

THIS IEP INCLUDES :

- Transition
- Interim Service Plan

**NEW YORK CITY
DEPARTMENT OF EDUCATION
INDIVIDUALIZED EDUCATION PROGRAM**

CONFERENCE INFORMATION

CSE Case#10-55555.....
 Home District10..... Service District7.5.....
 Date3/22/2004.....
 TypeAnnual Review.....

STUDENT INFORMATION

Name .Thompkins, Joseph..... NYC ID# .55555555..... Date of Birth ^{*Age as of date of the conference.} .8/15/85..... Gender .Male.....
 Address .2356 University Avenue Apt. 3F..... Age* .18.7.....
 Phone .(718) 454-4455..... English LAB Year Spanish LAB Year Grade .Ungraded.....
 Language(s) Spoken/Mode of Communication .English.....
 Primary Agency with whom student is involved: .AHRC.....
 Name of Contact .John Robbins..... Phone .(718) 555-1234..... Agency Case #

PARENT/GUARDIAN INFORMATION

Relationship to Student

Name .Douglas Roberts.....
 Address .same as above.....
 Phone (Home) .same as above..... Phone (Work) .(203) 445-5555..... Interpreter Required Yes No
 Preferred Language / Mode of Communication: .English.....

SPECIAL MEDICAL/PHYSICAL ALERTS

(Refer to Health & Physical Development Page for additional details)

The student has medical conditions and/or physical limitations which affect his/her learning behavior and/or participation in school activities
 The student requires medication and/or health care treatment(s) or procedure(s) during the school day.
 Other alerts:wheelchair sickle cell trait requires constant hydration (especially in warm weather).....

Summary Of Recommendations

Eligibility yes no Twelve Month School year: Yes No

Recommended Services

Classification of Disability:

..... Staffing Ratio

..... 12:1:1

Recommended Services - Twelve Month School Year

same as above..... Staffing Ratio

Other Recommendations (Check all that apply)

*Details are provided in relevant sections of IEP.

- Program Accessibility* Adapted Phys. Ed.* Bilingual Instruction
 - Related Services* Assistive Technology* Monolingual Services with ESL
 - Special Education Transportation -Comment lift bus, air conditioned bus, special transportation paraprofessional
- Students who are blind or visually impaired :
 Braille instruction needed Yes No Language of Instruction
- Students who are deaf or hard of hearing:
 Mode of Communication

CONFERENCE INFORMATION

Referral type: Initial Annual Review
 Triennial Requested Review

Conference type: EPC Annual Review
 CSE Review CPSE Review

Attendance at Conference

Please note that your signature reflects your participation at the conference and does not necessarily indicate agreement with the Individualized Education Program.

Signature/Title	Role (Indicate if Bilingual)	Signature/Title	Role (Indicate if Bilingual)
<u>John Hammond</u>	<u>Counselor</u> Other	_____	_____ Other
<u>Arnold Jones</u>	<u>Paraprofessional</u> Other	_____	_____ Other
<u>Janet Stone</u>	<u>Nurse</u> Other	_____	_____ Other
_____	_____ Other	_____	_____ Other
_____	_____ Other	_____	_____ Other
_____	_____ Other	_____	_____ Other
_____	_____ Other	_____	_____ Other
_____	_____ Other	_____	_____ Other

Use an asterisk (*) to signify the participant who interprets the instructional implications of evaluation results.
Use the letter (T) to signify participation by teleconference.

Conference Results

Initiate Service Modify Service Change Program / Service Category No Change

Indicate Modifications Speech and Language: From 2/30/2 To: Termination
Occupational Therapy: From 1/30/1 To: Termination
Remove APE: Joseph has satisfied 12 years of APE since entering school

Initiation, Duration, and Review of IEP

Projected Date of Initiation of IEP: 4/5/2004

Projected Date Of Review of IEP: 3/22/2005

Duration of Services: 1 year

Contacts with Parent / Guardian

Date Notice of Meeting Sent: 3/8/2004

Date of Follow-up (if any): _____
Type of Follow-up

..... Letter Telephone

..... Letter Telephone

Date IEP and Notice of Recommendation

Given To Parent: 3/22/2004

Sent To Parent : _____

Copy For:

CSE

PARENT

SCHOOL

STUDENT

OTHER

ACADEMIC PERFORMANCE AND LEARNING CHARACTERISTICS

Describe the student's present levels of academic achievement, language development, cognitive development and learning style in English and the other than English language for LEP students. Discuss how the student's disability affects his/her involvement and progress in the general curriculum or, for preschool students, as appropriate, how the student's disability affects participation in appropriate activities.

PRESENT PERFORMANCE:

Joseph is following the alternate curriculum. He communicates with ease, initiating conversations with familiar classmates and adults. He has difficulty entering into conversations with new acquaintances. Joseph has some difficulties talking about himself. Joseph reads at the mid second grade level. This allows him to follow simple written directions at work and read some articles in the newspaper and his favorite sports magazines. His comprehension skills are better when material is presented in written form. When the material is orally presented, he has difficulty recalling names, dates and specifics from a 4-6 sentence paragraph. Joseph can purchase items costing up to \$1.00, add two 2 digit numbers, and subtract 2 digit numbers without exchange. However, he has difficulty applying these skills to problems involving money. Joseph works full time, commuting to and from school and worksite by school bus. He knows his full name, address, phone number and parent's name and work phone. He can maneuver around school, worksite and around his home neighborhood using his power wheelchair. He is a very

Reading And Writing					Math				
Area	Date	Test/Evaluation	Score	Instructional Level	Area	Date	Test/Evaluation	Score	Instructional Level
Decoding	3/1-3/15	Teacher Observation		Alternate Performance Indicators	Computation	3/1-3/15	Teacher Observation		Alternate Performance Indicators
Reading Comprehension	3/1-3/15	Teacher Observation		Alternate Performance Indicators	Problem Solving	3/1-3/15	Teacher Observation		Alternate Performance Indicators
Listening Comprehension	3/1-3/15	Teacher Observation		Alternate Performance Indicators					
Writing	3/1-3/15	Teacher Observation		Alternate Performance Indicators					

ACADEMIC MANAGEMENT NEEDS

(Environmental modifications and human/material resources)

Joseph must have access to instructional/work environments that afford him independence of movement and maintain a discreet level of privacy. Material should be presented in written form, with minimal reliance on oral presentation. Significant support must be provided for Joseph to improve self concept, develop and maintain friendships and apply skill knowledge across many real life, age appropriate environments. Staff need to be pro-active in dealing with Joseph's medical needs, while helping him take responsibility for recognizing signs of trouble and making his needs known. Because of the impact on his feelings of self, Joseph's motorized chair must be kept in working order. Physical Therapy and Counseling are needed to allow Joseph to grow and take more control over his environment and himself. Speech and Occupation Therapy are no longer needed as discreet services as Joseph can reinforce and maintain previous levels of skill development in more natural environments.

Social/Emotional Performance

Describe the student's strengths and weaknesses in the area of social and emotional development in English and the other than English language for LEP students. Consider the degree and quality of the student's relationships with peers and adults, feelings about self and social adjustment to school and community environments. Discuss how the student's disability affects his/her involvement and progress in the general curriculum or, for preschool students, as appropriate, how the student's disability affects participation in appropriate activities.

Present Performance :

Joseph is a very capable young man who is very self-conscious about his need to catheterize.... He is fearful that he will not be able to find an appropriate place that will guarantee his privacy, especially when he is at work.... He also fears that he can never do things as well as students who are not in wheelchairs..... Joseph needs to begin to develop more positive self-esteem by acknowledging his accomplishments.... While Joseph will interact with familiar classmates and adults, he has difficulty making and sustaining friendships.... He will frequently become frustrated by his perceived inability to complete tasks.... He has indicated that he is afraid that he will "mess up".... Rather than do so, he will not try new things.... This fear and frustration carry over into all areas and environments, with the possible exception of work.... Here he feels he is accomplishing something special. He needs to constantly be reminded of the wonderful things he can do, and the impact he is making on those around him, especially his co-workers.... He is beginning to make connections with his co-workers, sharing breaks with them and talking about sports.... Joseph has a preference for jobs that bring him into contact with young children and senior citizens.... Since going out to work and meeting adults, Joseph has been thinking and talking more about what he wants to do and where he wants to live after school is finished.....

Behavior And The Instructional Process

Describe the present levels of support including personnel responsible for providing behavioral support.

- Behavior is age appropriate
- Behavior does not seriously interfere with instruction AND
- Can be addressed by General Education OR
- Can be addressed by special education teacher
- Behavior seriously interferes with instruction and requires additional adult support.
- Behavior requires highly intensive supervision.

Counseling; Paraprofessional; Co-workers.....
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.....

Social Emotional Management Needs

Environmental modifications and human/material resources

Joseph continues to require the support of counseling services to address issues of self esteem and interpersonal relationships.... The impact of his significant medical issues also needs to be discussed.....

A behavior intervention plan has been developed. Yes No

Health And Physical Development

Describe the student's health and physical development including the degree or quality of the student's motor and sensory development, health, vitality and physical skills or limitations which pertain to the learning process, behavior and participation in physical education or other school activities. Discuss how the student's disability affects his/her involvement and progress in the general curriculum or, for preschool students, as appropriate, how the student's disability affects participation in appropriate activities.

Present Health Status And Physical Development:

Joseph uses a wheelchair to move about his environment. Joseph can weight bear on his legs for short periods of time. usually as a pivot when transferring from the wheelchair to another type of seating. Joseph will self-catheterize. However, he is concerned that he will not find a private area where it can be done. Many bathrooms do not accommodate his motorized wheelchair. Joseph has very well developed upper body strength and he can pull himself up from a seated position. Joseph has sickle cell trait which has flaired up during periods of extremely hot weather when he is not kept hydrated. Joseph will wear a watch set to signal every half hour so that he can get a drink, preferably from a sports water bottle. This has led to hospitalizations in the past. Joseph needs to be in an air conditioned environment, including on the bus. Joseph will slur words, complain about painful joints and appear very lethargic when he is having difficulty.

Medical/Health Care Needs

During the school day, the student requires :

Oral medication Yes No

(If yes, functionally describe the condition for which medication is required.)

Treatment(s) or other health procedure(s) Yes No

(If yes, functionally describe the condition for which treatments(s) or procedure(s) are required.)

catheterization

Health as a related service Yes No

(If yes, specify in related service recommendations.)

Physical Needs

The student: does does not have mobility limitations

(If yes, functionally describe the limitation(s).)

Joseph uses a wheelchair to move about his environment

Accessible program yes no

Adaptive physical education if yes indicate staffing ratio: yes no

Assistive technology device(s) yes no

Assistive technology service(s) yes no

(If assistive technology device(s) or service(s) are required, specify in management needs)

Health/Physical Management Needs

(Environment modifications, human/material resources or specialized equipment)

Joseph requires the support of Health Services paraprofessional to assist in furthering independence in the areas of personal hygiene and to make sure that the work and school environments are appropriate. There is also a need to monitor significant health issues on a daily basis. Joseph also needs to be monitored while on the school bus until he has greater understanding of procedures to deal with medical issues. Joseph requires the use of a motorized wheelchair as it affords the greatest freedom of movement and impacts on his feelings of independence and control. Health issues need to be monitored by a skilled nurse. Hydration, primarily in warm weather is an issue.

ANNUAL GOALS AND SHORT-TERM OBJECTIVES

CSE Case# .10-55555.....

There will be 3 reports of progress this school year.

1st 2nd 3rd 4th 5th 6th 7th 8th

ANNUAL GOAL:	PROGRESS	Date Mon/Yr	1st	2nd	3rd	4th	5th	6th	7th	8th
Joseph will demonstrate improved self-concept skills as they relate to recognizing accomplishments through journal writing.	Methods of Measurement		<input type="checkbox"/>							
	Report of Progress		<input type="checkbox"/>							
	Progress Toward Annual Goal		<input type="checkbox"/>							
	Reasons for not Meeting Annual Goal		<input type="checkbox"/>							

SHORT-TERM OBJECTIVES: Other:

1. Using a word processor or tape recorder at the end of each school and/or work day, Joseph will list 3 projects and/or jobs completed each day, 8/10 opportunities over a 2 week period.
2. Using a word processor or tape recorder, Joseph will describe himself using 3 positive words and/or phrases in response to the question "How do you feel when,,,,,?" 3/4 opportunities over a 2 week period.
3. Using a word processor or tape recorder, Joseph will describe how he helps classmates, co-workers, and/or other people across all environments, 3/4 opportunities over a 2 week period.

ANNUAL GOAL:	PROGRESS	Date Mon/Yr	1st	2nd	3rd	4th	5th	6th	7th	8th
Joseph will demonstrate improvement in applying previously learned information to new situations.	Methods of Measurement		<input type="checkbox"/>							
	Report of Progress		<input type="checkbox"/>							
	Progress Toward Annual Goal		<input type="checkbox"/>							
	Reasons for not Meeting Annual Goal		<input type="checkbox"/>							

SHORT-TERM OBJECTIVES: Other:

1. When presented with a variety of forms such as, but not limited to, bank account forms and job applications, Joseph will locate the lines for his name, address and phone number and correctly enter the information, 3/4 opportunities over a 2 week period.
2. When presented with an enlarged map of the public bus route that he would use to get from his home to his job, Joseph will identify the bus stops closest to his home and work location (including the names of the streets) 3/4 opportunities over a 2 week period.
3. When given the tasks that need to be completed on any given day, Joseph will set up a routine and plan out his day so that he can accomplish his assigned tasks, 3/4 opportunities over a 2 week period.

<p>METHODS OF MEASUREMENT</p> <ol style="list-style-type: none"> 1. Teacher Made Materials 2. Standardized Test 3. Class Activities 4. Portfolio(s) 5. Teacher/Provider Observations 6. Performance Assessment Task 7. Check Lists 8. Verbal Explanation 9. Other (Specify) _____ 	<p>EXPLANATION OF CODING SYSTEM</p> <p>REPORT OF PROGRESS</p> <ol style="list-style-type: none"> 1. Not applicable during this grading period 2. No progress made 3. Little progress made 4. Progress made; goal not yet met 5. Goal met 	<p>PROGRESS TOWARD GOAL</p> <ol style="list-style-type: none"> A. Anticipate meeting goal B. Do not anticipate meeting goal (Note reason) C. Goal met 	<p>REASONS FOR NOT MEETING GOAL</p> <ol style="list-style-type: none"> 1. More time needed 2. Excessive absence or lateness 3. Assignments not completed 4. Other(Specify) _____
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*While a review of your child's educational program occurs every year please be advised that you have a right to request a review of your child's program at any time.

The student's performance is approaching his/her promotion criteria as set forth on page 9 of the IEP:

For students who are not anticipated to meet their annual goals and/or promotion criteria: We recommend that the IEP Team be reconvened:

1st	2nd	3rd	4th	5th	6th	7th	8th
<input type="checkbox"/>							
<input type="checkbox"/>							

Use a Y (Yes) or N (No) in the appropriate column.

Copy For : CSE ___ PARENT ___ SCHOOL ___ STUDENT ___ OTHER ___

ANNUAL GOALS AND SHORT-TERM OBJECTIVES

CSE Case# .10-55555.....

There will be 3 reports of progress this school year.

ANNUAL GOAL:	PROGRESS	Date Mon/Yr	1st	2nd	3rd	4th	5th	6th	7th	8th
Joseph will demonstrate improved inter-personal skills as they relate to establishing peer connections across all environments.	Methods of Measurement		<input type="checkbox"/>							
	Report of Progress		<input type="checkbox"/>							
	Progress Toward Annual Goal		<input type="checkbox"/>							
	Reasons for not Meeting Annual Goal		<input type="checkbox"/>							

SHORT-TERM OBJECTIVES: Other:

- Given the opportunity of selecting a classmate of his choice, Joseph will plan and carry out an in-school leisure activity 1 day/week for 3 weeks.
- Given the opportunity of choosing a partner for an ongoing work related activity, Joseph will choose a co-worker with whom to work consistently for at least 4/5 days/week over a 2 week period.
- Given the opportunity of choosing either a classmate or co-worker, Joseph will make an appointment for an after-school/work leisure activity 1 day/week for 3 weeks.

ANNUAL GOAL:	PROGRESS	Date Mon/Yr	1st	2nd	3rd	4th	5th	6th	7th	8th
Joseph will demonstrate improvement in solving problems involving computational skills across all environments.	Methods of Measurement		<input type="checkbox"/>							
	Report of Progress		<input type="checkbox"/>							
	Progress Toward Annual Goal		<input type="checkbox"/>							
	Reasons for not Meeting Annual Goal		<input type="checkbox"/>							

SHORT-TERM OBJECTIVES: Other:

- During break times, after deciding what he wants to eat and/or drink, Joseph will compute the total cost of his snack 3/4 opportunities over a 2 week period.
- When given the opportunity to purchase a magazine of his choice and given \$1.50, Joseph will be able to figure out how much more money he will need to get in order to buy the magazine, 3/4 opportunities over a 2 week period.
- Using information from a newspaper movie clock, Joseph will compute how much it will cost for him and a friend to go see a movie of their choice and buy a snack, 3/4 opportunities over a 2 week period.

<p>METHODS OF MEASUREMENT</p> <ol style="list-style-type: none"> Teacher Made Materials Standardized Test Class Activities Portfolio(s) Teacher/Provider Observations Performance Assessment Task Check Lists Verbal Explanation Other (Specify) _____ 	<p>EXPLANATION OF CODING SYSTEM</p> <p>REPORT OF PROGRESS</p> <ol style="list-style-type: none"> Not applicable during this grading period No progress made Little progress made Progress made; goal not yet met Goal met 	<p>PROGRESS TOWARD GOAL</p> <ol style="list-style-type: none"> Anticipate meeting goal Do not anticipate meeting goal (Note reason) Goal met 	<p>REASONS FOR NOT MEETING GOAL</p> <ol style="list-style-type: none"> More time needed Excessive absence or lateness Assignments not completed Other(Specify) _____
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1st	2nd	3rd	4th	5th	6th	7th	8th
<input type="checkbox"/>							
<input type="checkbox"/>							

Use a Y (Yes) or N (No) in the appropriate column.

Copy For : CSE ___ PARENT ___ SCHOOL ___ STUDENT ___ OTHER ___

SCHOOL ENVIRONMENT AND SERVICE RECOMMENDATIONS

GENERAL EDUCATION ENVIRONMENT

Area of Instruction	Language(s) or Communication mode	Periods per week	Supplementary Aids and Service	Program Modifications and Supports for School Personnel
All	English	All	Joseph is meeting his IEP goals by following a career development/life skills curriculum at a community based work site.	Instruction for work site personnel relating to Joseph's specific health issues, including the need for privacy at times when he needs to self-catheterize.

SPECIAL CLASS ENVIRONMENT

Area of Instruction	Language(s) or Communication mode	Periods per week	Special Class and Staffing Ratio	Supports	Reasons for Non-Participation in General Education Environment

OTHER PROGRAMS/SERVICES CONSIDERED AND REASONS FOR REJECTION

Provide an explanation of the programs/services considered and the reason for rejection. Specify why the student cannot achieve the goals of his/her IEP within a general education program with the assistance of supplementary aids and services.

General Education with Related Services: Joseph requires a more intensive level of support than that provided in a general education class.

General Education with Special Education Teacher Support Services from a Specialized School (D75): Joseph requires and instructional setting that allows him to practice career development and adult life skills in a full-time community based work study program.

Special Class in a Community School: Joseph requires the intensive supports provided by a specialized school (D75).

Second language instruction: If the student is exempt from second language instruction, explain why:

Joseph is following the alternate curriculum.

PARTICIPATION IN SCHOOL ACTIVITIES, RELATED SERVICE RECOMMENDATIONS AND PARTICIPATIONS IN ASSESSMENTS

PARTICIPATION IN SCHOOL ACTIVITIES

If the student cannot participate in lunch, assemblies, trips and/or other school activities with non-disabled students, indicate the activity and reason(s) for non-participation.
Joseph can participate in all activities with his mandated supports and services in place. In addition, pro-active care must be provided for his medical needs.

Status*	Related Service	Language of service	Location**	Session/week	Duration	Group size
T	Speech	English	Separate Location	2	30	2
T	Occupational Therapy	English	Separate Location	1	30	1
C	Health (Paraprofessional Services)	English	Separate Location	5	99+	1
C	Health (Skilled Nursing Services)	English	Separate Location	5	99+	1
C	Physical Therapy	English	Separate Location	1	30	1
C	Special Transportation Para	English	Separate Location	10	40	2

* Indicates status of recommendation: Initiate; Continue; Modify; or Terminate

** Indicate whether service is provided outside the general education classroom

PARTICIPATION IN ASSESSMENTS

The student WILL PARTICIPATE in state and local assessments. The student will participate in Alternative Assessment.

Without Accommodations With Accommodations

Describe accommodations, if any that will be used consistently throughout the student's educational program:

.....

Reason for participation in Alternative Assessment:

Joseph is following an instructional program based on The Learning Standards and Alternate Performance Indicators for Students with Severe Disabilities.

In addition to Alternative Assessment, describe how the student will be assessed:

NYS Alternate Assessment Datafolio, teacher observation, data collection, work reviews.

Promotion Standard Criteria Modified Criteria*

Promotion * Describe the modified promotion criteria

.....

Transition

LONG TERM ADULT OUTCOMES

(Beginning at age 14 or younger if appropriate, state long term outcomes based on the student's preferences, needs and interests.)

Community Integration: Joseph wants to go to movies, concerts, baseball and basketball games.....

Post-Secondary Placement Joseph wants to work and earn money.....

Independent Living Joseph wants to travel to work on public transportation.....

Employment: Joseph wants to work in home for senior citizens or a nursery school.....

Diploma Objective

Regents Diploma Advanced Regents Diploma Local Diploma IEP Diploma

Expected High School Completion Date8/2006..... Credits Earned As Of Date

Transition Services

(Required for students 15 years of age and older.)

Instructional Activities Joseph will set up and use a bank account.....

Responsible Party: Parent School Student Agency Fall Spring Summer

Community Integration Joseph will read the newspaper to find movie and sports schedules.....

Responsible Party: Parent School Student Agency Fall Spring Summer

Post High School Joseph will practice job interview techniques.....

Responsible Party: Parent School Student Agency Fall Spring Summer

Independent Living Joseph will be referred for assessment for travel training.....

Responsible Party: Parent School Student Agency Fall Spring Summer

Acquisition of Daily Living Skills Functional Vocational Assessment Needed Not Needed

Responsible Party: Parent School Student Agency