STATE SELPA FORMS MANUAL

WRITING IEPS FOR EDUCATIONAL BENEFIT

January 2021(Updated July 2026)

This manual and accompanying IEP Forms were developed by members of the SELPA Administrators of California to address the legal requirements of IDEA, state law, and the State Performance Plan, as appropriate. This IEP is a recommended template to provide greater consistency for districts around California. This manual is considered general guidance and not a replacement/substitute for local policies and procedures. If you would like to provide input or find any errors on this document or state forms, please contact your SELPA Director in order for the item to be brought to the State SELPA Forms Committee for review.

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FORM 1 – INDIVIDUALIZED EDUCATION PROGRAM – INFORMATION/ELIGIBILITY

1. Student Legal Name: Enter the student last name and first name. This information should be taken from an official document (birth certificate, etc.). Do not use nicknames.

2. Date of Birth: Enter the exact birthdate. This information should be taken from an official document (birth certificate, etc.).

3. IEP Date: Enter date of the current plan review (annual) IEP,

4. Original SpEd Entry Date: Enter the date the student first received special education services, including IFSP (0-3 infant services). If the student entered the program, left, and then came back several times, use the date of the **first entry** to special education.

5. Next Plan Review IEP: Enter the next plan review IEP date that will be one year from the current plan review IEP.

6. Last Eval: Enter the date of the most recently completed comprehensive assessment to determine or re- determine eligibility for special education and related services (reevaluation or initial IEP date).

7. Next Eval: Enter the date when the next reevaluation is due.

8. Meeting Type: Select Meeting Type (must be one of three meeting types)
   - *Initial* is the IEP to determine eligibility after initial assessment.
   - *Plan Review* is the IEP meeting to be held within one year of prior IEP.(Annual)
   - *Reevaluation* is the IEP meeting to be held after reassessment (Triennial). This meeting may also include the Plan Review IEP Meeting.

   Additional Purpose of Meeting (If needed):
   - *Transition* means transition from infant to preschool, preschool to kindergarten, elementary to middle, middle to high school, high school to transition placements, from public school setting to NPS or reverse, etc.
     - Transition also means for students who are 16 or older, or who will turn 16 when this IEP is in effect, the IEP team must address needed post-secondary transition services. These services must include the results of age appropriate transition assessments, measurable post-secondary goals related to training/education, employment and independent living skills (as appropriate) and describe the focus of the student's course of study.
   - *Pre-expulsion* means an IEP meeting that is being held as part of or following a manifestation determination.
   - *Interim* means if the child has an IEP and transfers into a district from another SELPA.
   - *Other*

9. Age: The student's age as of the IEP meeting date.

10. Gender: Enter Male, Female, or Non-binary

11. Grade: Enter the appropriate grade designation.

12. Native Language: This field was previously known as home language. This is the student's home language or birth language.

13. EL: Check if the student is an English learner or check if the student has been re-designated. (R-FEP)

    Whether or not the student is an English learner (EL), this definition includes non English proficient students as well. This refers to a student who's primary or home language is not English and who does

not have the clearly developed English language skills of comprehension, speaking, reading, and writing necessary to succeed in the school's regular educational program. The determination of which pupils are EL shall be made in accordance with the procedures specified in *EC* §*62002*.

14. Interpreter: Check if an interpreter is needed for the IEP meeting.

15. Student ID and SSID: The student ID number is automatically assigned through CALPADS. The SSID, formerly CSIS, is assigned by the State. Each student must have a SSID.

    All LEAs are responsible for obtaining and maintaining SSIDs for all K–12 public school students enrolled in the district. In addition to all K–12 students, this includes students enrolled in education programs administered through County Offices of Education, charter school students, and preschool-aged students receiving special education services. The district is also responsible for obtaining and maintaining the Statewide Student Identifier (SSID) for district students that are placed in nonpublic, nonsectarian schools (NPS).

16. Parent/Guardian Information: Enter the contact information for the parent/guardian. If the student resides in an out-of-home placement through a non-educational agency, put the parent contact information in the second contact area, if known.

17. District of Special Education Accountability: The District of Special Education Accountability (DSEA) for a student with in IEP is defined to be either of the following:

    - The District of GEOGRAPHIC residence, if any of the following conditions apply
        a. The student's parents or guardians reside in the same district in which the student is receiving special education instruction and related services
        b. The student is placed outside his/her district of geographic residence through the IEP process.

    OR

    - A district OTHER THAN the district of geographic residence, if any of the following conditions apply:
        a. The student has a formal inter-district transfer agreement under EC 63600. (The DSEA = the county/district code of the district to which the student has transferred.)
        b. The student attends a charter school. (The DSEA = the school code of the charter.)
        c. The student is a ward of the court and housed in a juvenile court, court/community school, or licensed children's institution. (The DSEA = the county/district code of the district or COE serving the student while the student is incarcerated or institutionalized.)
        d. The student is a ward of the court and housed in an adult correctional facility (e.g., a county jail.) (The DSEA = the county/district code of the district that was last responsible for the student's IEP.)

18. Residence School: Enter the child's neighborhood school.

19. Ethnicity & Race: Refer to the student enrollment data in the site/district MIS system. If this information is not in the site/district MIS system, the LEA is responsible for providing this information.

    Ethnicity: Is the student of Hispanic ethnicity? Mark Yes or No; or Ethnicity Intentionally Left Blank

    Regardless of ethnicity, complete race information. Race category is indicative of a biological descendant designation often, but not always, reflected in physical traits that distinguish it clearly from other races. Only up to four race categories can be listed.

Race Categories	
100-Native American:	A Native American is a person having origins in any of the original peoples of North America and who maintains cultural identification through tribal affiliation or community recognition.
201-Chinese:	A person having origins in any of the original peoples of China.
202-Japanese:	A person having origins in any of the original peoples of Japan.
203-Korean:	A person having origins in any of the original peoples of Korea.
204-Vietnamese:	A person having origins in any of the original peoples of Vietnam.
205-Asian Indian:	A person having origins in any of the original peoples of the Indian subcontinent.
206-Laotian:	A person having origins in any of the original peoples of Laos.
207-Cambodian:	A person having origins in any of the original peoples of Cambodia.
208-Hmong:	A person having origins in any of the original peoples of the mountainous regions of Vietnam, Laos, and Thailand.
299-Other Asian:	A person having origins in any of the original peoples of the other Asian countries not listed above, e.g., Thailand, Indonesia, and Tibet.
301-Hawaiian:	A person having origins in any of the original peoples of the Hawaiian islands.
302-Guamanian:	A person having origins in any of the original peoples of the island of Guam.
303-Samoan:	A person having origins in any of the original peoples of the Samoan islands.
304-Tahitian:	A person having origins in any of the original peoples of the Tahitian islands.
399-Other Pacific Islander:	A person having origins in any of the original peoples of the Polynesian, Micronesian or Melanesian islands except Hawaiian, Samoan, Guamanian or Tahitian islands. (Excludes the Philippine Islands.)
400-Filipino:	A person having origins in any of the original peoples of the Philippine Islands.
600-African-American:	A person having origins in any of the black racial groups of Africa.
700-White:	A person having origins in any of the original peoples of Europe, North Africa, or the Middle East, e.g., England, Egypt, Portugal, and Iran.
900-Intentionally Blank	

If a student does not fall into one of these race/ethnic categories, use a category that closely represents their race. If race and ethnicity fields are coded as 900- Intentionally Blank, the student will be multi-ethnic for Federal reporting purposes. If parents intentionally left race/ethnicity blank on enrollment data, the student will be considered multi-ethnic for Federal reporting purposes.

20. Disability: Mark primary disability with “P” and secondary disability with ”S”. The primary disability should be the one that has the most significant impact on the student’s ability to access the general education environment. Note: For funding purposes, low incidence disabilities marked as primary or secondary will generate low incidence funding.

    If team determines the student has a *Specific Learning Disability*, complete *Specific Learning Disability Team Determination of Eligibility*. Evaluation team members sign form as appropriate.

21. If the student is not eligible or no longer eligible for special education:
    - Document reason for decision and other options to address the student’s educational needs on *IEP Team Comments Page* (Form 7).
    - IEP team members sign as appropriate on (Form 6).
      If parent(s) do not agree that the child is not eligible for special education services, note their concerns, discuss options for resolving their concerns, and review *Notice of Procedural Safeguards.*

22. How Disability Affects Educational Performance: Write a statement that describes the disability and it's impact on school performance or participation in appropriate activities for preschool.

For Initial Placements Only (Ages 3 to 22 only – Do not include infant referral dates)

1. Has the Student Received Coordinated Early Intervening Services (CEIS) under the IDEA in the Past Two Years: Coordinated Early Intervening Services (CEIS) are coordinated interventions for students not currently identified as requiring special education who need additional academic and behavior support to succeed in a general education environment. This is required for districts that have been found to be significantly disproportionate by the CDE and optional for other districts. Districts can choose to use up to 15% of IDEA Local Assistance dollars for CEIS. Districts that are found to be significantly disproportionate by CDE must use 15% of IDEA Local Assistance dollars for CEIS. **NOTE: Do not confuse this with early intervention**.

   Coordinated early intervening services include educational and behavioral evaluations, services and supports including scientifically based literacy instruction. If the student received coordinated early intervening services (CEIS) during the past two years, check "yes". If you check "yes" then it is assumed that the district has moved 15% of their Federal Local Assistance (IDEA) funds to general education and that data is being collected on the students who have are receiving CEIS. Coordinated early intervening services are only required for districts who have been identified as *significantly disproportionate*. Otherwise, check no.

2. Date of Initial Referral for Special Education Services: Enter the date of the initial referral to assess and determine eligibility for education services (ages 3-22). Note: This date can change if a student is found eligible, then exits, and then is re-assessed and found eligible again.

3. Person Initiating the Referral: Select the person initiating the referral (Parent, Teacher, SST, Other School/District Personnel, Other).

4. Date District Received Parent Consent: Enter the date the district received parent signature/consent for initial evaluation.

5. Date of Initial Meeting to Determine Eligibility: Enter the date of IEP Team meeting to review initial evaluation and determine eligibility for special education.

Educational Benefit Reminder

- *Is all of the information complete and correct?*
- *How will the manager of the school MIS system be informed of any changes?*
- *Does the IEP clearly specify the child's disability(s)?*
- *Did the IEP Team identify how the child's disability affects his or her involvement and progress in the general curriculum or participation in appropriate activities for the preschool child?*
- *Is the purpose for the meeting identified and clearly defined?*
- *Are all dates accurate and complete?*
- *Is ethnicity and race properly identified, matches CALPADS and accurately completed?*

FORM 2 (PAGE 1) – INDIVIDUAL TRANSITION PLANNING (ITP)

This form must be completed in time to be in effect when the student reaches 16 years of age or sooner if appropriate or will reach 16 years of age before the next plan review review.

1. Student was invited: The student is to be invited on the meeting notification form. When the student is invited mark **YES** on the transition page. Keep the documentation of the meeting notification in the student's file.

2. Agency was invited: When appropriate support agencies need to be invited on the meeting notification, with the parent/guardian/student permission. If an agency is invited mark **YES**, when it is "not appropriate" mark **N/A**. You should never need to mark **NO**. Keep the documentation of the meeting notification in the student's file.

   IDEA 2004 requires that, "to the extent appropriate, with the consent of the parent or a child who has reached the age of majority,…the public agency must invite a representative of any participating agency that is likely to be responsible for providing or paying for transition services" (300.321 [b][3]).

3. How the Student Participated in the Process: Describe how the student participated in the process by choosing the best answer. Note: IEP teams may choose more than one option.

4. Age-appropriate transition assessments/instruments were used: Age-appropriate transition assessments/instruments are to be used and drive the individual transition planning portion of the IEP. When used mark YES. The next step is to record the transition assessment information/results used to identify the student's preferences and interests for transition planning as they relate to his/her post-secondary goals Assessment needs to be comprehensive NOT JUST Vocational. This information serves as Present Levels for the transition section of the IEP. The post-secondary goals are what the student plans on doing upon graduation/completing school. The gap between the results of the transition assessment and the student's interests is the basis for the post-secondary goals.

   Describe what the student is interested in and wants to pursue in areas of education, career and living based on the information you get from the transition assessments. Be sure this is documented on Form 1A.

   Transition assessment is the ***ongoing*** **process** of collecting data on the individual's needs, preferences, and interests as they relate to the demands of current and future work, education, independent living, and social environments. Age appropriate assessment based on the student's chronological age may need to be adapted for some students so that meaningful data are obtained.

   Presence of the following information, as appropriate, in the student's file and a clear link of such information to the student's postsecondary goal(s) would meet the requirements of age appropriate transition assessment.
   - State mandated test scores gathered during high school
   - Quarterly or semester grades or progress notes throughout high school
   - Current psychological assessment data indicating areas of strength and weakness, while documenting the presence of a diagnosed disability
   - College entrance exam scores, if applying to 4-year colleges
   - Informal interviews with students
   - Interest inventories or questionnaires
   - Career interest inventory and/or career skill inventory
   - An adaptive behavior scale (with a student self-assessment component included)
   - Teacher/ employer observations of school or community-based work experiences
   - Various student self-assessments.

Best practices would also include assessment information (a) provided by multiple people, (b) regarding student performance in multiple environments, (c) based on naturally occurring experiences, (c) that is understandable, and (d) that was gathered through instruments and methods sensitive to cultural diversity.

5. Student's Postsecondary Goals:
The student's IEP must include appropriate measurable postsecondary goal or goals that cover education or training, employment, and, if appropriate, independent living.

Postsecondary goals refer to those goals that a student hopes to achieve ***after*** exiting high school. A postsecondary goal is not the process of pursuing or moving toward a desired outcome, but the identification of what the desired outcome will be.

EXAMPLES

Education/Training:
- *Upon completion of school, I will join the Army.*
- *Upon completion of school, I will enroll in the local Community College.*
- *Upon completion of school, I will learn independent living skills from the Regional Center.*

Employment:
- *Upon completion of school, I will work as a mechanic.*
- *Upon completion of school, I will work as a teacher.*
- *Upon completion of school, I will work at the Opportunity Center.*
- *Upon completion of school, I will work in competitive employment.*
- *Upon completion of school, I will work in supported employment.*

Independent Living
- *Upon completion of school, I will live on my own.*
- *Upon completion of school, I will live with friends in a home or apartment.*
- *Upon completion of school, I will live on my own with help from my family.*

Make sure the post-secondary goal is linked to an plan review goal that will support the skills needed to reach the students post-secondary goals.

Person/agency responsible: Put in the student's name and then whoever else will also be responsible.

Updated Annually: There must be documentation that the postsecondary goals in the IEP are for the current year and have been updated according to the student's changing strengths, preferences and interests.

6. Transition Services Codes: Choose an appropriate Transition Service Code that will be used to support the student's post-secondary goal. Descriptions of services can be found on the Services- Offer of FAPE form.

Transition services are a coordinated set of activities for a student with a disability that:
- Is designed to be within a results-oriented process, focused on improving the academic and functional achievement of the child with a disability to facilitate the child's movement from school to post-school activities, including postsecondary education; vocational education; integrated employment (including supported employment); continuing and adult education; adult services; independent living or community participation
- Is based on the individual child's needs, taking into account their strengths, preferences, and interests;

- Includes *instruction*, *related services*, *community experiences*, the development of *employment and other post-school adult living objectives* and, when appropriate, acquisition of *daily living skills* and *functional vocational evaluation*.

7. Related Services/DIS as Appropriate: Include any related services the student may need based on their disability that will help the student achieve his/her post-secondary goals. (ex. Speech and Language, Deaf and Hard of Hearing services, Orientation and Mobility Transportation, Career Counseling, etc.). Descriptions of services can be found on the Services- Offer of FAPE form.

8. Activities to Support Post Secondary Goal: Identify different activities that will be employed to help the student achieve his/her post-secondary goals. (Ex. career research paper, college application, job applications, resume writing, self-help unit on cooking, Workability training etc.)

9. Community Experiences as Appropriate: Identify any activities in the community in which the student will be participating in the community. (Ex. Job shadowing, community-based instruction, service learning, community service, youth group, scouts, and ballet)

FORM 2 (PAGE 2) – INDIVIDUAL TRANSITION PLANNING (ITP)

1. Course of Study: Courses of study are defined as a multi-year description of coursework that explicitly connect to the student's desired post-school goals, from the students' current to anticipated exit year. Transcripts are not considered a course of study unless they also contain the list of future required courses to be completed by the student. Include a sentence as to how the completion of the student's course of study and diploma or certificate of completion will increase the student's ability to achieve his or her post-secondary goals. Here are options for conveying this information:

The chart below reflects the generic courses with commonly used course titles

Grade 9	Grade 10	Grade 11	Grade 12
English I Social Science (personal growth, geography) Math (Algebra I) Science (Biology) PE Elective	English II Social Science (History) Math (Intermediary Algebra) Science (Physical Science) PE Elective	English III Social Science (American Government) Math (Geometry) Science (Chemistry) Elective Elective	English IV Social Science (Economics) Elective Elective Elective Elective

- Electives are defined as Foreign Language (a language that is not English), Visual/Performing Arts, and Career-Technical Education classes and Regional Occupation Programs/Classes.
- The course of study may also include extracurricular activities that relate to post-secondary goals (yearbook, school newspaper, athletics, student leadership organizations (Future Farmers of America, Future Business Leaders of America, Key Clubs, etc.)

The school transcript suffices for meeting this expectation only if it includes the multi-year course of study. If it only lists the current or past years' classes, grades and credits, it is insufficient for meeting this requirement.

A sample course of study for a certificate bound student may include:

Functional Academics	**Domestic Domain**	**Community Domain**	**Vocational Domain**
● Math ● English Language Arts ● Listening & Speaking	● Grooming & Hygiene ● Personal Safety ● Life Skills	● Social Behavior ● Community Resources ● Recreation and Leisure ● Communication Skills	● Career Exploration ● Work Related Training ● Future Living, Working

Diploma: Attach a form with all diploma coursework presently being completed and all required future coursework that needs to be completed. Be sure to include the names of the specific electives that are being taken and will be taken.

2. Alternative Pathway to a Diploma: Select under "Course of Study" options list.

3. Units/Credits: Update the units/credits the student has completed up to this meeting and then the units/credits the student still has to complete or has pending for a diploma/certificate including what the student will take in the next IEP cycle.

4. Course of Study leads to: The IEP Team indicates by checking which option - a Certificate of Completion or a Diploma – will the courses the student is currently enrolled in lead to a certificate of completion or a diploma.

5. Age of Majority: On or before the student's 17th birthday, the teacher is to explain that he and/or she will assume all special education rights and protections upon turning 18 (unless a conservator has been

appointed by the court). Review the *Notice of Procedural Safeguards* with the student. Have the student and parent sign this section.

6. Conservatorship: Identify if the student is conserved for educational decision-making purposes.

Educational Benefit Reminder

- *Is there an appropriate measurable post-secondary goal or goals that covers education or training, employment, and as needed, independent living?*
- *Are the post-secondary goals updated annually?*
- *Are the post-secondary goals based on age appropriate transition assessments?*
- *Are there transition services in the IEP that will reasonably enable the student to meet his/her post-secondary goals?*
- *Does the course of study reasonably enable the student to meet their post-secondary goals?*
- *Is there a plan review (annual)IEP goal related to the student's transition services needs?*
- *Was the student invited and involved in their transition planning?*
- *Was a representative of any participating agency invited to the IEP Team meeting with prior consent from parent, guardian, or student?*

FORM 3 – PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Except for the Concerns of the Parent, a draft of this portion of the IEP may be prepared prior to the meeting. Each section should be discussed at the meeting and changes made as appropriate based on input by members of the IEP team.

1. Strengths, Preferences, and Interests: Provide information on student's relative areas of strength in academic areas including non-academic school activities. Provide information about the student's learning preferences and interests.

2. Parent Input and Concerns Relevant to Educational Progress: This information should be discussed at the IEP Team meeting. Ask the parents for concerns about their child's educational performance. Follow-up with parent and document any concerns related to student's educational needs, goals, and/or services.

3. Test Scores: Scores reflecting the student's performance on state, district wide and other assessments may be gathered prior to the meeting. Document and review results of the prior year's assessment results including any of the following that apply:
   - Smarter Balanced Assessment Consortium (SBAC) for English/Language Arts Overall and for Reading and Listening and Writing and Research, Mathematics overall and for Concepts and Procedures and Mathematical PracticesCalifornia Alternate Assessment (CAA)
   - English Language Development Test (EL Students)
   - Physical Fitness Test (Grades 5, 7, & 9)
   - Other Assessment Data, including results of district wide and/or individually administered assessments. For preschoolers/TK/ and K students who won't turn 6 during the school year include DRDP *2015.*
   - Hearing and Vision Screening: Enter date and if the student passed or failed the hearing and vision screening. Note the reason for "other", such as parent exemption.
     Notes:
     - Hearing and vision screening results must be within a year of any assessment administered as part of the student's determination for eligibility.
     - Staff must ensure that student passed his/her vision and hearing screenings prior to administering tests to ensure validity and reliability of test results.
     - Student being considered for eligibility under visual impairment, hearing impairment, deafness, blindness, and/or deafness-blindness will not pass vision and/or hearing screenings.

4. Pre-academic/Academic/Functional Skills: Summarize Pre-academic/Academic/ Functional skills, including the student's performance in the classroom, levels of mastery of the California content standards, progress in the curriculum, etc. Pre-academic and functional skills should address the student's development of readiness concepts for continued academic progress in the general education curriculum, as appropriate. Include classroom performance in all academic areas.

5. Communication: For the students with identified areas of need in communication, describe the student's articulation, voice, fluency, and language needs. If this is not an area of concern, *provide a brief and/or general information about the student's overall functioning in this area. Ex. Based on data (i.e., work samples, observation, parent report, teacher report, SST records, district/statewide assessments, etc.), this is not an area of concern.*

6. Gross/Fine Motor Development: For a student, who has been identified with motor development concerns, describe his or her specific skills and/or needs. If this is not an area of concern, *provide a brief and/or general information about the student's overall functioning in this area. Ex. Based on data (i.e., work samples, observation, parent report, teacher report, SST records, district/statewide assessments, etc.), this is not an area of concern.*

7. Social/Emotional/Behavioral Development: Describe the student's social/emotional/ behavioral strengths and needs. If this is not an area of concern, *provide a brief and/or general information about the student's overall functioning in this area. Ex. Based on data (i.e., work samples, observation, parent report, teacher report, SST records, district/statewide assessments, etc.), this is not an area of concern.*

8. Vocational: Include strengths, interests, and needs related to pre-vocational/ vocational skills. Address traits, such as work habits, initiative, completion of classroom or school site jobs, etc.

9. Adaptive/Daily Living Skills: For those students with needs in self-help, specify skills such as dressing, toileting, feeding, etc. If this is not an area of concern, *provide a brief and/or general information about the student's overall functioning in this area. Ex. Based on data (i.e., work samples, observation, parent report, teacher report, SST records, district/statewide assessments, etc.), this is not an area of concern.*

10. Health: Describe pertinent medical information that relates to the student's educational progress. If this is not an area of concern, *provide a brief and/or general information about the student's overall functioning in this area. Ex. Based on data (i.e., work samples, observation, parent report, teacher report, SST records, district/statewide assessments, etc.), this is not an area of concern.* Indicate whether or not the student has an Individual Health Plan by checking yes or no.

11. Area/s of Need: Indicate areas of educational need that have been identified by the IEP Team based on assessments and present levels of academic achievement and functional performance and/or special factors. Note: There must be a corresponding goal for every identified area of need.

Educational Benefit Reminder

- *Are the student's strengths, preferences, and interests clearly identified?*
- *Are the concerns of the parent identified?*
- *Are all sections of the Present Levels of Academic Achievement and Functional Performance addressed including documentation of "no concerns noted at this time?*
- *Does this clearly reflect the student's performance in the educational setting?*
- *Do the Present Levels of Academic Achievement and Functional Performance reflect all needs identified in the assessments?*

FORM 4 – SPECIAL FACTORS

1. Assistive Technology: Does the student require assistive technology devices and services or low incidence services, equipment and materials to meet educational goals and objectives? Check yes or no. If yes, specify the type of devices, services, equipment, and/or materials needed.

2. Low Incidence: *This applies only to the students with the following eligibility categories: DB, VI, OI, HH, and Deaf.* Low incidence equipment is indicated only if it is required to meet specific educational needs. Check yes or no. If yes, specify.
   Note: Best practice – assistive technology should be addressed in the Supplemental Aids and Services section and/or in a goal.

3. Blindness or Visual Impairment: Is the student blind or visually impaired? If the student is visually impaired, indicate whether instruction in Braille will be provided, and if not, why? If the student will not be using Braille he/she may use large print text or other modified input.

4. Deaf or Hard of Hearing: If the student 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. If the student is not deaf or hard of hearing, indicate "N/A".

5. English Learner: If the student is an English Learner complete the sections listed below.
   a. Does the student need linguistic supports during integrated ELD? If yes, indicate how this support will be provided. Most students that are functioning in the intermediate range or below in their English language acquisition will need *linguistic supports.* This is support provided to assist the student in accessing their education. For example, if a student would benefit from the use of a bilingual dictionary or thesaurus to complete tests, preview/review, if a student needs the directions to learning a new math concept provided in their language (written or by an interpreter), etc. Examples of providing primary language support would be to preview/review or directions on tests or assignments in native language Examples of primary language support would be:
      - Translation of test or assignment directions in native language by an interpreter or use of a bilingual dictionary (talking or written)
      - Translation of a new math concept in the native language by an interpreter or bilingual dictionary (talking or written)

   b. Indicate where the ELD services will be provided to the student. General Education or Special Education

      This refers to the required English Language Development (ELD) services that all English learners are required to receive (sometimes this is integrated in the context of a general education class and sometimes it is a pull out non SPED but general education service; however, it must be targeted to the student's ELD levels and needs). The IEP team may determine if the ELD daily service is going to be provided in a pull-out special education setting or within the general education setting (pull-out of integrated in class). Typically, most students with disabilities that are EL should receive their services in the general education setting. ELD is not a special education service.

   c. The student will participate in the following type of program:

Structured English Immersion refers to a setting where the student that is an English learner is immersed in all English throughout most of the day. It is one program option.

If *"Other parent/guardian/family selected multilingual/language acquisition program," is selected, provide a description.*

If applicable, provide any additional comments related to the student's English Language Development (ELD)

6. Behavior: Does the student's behavior impede learning? Check yes or no. If yes, describe how the behavior impedes learning. Specify positive behavior interventions, strategies, and supports to address the behaviors. Check if there is a Behavior Intervention Plan and attach a copy to the IEP. If there is a behavior goal, check the appropriate box to indicate a goal is included in the IEP to address the student's behavior.

FORM 5 – STATEWIDE ASSESSMENTS

Participation in the California Assessment of Student Performance and Progress (CAASPP): Indicate how the student will participate in CAASPP:

English Language Arts (3rd – 8th grade; 11th grade)

- Choose "out of testing range" if the student is not between 3rd and 8th grade or 11th grade
- Smarter Balance Assessment Consortium (SBAC)
  - The IEP team determines if the student needs allowable designated supports and/or accommodations.
  - If the student does not need designated supports or accommodations, choose "SBAC without Designated Supports or Accommodations"
  - If the student needs designated supports and/or accommodations, choose the correct boxes and indicate the appropriate embedded or non-embedded items.
  - If Accessibility Support is needed for the student, approval must be obtained from CDE. Note: Contact the district or test site CAASPP coordinator to complete and submit the appropriate form to CDE.
- Alternate Assessment
  - Indicate participation in the alternate assessment if the student meets the criteria for taking the alternate assessment.
  - If the student does not need designated supports or accommodations, choose "Alternate Assessment without Designated Supports or Accommodations"
  - If the student needs designated supports and/or accommodations, choose the correct boxes and indicate the appropriate embedded or non-embedded items.
  - If Accessibility Support is needed for the student, approval must be obtained from CDE. Note: Contact the district or test site CAASPP coordinator to complete and submit the appropriate form to CDE.

Mathematics (3rd – 8th grade; 11th grade)

- Choose "out of testing range" if the student is not between 3rd and 8th grade or 11th grade
- Smarter Balance Assessment Consortium (SBAC)
  - The IEP team determines if the student needs allowable designated supports and/or accommodations.
  - If the student does not need designated supports or accommodations, choose "SBAC without Designated Supports or Accommodations"
  - If the student needs designated supports and/or accommodations, choose the correct boxes and indicate the appropriate embedded or non-embedded items.
  - If Accessibility Support is needed for the student, approval must be obtained from CDE. Note: Contact the district or test site CAASPP coordinator to complete and submit the appropriate form to CDE.
- Alternate Assessment
  - Indicate participation in the alternate assessment if the student meets the criteria for taking the alternate assessment.
  - If the student does not need designated supports or accommodations, choose "Alternate Assessment without Designated Supports or Accommodations."
  - If the student needs designated supports and/or accommodations, choose the correct boxes and indicate the appropriate embedded or non-embedded items.
  - If Accessibility Support is needed for the student, approval must be obtained from CDE. Note: Contact the district or test site CAASPP coordinator to complete and submit the appropriate form to CDE.

Science (5th, 8th and high school only)

- Choose "out of testing range" if the student is not in 5th, 8th or high school.
- California Science Test (CAST)
  - If the student does not need designated supports or accommodations, choose "CAST without Designated Supports or Accommodations"
  - If the student needs designated supports and/or accommodations, choose the correct boxes and indicate the appropriate supports and/or accommodations.

- If Accessibility Support is needed for the student, approval must be obtained from CDE. Note: Contact the district or test site CAASPP coordinator to complete and submit the appropriate form to CDE.
- If Accessibility Support is needed for the student, approval must be obtained from CDE. Note: Contact the district or test site CAASPP coordinator to complete and submit the appropriate form to CDE.

- Alternate Assessment
  - Indicate participation in the alternate assessment if the student meets the criteria for taking the alternate assessment.
  - If the student does not need designated supports or accommodations, choose "Alternate Assessment without Designated Supports or Accommodations"
  - If the student needs designated supports and/or accommodations, choose the correct boxes and indicate the appropriate embedded or non-embedded items.
  - If Accessibility Support is needed for the student, approval must be obtained from CDE. Note: Contact the district or test site CAASPP coordinator to complete and submit the appropriate form to CDE.

For students taking the Alternate Assessment, the IEP team must review the criteria for taking alternate assessments and check the corresponding box in the IEP document. The team must document the reason why the student is not participating in the SBAC and why participation in alternate assessment is appropriate.

Physical Fitness Test (5th, 7th, & 9th grades only):
- Specify if the student will be taking the Physical Fitness Test with accommodations or modifications.

Other Statewide or District-wide Assessments/Alternate Assessments
- Check as needed (for example, Literacy Screening).

Desired Results Developmental Profile (Ages 3-5 Years)
- If the child will take DRDP, indicate the appropriate adaptations that will allow the student to be accurately assessed in his or her typical environment.

ELPAC
- For each area, indicate if the student will be tested with or without Designated Support or Accommodations. Additionally, indicate if the student requires non-embedded accommodations and/or unlisted resources (requires CDE approval).

Alternate Assessment to ELPAC
- Document the specific area/s for assessment and specify the name of the alternative assessment being used.

Standards Based Test in Spanish (STS)
- For each area, indicate if the student will be tested with or without designated supports or accommodations. Specify designated supports and accommodations for each area tested.

Educational Benefit Reminder

- *Has the IEP Team addressed all the special considerations the student may require?*
- *Does the student demonstrate behavior(s) that impede learning, and if so, how will positive interventions, strategies, and supports be provided?*
- *Does the IEP Team agree on the areas of need to be addressed in goals as identified in the Present Levels of Academic Achievement and Functional Performance and in Special Factors?*
- *Is participation on state and district wide assessments, including accommodations and modifications, in accordance with state guidelines?*
- *Are alternate assessment(s), including the reasons, clearly noted and described?*
- *If a student requires any waivers or exemptions to the CAHSEE, is this clearly documented?*

6A – ANNUAL GOALS

IEP Form 6B is required for students who take the statewide alternate assessment. These students require annual goals AND objectives. Best practice would be to use Form 6B for any students who are working on pre-academic or functional skills.

1. Areas of Need: Indicate areas of educational need that have been identified by the IEP Team based on assessments and present levels of academic achievement and functional performance and/or special factors. Reminder: There must be a corresponding goal for every identified area of need.

2. Baseline: Specify the student's baseline performance. The baseline should describe the child's current performance on the skills identified in the goal. The baseline should be a quantifiable description of classroom performance in the specified area. (i.e., reads 20 sight words, writes a simple paragraph of 2-4 sentences, etc.)

3. Measurable Annual Goal #: Enter the number of the annual goal.

4. Standard: First consider standards at the student's chronological grade level. Also consider pre-requisite skills, levels of the cognitive domain, accommodations, modifications, and assistive technology.

5. Annual Goal: Annual goals must be measurable and relate to the baseline data. Goals must include:
   - **WHO – Student**
   - **DOES WHAT - Observable Behavior –** describes what the student will do to complete goal or objective/benchmark: *When given a choice of an activity, "Student" will point and label the item/activity following no more than one (1) prompt on 3/5 trials 100% of the time as measured by teacher recorded data.*
   - **WHEN – By Reporting Date**
   - **GIVEN WHAT - Conditions –** describes the "givens" that will need to be in place for the goal or objective/benchmark to be completed. *When given a choice of an activity, "Student" will point and label the item/activity following no more than one (1) prompt on 3/5 trials 100% of the time as measured by teacher recorded data.*
   - **HOW MUCH - Mastery** – describes the performance accuracy of the behavior needed for the goal and objective/benchmark to be considered mastered. *When given a choice of an activity, "Student" will point and label the item/activity following no more than one (1) prompt on 3/5 trials 100% of the time as measured by teacher recorded data.*
   - **HOW MUCH - Criteria –** describes how many times the behavior must be observed for the goal or objective/benchmark to be considered completed. *When given a choice of an activity, "Student" will point and label the item/activity following no more than one (1) prompt on 3/5 trials 100% of the time as measured by teacher recorded data.*
   - **HOW WILL IT BE MEASURED – Performance Data**

6. Enables the student to be Involved and Progress in the General Curriculum: Select if student is working on the goal written to California content standards.

7. Addressed other Educational Needs Resulting from Disability: Select if the student is working on other educational needs (i.e., behavior, social skills, self-help, etc.).

8. Linguistically Appropriate Goals: To be linguistically appropriate, the goals should align to the student's assessed level on the ELPAC (if appropriate) and the CDE English Language Standards.

9. Secondary Transition Goal: If the goal is related to secondary transition, check the box and then check the appropriate area: Education/Training, Employment, or Independent Living.

10. Progress Reports: Document the date and the summary of the progress.

Educational Benefit Reminder

- *Are there goals and objectives/benchmarks (if appropriate) for each area of need and vice versa?*
- *Are the goals and objectives/benchmarks measurable?*
- *Do the goals and objectives/benchmarks enable the student to be involved/progress in the curriculum?*
- *Are all other educational needs resulting from the disability addressed?*
- *If the student is an English Learner, are the goals and objective/benchmarks linguistically appropriate?*
- *Is the person(s) identified who is primarily responsible for implementing the goals and objectives/benchmarks, and monitoring progress?*

IEP FORM 6B – ANNUAL GOALS AND OBJECTIVES/BENCHMARKS

Use IEP Form 6A for students who are not taking statewide alternate assessment. Objectives or benchmarks are no longer required for students who are accessing the general curriculum. Draft goals (and objectives or benchmarks, if required) may be developed prior to the meeting and reviewed with the team for changes. Annual goals must be measurable, and at least one annual goal must be written for each area of identified need.

Follow the directions for Form 6A above and include measurable objectives for each goal. Objectives are sub skills leading towards goal mastery (i.e. multiply 2 digits by 3 digits; analyze word problem to identify data needed to determine area of a rectangle).

FORM 7A – SERVICES OFFER OF FAPE

Special education and related services are determined at the IEP meeting only after goals and if appropriate objectives / benchmarks have been finalized. Placement decisions must be made in conformity with the least restrictive environment (LRE) provisions. These provisions direct that to the maximum extent appropriate, students with disabilities be educated with typically developing peers, and that special classes, separate schooling or other removal of students from the general education environment occurs only if the nature or severity of the disability is such that education in general education classes with the use of supplementary aids and services cannot be achieved satisfactorily. The placement must be made in the school that the student would attend if the student did not have a disability unless unique circumstances prevent this placement. Special education and related services and supplementary aids and services should be based on peer-reviewed research to the extent practicable.

1. Service Delivery Options Considered: Discuss and document service delivery options considered. The team must first consider placement in the general education classroom with supports prior to recommending a more restrictive setting all or part of the day.

   Follow the continuum of services below as a guide to determining LRE:
   - General Education Class
   - General Education Class – Supplemental aids or services
   - General Education Class – Some direct instruction by special education staff. Less than 21% of time out of the classroom for special education services.
   - General Education Class – 21% to 60% of instructional day in a separate classroom.
   - Some/or no instruction in General Education Class – 60% or more of the instructional day in a separate classroom (intensive services).
   - Special day school – Separate facility (public or nonpublic) with no general education students on campus.
   - Residential School.
   - Hospital Program.
   - Home Instruction.

2. Describe the consideration given to any potential harmful effect on the child or on the quality of services that he or she needs
   Discuss and document potential harmful effects of the identified placement. Potential harmful effects for the IEP team to consider may include, but not limited, to the following:
   - decreased access to the instructional opportunities available in integrated settings
   - decreased access to instructional opportunities with typical peers
   - decreased opportunities for appropriate social interactions with typically developing peers
   - potential negative impact to student's self-esteem
   - limited access to peers in the home community since placement is not located at the student's school of residence

3. Supplementary Aids, Services and Other Supports for Student and/or School Personnel:
   Delineate the specific supplementary aids and services and/or supports offered for the student and offered for school personnel

   Program Accommodations:
   - Discuss and document the student's need for program accommodations.
   - If the student needs program accommodations, specify accommodations and indicate start and end dates and location.

   Accommodations *do not* fundamentally alter or lower expectations or standards in instructional level, content, or performance criteria

Program Modifications:

- Discuss and document the student's need for program modifications.
- If the student needs program modifications, specify modifications and indicate start and end dates, frequency, duration, and location.

Modifications fundamentally alter or lower expectations or standards in instructional level, content, or performance criteria.

Supports for School Personnel:

- Discuss and document the need for supports for school personnel.
- If supports for school personnel are necessary, specify supports and indicate if the supports are for the student of school personnel. Indicate start and end dates, frequency, duration, and location.

4. Special Education and Related Services: The team needs to determine the special education and related services that will provide educational benefit and facilitate progress on the goals for the student (e.g. specialized academic instruction, health and nursing, language and speech, etc.). Identify the type of service. Indicate if the service will be individual or group**.** NOTE: Specialized Academic Instruction (SAI) is the core special education service that most students receive. The duration and frequency for SAI is based on the amount of time the Special Education Specialist/Full Inclusion Specialist is adapting curriculum and/or working with the student. SAI is not based on the amount of time a general education teacher may spend adapting curriculum for a student. SAI is a service not a location. If the service is to support secondary transition, check the secondary transition box. See CALPADS codes below:

Specialized Instruction

330	Specialized academic instruction	Adapting, as appropriate to the needs of the child with a disability the content, methodology, or delivery of instruction to ensure access of the child to the general curriculum, so that he or she can meet the educational standards within the jurisdiction of the public agency that apply to all children. (RSP- school based, RSP, SDC inclusion services, SDC-public integrated, SDC- public segregated, SDC-non-public school.)
340	Intensive individual instruction	IEP Team determination that student requires additional support for all or part of the day to meet his or her IEP goals. Such as the use of an one-on-one instructional assistant.
350	Individual & small group instruction	Instruction delivered one-to-one or in a small group as specified in an IEP enabling the individual(s) to participate effectively in the total school program. (FOR PRESCHOOL ONLY)

Related Services

415	Language and Speech	Includes receptive and expressive language, articulation, voice, and fluency.
425	Adapted physical education	Direct physical education services provided by an APE.
435	Health & nursing – specialized physical health care services	Specialized physical health care services means those health services prescribed by the child's licensed physician and surgeon requiring medically related training of the individual who performs the services and which are necessary during the school day to enable the child to attend school. SPHCS include but are not limited to suctioning, oxygen administration, catheterization, nebulizer treatments, insulin administration, and glucose testing.

436	Health & nursing – other services	This includes services that are provided to students by qualified personnel pursuant to an IEP when a student has health problems, which require nursing intervention beyond basic school health services. Services include managing the health problem, consulting with staff, group & individual counseling, making appropriate referrals and maintaining communication with agencies and health care providers.
445	Assistive technology services	Any specialized training or technical support for the incorporation of assistive devices, adapted computer technology or specialized media with the educational programs to improve access for students.
450	Occupational therapy	OT includes services to improve student's educational performance, postural stability, self-help abilities, sensory processing and organization, environmental adaptation and use of assistive devices, motor planning and coordination, visual perception and integration, social play abilities and fine motor.
460	Physical therapy	Services provided by a register PT pursuant to an IEP when assessment shows discrepancy between gross motor performance and other educational skills.
510	Individual counseling	One-to-one counseling, provided by a qualified individual pursuant to an IEP.
515	Counseling & guidance	Counseling in a group setting, provided by a qualified individual pursuant to an IEP.
520	Parent counseling	Individual or group counseling provided by a qualified individual pursuant to an IEP to assist the parent(s) of special education students in better understanding and meeting their child's needs.
525	Social work services	Includes services provided pursuant to an IEP by a qualified individual.
530	Psychological services	These services provided by a credentialed or licensed psychologist pursuant to an IEP.
535	Behavior intervention services	A systematic implementation of procedures designed to promote lasting, positive changes in the student's behavior resulting in greater access to a variety of community settings, social contacts, public events, and placement in the LRE.
540	Day treatment services	Structured education, training and support services to address the student's mental health needs.
545	Residential treatment services	A 24-hour out-of-home placement that provides intensive therapeutic services to support the educational program. Note: Mark residential services as "Daily" in "Frequency" and 1,440 minutes under "Duration" as the service is by its nature provided 24/7. Any other mental health service received (i.e. counseling, behavioral intervention, etc.), in addition to the residential care service, would reflect the specific frequency and duration of that service.

Coding for Residential Placements

When students are placed in residential placements by the IEP team it is critical that the IEP reflect this type of placement. Refer to example below:

IEP/CALPADS Field	Code	Description
Primary Residence	230	Residential School/Dormitory
Special Education Program Setting	301	Residential Facility
Service/s	330	Specialized Academic Instruction
	540	Day Treatment Services
	545	Residential Treatment Services
	865	Case Management
		Other Related Services as appropriate
Provider	100	District of Service (or)
	410	Nonpublic school (NPS) under contract with SELPA or district
Service Location	360	Residential Facility (or)
	550	Public Residential School

Low Incidence Services

610	Specialized services for low incidence disabilities	Low incidence services are defined as those provided to the student population of orthopedic impairment (OI), visual impairment (VI), deaf, hard of hearing (HH), or deaf-blind (DB). Typically, services are provided in education settings by an itinerant teacher or the itinerant teacher/specialist. Consultation is provided to the teacher, staff and parents as needed.
710	Specialized deaf and hard of hearing services	These services include speech therapy, speech reading, auditory training, and/or instruction in the student's mode of communication. Rehabilitative and educational services; adapting curricula, methods, and the learning environment; and special consultation to students, parents, teachers, and other school personnel may also be included.
715	Interpreter services	Sign language interpretation of spoken language to individuals, whose communication is normally sign language, by a qualified sign language interpreter.
720	Audiological services	These services include measurements of acuity, monitoring amplification, and Frequency Modulation system use.
725	Specialized vision services	This is a broad category of services provided to students with visual impairments. It includes assessment of functional vision; curriculum modifications necessary to meet the student's educational needs -- including Braille, large type, aural media; instruction in areas of need; concept development and academic skills; communication skills (including alternative modes of reading and writing); social, emotional, career, vocational, and independent living skills. It may include coordination of other personnel providing services to the students (such as transcribers, readers, counselors, orientation & mobility specialists, career/vocational staff, and others) and collaboration with the student's classroom teacher.
730	Orientation and mobility	Students with identified visual impairments are trained in body awareness and to understand how to move. Students are trained to develop skills to enable them to travel safely and independently around the school and in the community. It may include consultation services to parents regarding their children requiring such services according to an IEP.

735	Braille transcription	Any transcription services to convert materials from print to Braille. It may include textbooks, tests, worksheets, or anything necessary for instruction. The transcriber should be qualified in English Braille as well as Nemeth Code (mathematics) and be certified by appropriate agency.
740	Specialized orthopedic services	Specially designed instruction related to the unique needs of students with orthopedic disabilities, including specialized materials and equipment.
745	Reader Services	
750	Note taking services	Any specialized assistance given to the student for the purpose of taking notes when the student is unable to do so independently. This may include, but is not limited to, copies of notes taken by another student, transcription of tape- recorded information from a class, or aide designated to take notes.
755	Transcription Services	Any transcription service to convert materials from print to a mode of communication suitable for the student. This may also include dictation services as it may pertain to textbooks, tests, worksheets, or anything necessary for instruction.
760	Recreation Services	Therapeutic recreation and specialized instructional programs designed to assist pupils to become as independent as possible in leisure activities, and when possible and appropriate, facilitate the pupil's integration into general education programs.

Transition Services

820	College Awareness Preparation	College awareness is the result of acts that promote and increase student learning about higher education opportunities, information and options that are available including, but not limited to, career planning, course prerequisites, admission eligibility and financial aid.
830	Vocational assessment, counseling, guidance, and career assessment	Organized educational programs that are directly related to the preparation of individuals for paid or unpaid employment and may include provision for work experience, job coaching, development and/or placement, and situational assessment. This includes career counseling to assist student in assessing his/her aptitudes, abilities, and interests in order to make realistic career decisions.
840	Career awareness	Transition services include a provision for in self-advocacy, career planning, and career guidance.
850	Work experience education	Work experience education means organized educational programs that are directly related to the preparation of individuals for paid or unpaid employment, or for additional preparation for a career requiring other than a baccalaureate or advanced degree.
855	Job Coaching	Job coaching is a service that provides assistance and guidance to an employee who may be experiencing difficulty with one or more aspects of the daily job tasks and functions. The service is provided by a job coach who is highly successful, skilled and trained on the job that can determine how the employee that is experiencing difficulty learns best and formulate a training plan to improve job performance.

860	Mentoring	Mentoring is a sustained coaching relationship between a student and teacher through on-going involvement and offers support, guidance, encouragement and assistance as the learner encounters challenges with respect to a particular area such as acquisition of job skills. Mentoring can be either formal as in planned, structured instruction of informal that occurs naturally through friendship, counseling and collegiality in a casual, unplanned way.
865	Agency linkages (referral and placement)	Service coordination and case management that facilitates the linkage of individualized education programs.
870	Travel Training (includes mobility training)	Orientation and mobility services means services provided to blind or visually impaired children by qualified personnel to enable those students to attain systematic orientation to and safe movement within their environments in school, home, and community.
890	Other transition services	These services may include program coordination, case management and meetings, and crafting linkages between schools and between schools and post-secondary agencies. (Note: This code should be used with caution and only when appropriate)
900	Other Special Education/ Related Services	Any other specialized service required for a student with a disability to receive educational benefit. (Note: Review all other service codes and contact the SELPA before using this code.)

5. Start and End Date: This will often be the same start/end dates for the primary service on the IEP.

6. Provider: Indicate the provider of special education and/or related services. These codes are used to indicate the student's services' provider.

Code	Service Provider
100	District of service
110	County office of education
120	SELPA
130	Another district, county, or SELPA
200	WorkAbility
210	Transition Partnership Program (TPP) Check if this is ok.
220	Regional Center
230	Alcohol and drug prevention programs
240	Child development funded program
250	Head Start
300	California Department of Mental Health (DMH)
310	California Children's Services (CCS)
320	California Department of Social Services (DSS)
330	California Department of Rehabilitation (DOR)
340	Employment Development Department (EDD)
400	Nonpublic agency (NPA) under contract with SELPA or district
410	Nonpublic school (NPS) under contract with SELPA or district
500	Other public program
600	Other private program

7. Frequency: Indicate the frequency of the service being provided, such as daily, weekly, monthly, yearly, or any other frequency.

8. Duration: Indicate duration of service and the number of times per frequency.

9. Location: Select the location of where the service is provided to the student from the following:

Code	Service Location
210	Home, instruction based on IEP team determination (not medical)
220	Hospital
310	Head Start program
320	Child development or child care facility
330	Public preschool
340	Private preschool
350	Extended day care
360	Residential facility

Code	Service Location
510	Regular classroom/public day school - Includes students who are fully included in general education classrooms. Also includes students who are seen under a "push in" model in the general education classroom and students who receive DIS services in the general education classroom. Additionally, students who receive services in a setting that includes other students with special needs are included here if there are general education students who are "reverse mainstream" students in that class for that portion of the day.
520	Separate classroom in public integrated facility - Includes students receiving special education "pullout" services, including RSP and DIS, or in a "special day class" model," etc.
530	State Special School
540	Separate school or Special Education Center or facility
550	Public residential school
560	Other public school or facility
570	Charter school (operated by an LEA/district)
580	Charter school (operated as an LEA/district)
610	Continuation school
620	Alternative work education center/work study facility
630	Juvenile court school
640	Community school
650	Correctional institution or facility
710	Community college
720	Adult education facility
810	Nonpublic day school
820	Nonpublic residential school, in California
830	Nonpublic residential school, outside California
840	Private day school (not certified by Special Education Division)
850	Private residential school (not certified by Special Education Division)
860	Parochial school
890	Service provider location
900	Any other location or setting

10. Transportation: Check "No" if the IEP team determines that the student does not need special education transportation. Check "Yes" if the student will require special education transportation and specify the type of transportation (e.g. door to door, wheel chair bus, etc.). Contact your Special Education Department to obtain information and clarification on transportation as a related service for students with disabilities.

11. Extended School Year (ESY): Discuss if the student needs ESY to receive FAPE. Check yes or no. If yes, specify in the grid the services the student will receive, the start and end date, provider, frequency, duration, and location. An explicitly defined rationale must be included in determining whether a student does or does not need ESY. Attaching the ESY form provides this rationale. If the ESY form is not attached a written description must be contained in the text box following "Rationale".

Note: *ESY shall be provided to a student with a disability who the IEP deems requires special education and related services in excess of the regular academic year. Such students shall have disabilities which are likely to continue indefinitely or for a prolonged period of time, and interruption of the student's educational programming may cause regression, when coupled with limited recoupment capacity, rendering it impossible or unlikely that the student will attain the level of self-sufficiency and independence that would otherwise be expected in view of his or her disability.* (5 CCR 3043)

Educational Benefit Reminder

- *Was the determination of the appropriate supplementary aids and services, and special education and related services completed after the goals were finalized?*
- *Are the appropriate services identified to support progress toward all goals including: progress in the general curriculum, participation in extracurricular activities, and other nonacademic activities?*
- *Are the special education, related services, and supplementary aids and services based on peer-reviewed research to the extent practicable?*
- *Are the start/end dates, provider, frequency, duration, and location specified for supplementary aids and services as well as special education and related services?*

FORM 7B – EDUCATIONAL SETTING
OFFER OF FAPE

1. Physical Education: Check the type of physical education, if applicable.
   - General Physical Education: Movement activities are provided by the general PE teacher and may include accommodations, adaptations, or modifications, which are made by the general PE teacher.
   - Specially Designed Physical Education: Physical education programming, for a special education class, that requires minimal or limited adaptations, accommodations, or modifications, and is taught by the person, general or special educator, who normally teaches physical education for this population.

   Note: Adapted physical education is a physical education program for children with disabilities who have needs that cannot be solely met in general or specially designed physical education. APE must be indicated on the special education and related services section of the IEP.

2. District of Service: Specify district providing the majority of services to the student.

3. School of Attendance: This is the school where the student is enrolled.

4. All Special Education Services Provided at Student's School of Residence: Check yes or no to the question "all special education services provided at the student's school of residence." If the team determines "no," rationale must be documented.

5. Preschool Program Setting (3-5 year-old Preschool and 4 year-old TK/Kgn): Indicate the type of school setting the student attends. If the student is currently enrolled in TK/Kgn but will not turn 5 until after the next CALPADS Census Day (first Wednesday of October), this category must be completed. *If the student is dually or concurrently enrolled in general education and a special education program for an equal amount of time, consider the student as being in a regular early childhood or kindergarten program.* If IEP team is prepared to project an additional Preschool Program Setting, click yes on form.

Code	Preschool Program Setting (3-5 year-old Preschool and 4 year-old TK/Kgn)
200	Home: For infants ages 0-35 months old, early intervention services are provided primarily in the principal residence of the child's family or caregivers. For children ages 3-5 years old, this is the setting when children receive all special education and related services in the principal residence of the child's family or caregivers. This code value is not applicable to students age 5 and above in TK/Kgn).
201	Regular Early Childhood Program or Kindergarten: The majority of special education services are provided in a regular early childhood or kindergarten program. This code value is only applicable to children ages 3-5 years old in preschool and 4 years old in TK/Kgn. Early childhood programs include, but are not limited to: • Head Start • Kindergarten • Reverse mainstream classrooms • Private preschools • Preschool classes offered to an eligible pre-kindergarten population by the public school system • Group childcare
203	Separate Class: This code value is only applicable to children ages 3-5 years old in preschool and 4 year old in TK/Kgn. In this setting, the student attends a special education program in a class with less than 50% nondisabled children.

Code	Preschool Program Setting (3-5 year-old Preschool and 4 year-old TK/Kgn)
204	Service Provider Location: This code value is only applicable to children ages 3-5 years old in preschool and 4 year old in TK/Kgn. This is the setting when children receive all special education and related services from a service provider, and child did not attend an early childhood program or special education program provided in a separate class, separate school, or residential facility. For example, speech instruction provided in: • Private clinician's office • Clinician's offices located in school buildings • Hospital facilities on an outpatient basis • Libraries and other public locations
300	Separate School: This is a placement setting where children receive all special education programs in public or private day schools designed specifically for children with disabilities.
301	Residential Facility: This is where children receive all special education and related services in publicly or privately-operated residential schools or residential medical facilities on an inpatient basis.

6. (Note: Answer two items below for students ages 3-5 in preschool and 4 year old in TK/Kgn only if the Preschool Program Setting is 201- Regular Early childhood Program or Kindergarten setting)
The location where the student receives the majority of their special education services:
Same as above or Different from above
Is the Regular Early Childhood Program or Kindergarten Program ten hours per week or greater?
Yes or No

7. Program Setting (TK/Kgn or greater and age 5-22): Indicate the type of school setting the student attends. If the student turns 5 on or before the next CALPADS Census Day (first Wednesday of October) and attends or will attend TK/Kgn or greater prior to the next CALPADS Census Day, this category must be completed. If IEP team is prepared to project an additional Program Setting, click yes on form.

Code	Program Setting (TK/Kgn or greater and age 5-22)
300	Separate School: This is a setting where children receive all special education and related services in educational programs for greater than fifty percent of the school day in public or private day schools specifically for children with disabilities.
301	Residential Facility: Public and private residential facilities where students reside during the school week and receive special education and related services for greater than 50% of the school day. Do not include children who receive special education programs at the facility but do not live there.
400	Regular Classroom/Public Day School: A program setting that includes at least 50% non-disabled children. Select if the student attends classes on a general education school campus regardless of the type of program
401	Homebound/Hospital: This setting is where students receive special education programs and related services in homebound/hospital environment. Do not include children with disabilities whose parents have opted to home-school them and who receive special education at the public expense.
402	Correctional Facility: This setting includes students who received special education programs in correctional facilities. These data are intended to be a count of all children receiving special education in short-term detention facilities (community-based or residential), or correctional facilities.

403	Parentally Placed in Private School: This setting is where students have been enrolled by parents or guardians in regular, parochial, or other private schools and whose basic education is paid through private resources and who receive special education and related services at public expense from a local educational agency or intermediate educational unit under a service plan. Include children whose parents chose to home-school, but who receive special education and related services at public expense. Do not include children placed in private schools by the LEA.

Code	Program Setting (TK/Kgn or greater and age 5-22)
500	Home schooled per IEP/Independent study charter school/Virtual charter school: This setting is where via the IEP process the student is home schooled or enrolled in an independent charter or virtual charter school.

8. Percentage of Time Outside and In Class & Extracurricular & Non Academic Activities (ages 5 (TK/Kgn)-22): Document the percentage of time the student is ***outside*** the regular environment and document percentage of time the student is ***in*** the regular education environment. Consider the full day including lunch, recess, passing periods, etc. If IEP team is prepared to project an additional Program Setting, click yes on form. This is not entered for 5 year olds in preschool.

9. Student Will Not Participate in the Regular Class & Extracurricular & Non Academic Activities: Document the regular education environments where the student will not participate with typically developing peers: Provide rationale for non-participation.

10. Other Agency Services: Note other agency services the child is receiving.

11. Promotion Criteria: Check appropriate box. District criteria are the same for students without disabilities. Progress on goals or 'other' should be noted if the child's curriculum has been modified to meet his/her unique needs.

12. Parents will be Informed of Progress and How: Check the frequency and how the progress will be reported. NOTE: Progress reporting should match frequency of report card schedule.

13. Activities to Support Transition: If the student is going through a transition (preschool to kindergarten, special education to general education, etc.), document the activities to support the transition.

Educational Benefit Reminder

- *Is there a clear description of the location of services, including why some services may not be provided at the child's school of residence, if appropriate?*
- *Is there a clear description of the amount of time the student is outside the general education environment, including an explanation of why the student will not participate in general education for all or part of the day?*
- *If appropriate, are the activities clearly identified to support transition from preschool to kindergarten, from special education and/or NPS to general education, 8th-9th grade, etc.?*
- *If appropriate, is the graduation plan identified for students Grade 8 or higher?*

FORMS 8A & 8B – SIGNATURE AND PARENT CONSENT

1. IEP Meeting Participants: Have all meeting participants sign and date that they were in attendance. Make sure to include titles of each participant.

2. Consent: Have the parent(s)/guardian/surrogate/adult student initial, if they agree in-whole or in-part to the IEP. If they agree only in-part, document the areas they are not in agreement with.

   Not Eligible: If team determines child is not eligible for special education, check the appropriate box.

   If the parent(s)/guardian/surrogate/adult student declines the initiation of special education and related services, check the box.

   No Longer Eligible: If team determines child is no longer eligible for special education, check the appropriate box.

   After initialing appropriate response, parent(s)/guardian/surrogate/adult student signs to authorize and approve the IEP.

3. Parent Involvement: **As a means of improving services and results for your child did the school facilitate parent involvement?** When in the "Future IEP" be sure to uncheck the box prior to the IEP meeting. During the IEP meeting**,** check the appropriate box. This is a required CALPADS data field. One of the boxes must be checked. Note: you need to ask this question annually, and the parent needs to check the box. No response does not mean "we forgot to ask". If the parent(s)/guardian/surrogate/adult student checks "no", then the team needs to agree on a plan to address the issue in the coming year.

4. Public Benefits: If parent/guardian/surrogate/adult student agrees to authorize district access to health insurance benefits provided by Medi-Cal.

5. Parent(s)/guardian/surrogate/adult student received a copy of procedural safeguards, assessment reports (if appropriate), a copy of the IEP, and written notification of protections related to Medi-CAL benefits.

6. Students Enrolled in Private Schools by their Parents: If the student is enrolled in private school by his/her parent(s)/guardian/surrogate/adult student, check the box and refer for a Service Plan, if appropriate.

Note: Form 8A is used by the District/LEA/SELPA with Medi-Cal signatures.
Form 8B is used by the District/LEA/SELPA without Medi-Cal signatures.

Educational Benefit Reminder

- *Did all IEP Meeting participants sign and date, if required?*
- *Do the parent(s)/guardian/surrogate/adult student consent to all components of the IEP?*
- *If not, are areas of agreement and/or disagreement clearly specified?*
- *Are the next steps identified for reaching resolution, if appropriate?*
- *Are all required notifications marked for compliance?*

FORM 9 – IEP TEAM MEETING NOTES

Things to Consider:

- IEP notes are mandated when they add required content too complicated for the form
- IEP notes are helpful where they document compliance with mandatory procedures

Best Practices:

- Write notes contemporaneously with what is stated during the meeting. When a due process hearing is either pending or inevitable, take copious notes of what was said during the meeting.
- Document IEP team member participation or lack thereof: Include an IEP team member's recommendations, questions, consent and disagreement
- Document the school district's efforts to encourage participation – Especially important when the school district is trying to include a reluctant parent in the IEP discussion
- If other portions of the IEP document (i.e., special education and related services section) do not provide sufficient detail concerning the school district's offer and/or may not be easily understood by a parent, the IEP meeting comments should provide clarification.
- Proofread the IEP meeting comments to ensure that what is written is consistent with the other portions of the IEP.

What is *NOT* or *MAY NOT* be Required to be Included in IEP Meeting Notes:

- If a particular methodology is not necessary for a student to receive a FAPE, then it does not need to be addressed in the IEP. If methodology is an essential part of the student's program, it does need to be discussed and incorporated in the student's IEP.
- School districts are not required to document in the IEP the particular qualifications of teachers and staff. Document the qualifications of teachers and/or staff where necessary to demonstrate the IEP meets the unique needs of the student.
- Do not include in the IEP meeting comments information found in another portion of the IEP. Write more detailed comments in order to show compliance with the procedural requirements (such as parent participation, the IEP was not predetermined and prior written notice) *or* when the matter is contentious and/or may become a potential due process case.

Important Notes on Parent Refusal and/or Disagreement:

- If a parent refuses to consent to the IEP, document in the IEP meeting comments the reason for the refusal if stated and any attempts made to address the parent's concerns.
- Document the parent's disagreement by attaching the parent's written disagreement to the IEP document (either written during or after the IEP meeting); and/or writing the parent's disagreement into the IEP meeting notes.
- Even if the parent refuses to sign IEP, the district should ask the parent to sign the IEP to indicate attendance at the meeting, but not agreement.
- If the student's parent wants to leave the IEP meeting before it is completed, encourage the parent to stay. If the parent refuses to do so, the IEP team may continue to meet but document the efforts made to persuade parent to stay and note time parent left.

Educational Benefit Reminder

- *Is this information a summary of the meeting?*
- *Does everyone agree that the information accurately reflects what was discussed and the agreements that were made?*
- *Are next steps clearly identified, including individuals responsible, if needed?*

FORM 10 – IEP AMENDMENT(S) / ADDENDUM PAGE

IDEA Section 614(d) (3) (D) In making changes to a child's IEP after the plan review IEP meeting for a school year, the parent(s)/guardian/surrogate/adult student of the child with a disability and the LEA may agree not to convene an IEP meeting for the purposes of making such changes, and instead develop a written document to amend or modify the child's current IEP.

IDEA Section 614(d) (3) (F) Changes to the IEP may be made either by the entire IEP Team by amending the IEP rather than by redrafting the entire IEP. Upon request, a parent(s)/guardian/surrogate/adult student shall be provided with a revised copy of the IEP with the amendments incorporated.

- Serves as the option for making minor amendments to the IEP if the parent(s)/guardian/surrogate/adult student and district agree that a meeting is not needed
- Attach this form to current IEP after getting consent and signature(s) from parent(s)/guardian/surrogate/adult student.
- Districts need to designate who can serve as the LEA representative. LEA representative is authorized to approve the amendments.
- Parent(s)/guardian/surrogate/adult student will receive a copy of the IEP with the amendments incorporated. The box at the bottom of the page will be initialed by the parent, etc. to indicate they have received this amendment.

Educational Benefit Reminder

- *Is the amendment clear?*
- *Do the parent(s)/guardian/surrogate/adult student and staff agree on the amendment?*
- *Are all affected staff (special education teacher(s), DIS provider(s), general education teacher(s), etc.), including the LEA representative, informed of the amendment/change?*
- *Is there documentation to indicate that the parent has received the copy of the IEP with the amendments incorporated?*