NAME: DATE OF BIRTH: LOCAL ID #:	DISABILITY CLASSIFICATION:
PROJECTED DATE IEP IS TO BE IMPLEMENTED:	PROJECTED DATE OF ANNUAL REVIEW:

Present Levels of Performance (2)

Present Levels of Performance



Present Levels of Performance (2)

PRESENT LEVELS OF PERFORMANCE AND INDIVIDUAL NEEDS
DOCUMENTATION OF STUDENT'S CURRENT PERFORMANCE AND ACADEMIC, DEVELOPMENTAL AND FUNCTIONAL NEEDS
EVALUATION RESULTS (INCLUDING PERFORMANCE FOR SCHOOL-AGE STUDENTS, PERFORMANCE ON STATE AND DISTRICT-WIDE ASSESSMENTS) [REDACTED]
ACADEMIC ACHIEVEMENT, FUNCTIONAL PERFORMANCE AND LEARNING CHARACTERISTICS LEVELS OF KNOWLEDGE AND DEVELOPMENT IN SUBJECT AND SKILL AREAS INCLUDING ACTIVITIES OF DAILY LIVING, LEVEL OF INTELLECTUAL FUNCTIONING, ADAPTIVE BEHAVIOR, EXPECTED RATE OF PROGRESS IN ACQUIRING SKILLS AND INFORMATION, AND LEARNING STYLE: [REDACTED] STUDENT STRENGTHS, PREFERENCES, INTERESTS: [REDACTED] ACADEMIC, DEVELOPMENTAL AND FUNCTIONAL NEEDS OF THE STUDENT, INCLUDING CONSIDERATION OF STUDENT NEEDS THAT ARE OF CONCERN TO THE PARENT: [REDACTED]
SOCIAL DEVELOPMENT THE DEGREE (EXTENT) AND QUALITY OF THE STUDENT'S RELATIONSHIPS WITH PEERS AND ADULTS; FEELINGS ABOUT SELF; AND SOCIAL ADJUSTMENT TO SCHOOL AND COMMUNITY ENVIRONMENTS: [REDACTED] STUDENT STRENGTHS: [REDACTED] SOCIAL DEVELOPMENT NEEDS OF THE STUDENT, INCLUDING CONSIDERATION OF STUDENT NEEDS THAT ARE OF CONCERN TO THE PARENT: [REDACTED]
PHYSICAL DEVELOPMENT THE DEGREE (EXTENT) AND QUALITY OF THE STUDENT'S MOTOR AND SENSORY DEVELOPMENT, HEALTH, VITALITY AND PHYSICAL SKILLS OR LIMITATIONS WHICH PERTAIN TO THE LEARNING PROCESS: [REDACTED] STUDENT STRENGTHS: [REDACTED] PHYSICAL DEVELOPMENT NEEDS OF THE STUDENT, INCLUDING CONSIDERATION OF STUDENT NEEDS THAT ARE OF CONCERN TO THE PARENT:

Present Levels of Performance (3a,b,c)

PRESENT LEVELS OF PERFORMANCE AND INDIVIDUAL NEEDS

DOCUMENTATION OF STUDENT'S CURRENT PERFORMANCE AND ACADEMIC, DEVELOPMENTAL AND FUNCTIONAL NEEDS

EVALUATION RESULTS (INCLUDING FOR SCHOOL-AGE STUDENTS, PERFORMANCE ON STATE AND DISTRICT-WIDE ASSESSMENTS)

█

ACADEMIC ACHIEVEMENT, FUNCTIONAL PERFORMANCE AND LEARNING CHARACTERISTICS

LEVELS OF KNOWLEDGE AND DEVELOPMENT IN SUBJECT AND SKILL AREAS INCLUDING ACTIVITIES OF DAILY LIVING, LEVEL OF INTELLECTUAL FUNCTIONING, ADAPTIVE BEHAVIOR, EXPECTED RATE OF PROGRESS IN ACQUIRING SKILLS AND INFORMATION, AND LEARNING STYLE:

█

STUDENT STRENGTHS, PREFERENCES, INTERESTS:

█

ACADEMIC, DEVELOPMENTAL AND FUNCTIONAL NEEDS OF THE STUDENT, INCLUDING CONSIDERATION OF STUDENT NEEDS THAT ARE OF CONCERN TO THE PARENT:

█

SOCIAL DEVELOPMENT

THE DEGREE (EXTENT) AND QUALITY OF THE STUDENT'S RELATIONSHIPS WITH PEERS AND ADULTS; FEELINGS ABOUT SELF; AND SOCIAL ADJUSTMENT TO SCHOOL AND COMMUNITY ENVIRONMENTS:

█

STUDENT STRENGTHS:

█

SOCIAL DEVELOPMENT NEEDS OF THE STUDENT, INCLUDING CONSIDERATION OF STUDENT NEEDS THAT ARE OF CONCERN TO THE PARENT:

█

PHYSICAL DEVELOPMENT

THE DEGREE (EXTENT) AND QUALITY OF THE STUDENT'S MOTOR AND SENSORY DEVELOPMENT, HEALTH, VITALITY AND PHYSICAL SKILLS OR LIMITATIONS WHICH PERTAIN TO THE LEARNING PROCESS:

█

STUDENT STRENGTHS:

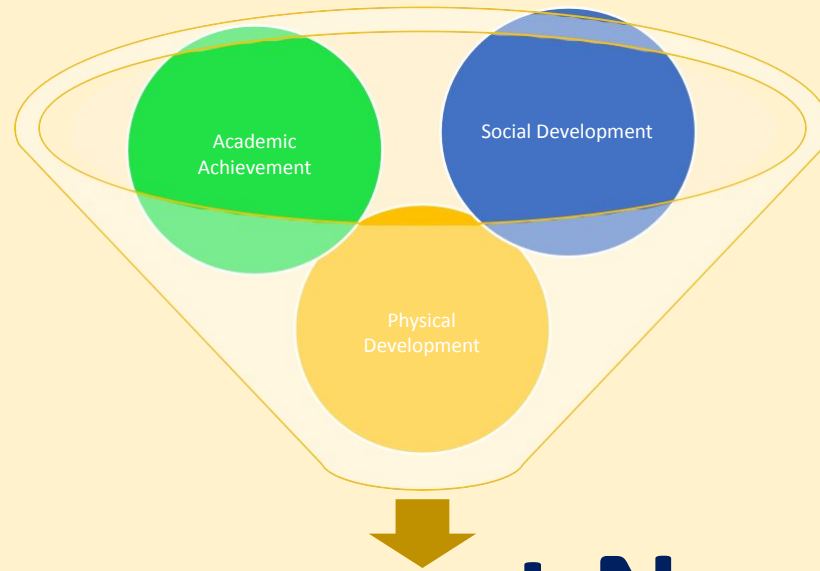
█

PHYSICAL DEVELOPMENT NEEDS OF THE STUDENT, INCLUDING CONSIDERATION OF STUDENT NEEDS THAT ARE OF CONCERN TO THE PARENT:

3a

3b

3c



Management Needs (4)

The nature (type) and degree (extent) to which environmental and human or material resources are needed to address needs identified.

Effect of Student Needs (5)

EFFECT OF STUDENT NEEDS ON INVOLVEMENT AND PROGRESS IN THE GENERAL EDUCATION CURRICULUM
OR, FOR A PRESCHOOL STUDENT, EFFECT OF STUDENT NEEDS ON PARTICIPATION IN APPROPRIATE
ACTIVITIES

Describe how the student's disability affects
his/her involvement in the general
curriculum. (i.e. access and progress)

Student Needs Related to Special Factors (6a)

STUDENT NEEDS RELATING TO SPECIAL FACTORS

BASED ON THE IDENTIFICATION OF THE STUDENT'S NEEDS, THE COMMITTEE MUST CONSIDER WHETHER THE STUDENT NEEDS A PARTICULAR DEVICE OR SERVICE TO ADDRESS THE SPECIAL FACTORS AS INDICATED BELOW, AND IF SO, THE APPROPRIATE SECTION OF THE IEP MUST IDENTIFY THE PARTICULAR DEVICE OR SERVICE(S) NEEDED.

Does the student need strategies, including positive behavioral interventions, supports and other strategies to address behaviors that impede the student's learning or that of others? Yes No

Does the student need a behavioral intervention plan? No Yes:

For a student with limited English proficiency, does he/she need a special education service to address his/her language needs as they relate to the IEP?
Yes No Not Applicable

For a student who is blind or visually impaired, does he/she need instruction in Braille and the use of Braille? Yes No Not Applicable

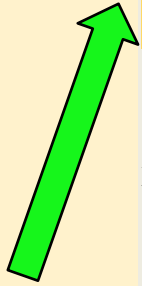
Does the student need a particular device or service to address his/her communication needs? Yes No

In the case of a student who is deaf or hard of hearing, does the student need a particular device or service in consideration of 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?

Yes No Not Applicable

Does the student need an assistive technology device and/or service? Yes No

If yes, does the Committee recommend that the device(s) be used in the student's home? Yes No



Student Needs Related to Special Factors (6b)

STUDENT NEEDS RELATING TO SPECIAL FACTORS

BASED ON THE IDENTIFICATION OF THE STUDENT'S NEEDS, THE COMMITTEE MUST CONSIDER WHETHER THE STUDENT NEEDS A PARTICULAR DEVICE OR SERVICE TO ADDRESS THE SPECIAL FACTORS AS INDICATED BELOW, AND IF SO, THE APPROPRIATE SECTION OF THE IEP MUST IDENTIFY THE PARTICULAR DEVICE OR SERVICE(S) NEEDED.

Does the student need strategies, including positive behavioral interventions, supports and other strategies to address behaviors that impede the student's learning or that of others? Yes No

Does the student need a behavioral intervention plan? No Yes:

For a student with limited English proficiency, does he/she need a special education service to address his/her language needs as they relate to the IEP?

Yes No Not Applicable

For a student who is blind or visually impaired, does he/she need instruction in Braille and the use of Braille? Yes No Not Applicable

Does the student need a particular device or service to address his/her communication needs? Yes No

In the case of a student who is deaf or hard of hearing, does the student need a particular device or service in consideration of 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?

Yes No Not Applicable

Does the student need an assistive technology device and/or service? Yes No

If yes, does the Committee recommend that the device(s) be used in the student's home? Yes No

Considerations:

- Any LOTE services or supports.

Student Needs Related to Special Factors (6c)

STUDENT NEEDS RELATING TO SPECIAL FACTORS

BASED ON THE IDENTIFICATION OF THE STUDENT'S NEEDS, THE COMMITTEE MUST CONSIDER WHETHER THE STUDENT NEEDS A PARTICULAR DEVICE OR SERVICE TO ADDRESS THE SPECIAL FACTORS AS INDICATED BELOW, AND IF SO, THE APPROPRIATE SECTION OF THE IEP MUST IDENTIFY THE PARTICULAR DEVICE OR SERVICE(S) NEEDED.

Does the student need strategies, including positive behavioral interventions, supports and other strategies to address behaviors that impede the student's learning or that of others? Yes No

Does the student need a behavioral intervention plan? No Yes:

For a student with limited English proficiency, does he/she need a special education service to address his/her language needs as they relate to the IEP?

Yes No Not Applicable

For a student who is blind or visually impaired, does he/she need instruction in Braille and the use of Braille? Yes No Not Applicable

Does the student need a particular device or service to address his/her communication needs? Yes No

In the case of a student who is deaf or hard of hearing, does the student need a particular device or service in consideration of 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?

Yes No Not Applicable

Does the student need an assistive technology device and/or service? Yes No

If yes, does the Committee recommend that the device(s) be used in the student's home? Yes No

Considerations:

- Use of Braille
- Orientation and mobility
- Braille note taker / other technology

Student Needs Related to Special Factors (6d)

STUDENT NEEDS RELATING TO SPECIAL FACTORS

BASED ON THE IDENTIFICATION OF THE STUDENT'S NEEDS, THE COMMITTEE MUST CONSIDER WHETHER THE STUDENT NEEDS A PARTICULAR DEVICE OR SERVICE TO ADDRESS THE SPECIAL FACTORS AS INDICATED BELOW, AND IF SO, THE APPROPRIATE SECTION OF THE IEP MUST IDENTIFY THE PARTICULAR DEVICE OR SERVICE(S) NEEDED.

Does the student need strategies, including positive behavioral interventions, supports and other strategies to address behaviors that impede the student's learning or that of others? Yes No

Does the student need a behavioral intervention plan? No Yes:

For a student with limited English proficiency, does he/she need a special education service to address his/her language needs as they relate to the IEP?

Yes No Not Applicable

For a student who is blind or visually impaired, does he/she need instruction in Braille and the use of Braille? Yes No Not Applicable

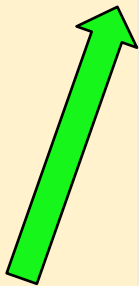
Does the student need a particular device or service to address his/her communication needs? Yes No

In the case of a student who is deaf or hard of hearing, does the student need a particular device or service in consideration of 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?

Yes No Not Applicable

Does the student need an assistive technology device and/or service? Yes No

If yes, does the Committee recommend that the device(s) be used in the student's home? Yes No



Student Needs Related to Special Factors (6e)

STUDENT NEEDS RELATING TO SPECIAL FACTORS

BASED ON THE IDENTIFICATION OF THE STUDENT'S NEEDS, THE COMMITTEE MUST CONSIDER WHETHER THE STUDENT NEEDS A PARTICULAR DEVICE OR SERVICE TO ADDRESS THE SPECIAL FACTORS AS INDICATED BELOW, AND IF SO, THE APPROPRIATE SECTION OF THE IEP MUST IDENTIFY THE PARTICULAR DEVICE OR SERVICE(S) NEEDED.

Does the student need strategies, including positive behavioral interventions, supports and other strategies to address behaviors that impede the student's learning or that of others? Yes No

Does the student need a behavioral intervention plan? No Yes:

For a student with limited English proficiency, does he/she need a special education service to address his/her language needs as they relate to the IEP?

Yes No Not Applicable

For a student who is blind or visually impaired, does he/she need instruction in Braille and the use of Braille? Yes No Not Applicable

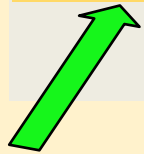
Does the student need a particular device or service to address his/her communication needs? Yes No

In the case of a student who is deaf or hard of hearing, does the student need a particular device or service in consideration of 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?

Yes No Not Applicable

Does the student need an assistive technology device and/or service? Yes No

If yes, does the Committee recommend that the device(s) be used in the student's home? Yes No



Measurable Post-Secondary Goals (7)

BEGINNING NOT LATER THAN THE FIRST IEP TO BE IN EFFECT WHEN THE STUDENT IS AGE 15
(AND AT A YOUNGER AGE IF DETERMINED APPROPRIATE)

MEASURABLE POSTSECONDARY GOALS

LONG-TERM GOALS FOR LIVING, WORKING AND LEARNING AS AN ADULT

EDUCATION/TRAINING:

EMPLOYMENT:

INDEPENDENT LIVING SKILLS (WHEN APPROPRIATE):

Examples

Education/Training: Lisa will attend a two year college to take courses in animal care.

Employment: Lisa will work as a dog groomer as she participates in veterinary science course work.

Independent Living Skills Lisa will obtain her driver's license. She will live in an apartment assisted by family.

Transition Needs (8)

In consideration of present levels of performance, transition service needs of the student that focus on the student's courses of study, taking into account the student's strengths, preferences and interests as they relate to transition from school to post-school activities:

Transition needs statements:

- *Lisa **needs** to develop self-advocacy skills.*
- *Lisa **needs** to learn computer and time management skills.*

Example

Courses of study statements: *Lisa **will** take courses of study that include animal biology and computer word processing as well as courses that include career and technical education courses in veterinary science. Lisa will complete the course requirements for graduation with a NYS HS Diploma.*

Reporting Progress (10)

REPORTING PROGRESS TO PARENTS

Identify when periodic reports on the student's progress toward meeting the annual goals will be provided to the student's parents:

When, not how many times

At the same time report cards are provided for all students in the school year.

Recommended Special Education Program (11)

RECOMMENDED SPECIAL EDUCATION PROGRAMS AND SERVICES					
SPECIAL EDUCATION PROGRAM/SERVICES	SERVICE DELIVERY RECOMMENDATIONS	FREQUENCY HOW OFTEN PROVIDED	DURATION LENGTH OF SESSION	LOCATION WHERE SERVICE WILL BE PROVIDED	PROJECTED BEGINNING / SERVICE DATE(S)
SPECIAL EDUCATION PROGRAM:	*				
RELATED SERVICES:					
SUPPLEMENTARY AIDS SERVICES/PROGRAM MODIFICATIONS/ACC					
ASSISTIVE TECHNOLOGY SERVICES:					
SUPPORTS FOR SCHOOL BEHALF OF THE STUDENT					

For clarifying information, including:

- Special class size
- Group or individual service
- Frequency and Location
- Subject/class where service will be provided

* Identify, if applicable, consultant teacher ser

Recommended Special Education Program

RECOMMENDED SPECIAL EDUCATION PROGRAMS AND SERVICES					
SPECIAL EDUCATION PROGRAM/SERVICES	SERVICE DELIVERY RECOMMENDATIONS *	FREQUENCY HOW OFTEN PROVIDED	DURATION LENGTH OF SESSION	LOCATION WHERE SERVICE WILL BE PROVIDED	PROJECTED BEGINNING / SERVICE DATE(S)
SPECIAL EDUCATION PROGRAM:					
RELATED SERVICES:					
SUPPLEMENTARY AIDS AND SERVICES/PROGRAM MODIFICATIONS/ACCOMMODATIONS:					
ASSISTIVE TECHNOLOGY DEVICES AND/OR SERVICES:					
SUPPORTS FOR SCHOOL PERSONNEL ON BEHALF OF THE STUDENT:					
* Identify, if applicable, class size (maximum number of students) and consultant teacher services or other service delivery methods.					

Examples:

- Special seating arrangement;
- Instructional material in alternative formats (e.g., Braille, large print)



Recommended Special Education Program

RECOMMENDED SPECIAL EDUCATION PROGRAMS AND SERVICES					
SPECIAL EDUCATION PROGRAM/SERVICES	SERVICE DELIVERY RECOMMENDATIONS*	FREQUENCY HOW OFTEN PROVIDED	DURATION LENGTH OF SESSION	LOCATION WHERE SERVICE WILL BE PROVIDED	PROJECTED BEGINNING/ SERVICE DATE(S)
SPECIAL EDUCATION PROGRAM:					
RELATED SERVICES:					
SUPPLEMENTARY AIDS AND SERVICES/PROGRAM MODIFICATIONS/ACCOMMODATIONS:					
ASSISTIVE TECHNOLOGY DEVICES AND/OR SERVICES:					
SUPPORTS FOR SCHOOL PERSONNEL ON BEHALF OF THE STUDENT:					

Any item, piece of equipment or product system that is used to increase, maintain or improve the functional capabilities of a student with a disability

- Low tech (pencil grips, picture exchange system)
- High tech (augmentative communication device)

* Identify, if applicable, class size (maximum student-to-staff ratio), teacher services or other service delivery recommendations.

Recommended Special Education Program

RECOMMENDED SPECIAL EDUCATION PROGRAMS AND SERVICES					
SPECIAL EDUCATION PROGRAM/SERVICES	SERVICE DELIVERY RECOMMENDATIONS *	FREQUENCY HOW OFTEN PROVIDED	DURATION LENGTH OF SESSION	LOCATION WHERE SERVICE WILL BE PROVIDED	PROJECTED BEGINNING / SERVICE DATE(S)
SPECIAL EDUCATION PROGRAM:					
RELATED SERVICES:					
SUPPLEMENTARY AIDS AND SERVICES/PROGRAM MODIFICATIONS/ACCOMMODATIONS :					
ASSISTIVE TECHNOLOGY DEVICES AND/OR SERVICES:					
SUPPORTS FOR SCHOOL PERSONNEL ON BEHALF OF THE STUDENT:					
* Identify, if applicable, class size (maximum student-to-consultant teacher services or other service delivery re					

Necessary supports provided to school personnel on behalf of the student to enable:

- Attainment of annual goals.
- Involvement in and progress in the general curriculum.



12-month Service and/or Program/Extended School Year (ESY) (12)

12-MONTH SERVICE AND/OR PROGRAM – Student is eligible to receive special education services and/or program during July/August:

No
 Yes If
 yes:

Student will receive the same special education program/services as recommended above.

OR

Student will receive the following special education program/services:

SPECIAL EDUCATION PROGRAM/SERVICES	SERVICE DELIVERY RECOMMENDATIONS	FREQUENCY	DURATION	LOCATION	PROJECTED BEGINNING / SERVICE DATE(S)

Name of school/agency provider of services during July and August:

For a preschool student, reason(s) the child requires services during July and August:

Testing Accommodations (13)

TESTING ACCOMMODATIONS (TO BE COMPLETED FOR PRESCHOOL CHILDREN ONLY IF THERE IS AN ASSESSMENT PROGRAM FOR NONDISABLED PRESCHOOL CHILDREN):

INDIVIDUAL TESTING ACCOMMODATIONS, SPECIFIC TO THE STUDENT'S DISABILITY AND NEEDS, TO BE USED CONSISTENTLY BY THE STUDENT IN THE RECOMMENDED EDUCATIONAL PROGRAM AND IN THE ADMINISTRATION OF DISTRICT-WIDE ASSESSMENTS OF STUDENT ACHIEVEMENT AND, IN ACCORDANCE WITH DEPARTMENT POLICY, STATE ASSESSMENTS OF STUDENT ACHIEVEMENT

TESTING ACCOMMODATION	CONDITIONS*	IMPLEMENTATION RECOMMENDATIONS* *
NONE		

*Conditions – Test Characteristics: Describe the type, length, purpose of the test upon which the use of testing accommodations is conditioned, if applicable.

**Implementation Recommendations: Identify the amount of extended time, type of setting, etc., specific to the testing accommodations, if applicable.

Coordinated Set of Transition Activities (14)

BEGINNING NOT LATER THAN THE FIRST IEP TO BE IN EFFECT WHEN THE STUDENT IS AGE 15 (AND AT A YOUNGER AGE, IF DETERMINED APPROPRIATE).

COORDINATED SET OF TRANSITION ACTIVITIES

NEEDED ACTIVITIES TO FACILITATE THE STUDENT'S MOVEMENT FROM SCHOOL TO POST-SCHOOL ACTIVITIES	SERVICE/ACTIVITY	SCHOOL DISTRICT/ AGENCY RESPONSIBLE
Instruction		
Related Services		
Community Experiences		
Development of Employment and Other Post-school Adult Living Objectives		
Acquisition of Daily Living Skills (if applicable)		
Functional Vocational Assessment (if applicable)		

Participation in State & Local Assessments (15)

PARTICIPATION IN STATE AND DISTRICT-WIDE ASSESSMENTS

(TO BE COMPLETED FOR PRESCHOOL STUDENTS ONLY IF THERE IS AN ASSESSMENT PROGRAM FOR NONDISABLED PRESCHOOL STUDENTS)

The student will participate in the same State and district-wide assessments of student achievement that are administered to general education students.

The student will participate in an alternate assessment on a particular State or district-wide assessment of student achievement.

Identify the alternate assessment:

Statement of why the student cannot participate in the regular assessment and why the particular alternate assessment selected is appropriate for the student:

Participation with Students Without Disabilities (16)

PARTICIPATION WITH STUDENTS WITHOUT DISABILITIES

REMOVAL FROM THE GENERAL EDUCATION ENVIRONMENT OCCURS ONLY WHEN THE NATURE OR SEVERITY OF THE DISABILITY IS SUCH THAT, EVEN WITH THE USE OF SUPPLEMENTARY AIDS AND SERVICES, EDUCATION CANNOT BE SATISFACTORILY ACHIEVED.

FOR THE PRESCHOOL STUDENT:

Explain the extent, if any, to which the student will not participate in appropriate activities with age-appropriate nondisabled peers (e.g., percent of the school day and/or specify particular activities):

FOR THE SCHOOL-AGE STUDENT:

Explain the extent, if any, to which the student will not participate in regular class, extracurricular and other nonacademic activities (e.g., percent of the school day and/or specify particular activities):

If the student is not participating in a regular physical education program, identify the extent to which the student will participate in specially-designed instruction in physical education, including adapted physical education:

EXEMPTION FROM LANGUAGE OTHER THAN ENGLISH DIPLOMA REQUIREMENT: No Yes - The Committee has determined that the student's disability adversely affects his/her ability to learn a language and recommends the student be exempt from the language other than English requirement.

SPECIAL TRANSPORTATION (17)

TRANSPORTATION RECOMMENDATION TO ADDRESS NEEDS OF THE
STUDENT RELATING TO HIS/HER DISABILITY

None.

Student needs special transportation accommodations/services as follows:

Student needs transportation to and from special classes or programs at another site:

WHO DO I CALL TO DISCUSS MY CHILD'S IEP?

PRESCHOOL:

Parkville

Classroom Special Education Teacher
Dr. Craig Gootman, CPSE Chair

E.M. Baker

Classroom Special Education Teacher
Dr. Maria Hanakis, Psychologist
Ms. Cindy Lipper, Psychologist

JFK

Classroom Special Education Teacher
Dr. Deborah Duke, Psychologist
Dr. Genevieve Gin, Psychologist

Lakeville

Classroom Special Education Teacher
Ms. Cindy Gross, Psychologist
Dr. Ashley Ragusa, Psychologist

Parkville

Classroom Special Education Teacher
Dr. Alyson Miller, Psychologist

Saddlerock

Classroom Special Education Teacher
Dr. Gabriella Duke, Psychologist
Dr. Anthony Iacovelli, Psychologist

MIDDLE SCHOOL:

North Middle School

Mr. Thomas Mangan, Special Education Chairperson
Responsibility Special Education Teacher
Ms. Elena Byrne-Dirico, Psychologist
Dr. Eileen Fusco, Psychologist
Dr. Kristan Melo, Psychologist

South Middle School

Ms. Jeryl Bennardo, Special Education Chairperson
Responsibility Special Education Teacher
Dr. Sivan Erstein, Psychologist
Dr. Jeanne Rolih, Psychologist

HIGH SCHOOL:

North High School

Ms. Cara McCormack, Special Education Chairperson
Responsibility Special Education Teacher
Dr. Anton Berzins, Psychologist
Ms. Elena Byrne-Dirico, Psychologist
Dr. David Cheng, Psychologist

South High School

Mr. Jim Morrow, Special Education Chairperson
Responsibility Special Education Teacher
Ms. Lauren Ferguson, Psychologist
Dr. Jacqueline Scott, Psychologist