

**Enter District Name Here**  
**Individual Education Program (IEP)**

Date: April 13, '01

Review Date: Sept. 13, '01

Student: Segren Jaime C.  
Last First Middle

Age: 16 Grade: 10

Student ID# 00000000

Disability: FMD

Education Performance Areas Assessed	<b>Present Levels of Performance including how the disability affects the student's involvement and progress in the general curriculum</b> <small>(For preschool children the effect on participation in appropriate activities)</small> <small>(For students aged 14, or younger if appropriate, a statement of transition needs is included and interagency linkages addressed at age 16.)</small>
<b>Communication Status</b>	<input type="checkbox"/> Performance commensurate with similar age peers
<b>Academic Performance</b>	<input type="checkbox"/> Performance commensurate with similar age peers
<b>Health, Vision, Hearing, Motor Abilities</b>	<input type="checkbox"/> Not an area of concern at this time
<b>Social and Emotional Status</b>	<input type="checkbox"/> Performance commensurate with similar age peers
<b>General Intelligence</b>	<input type="checkbox"/> Performance commensurate with similar age peers
<b>Transition Needs</b>	<input type="checkbox"/> Performance commensurate with similar age peers / or not a concern at this time <input type="checkbox"/> Instruction <input checked="" type="checkbox"/> Related services <input type="checkbox"/> Community experiences <input checked="" type="checkbox"/> Employment <input checked="" type="checkbox"/> Daily Living Skills <input type="checkbox"/> Post School Adult Living Objectives <input checked="" type="checkbox"/> Functional Vocational Evaluation  Jaime is presently 16 years old. She plans to graduate from high school at age 18. She has two more years left of school. Based upon informal interviews with both Jaime and her parents and results of the Student and Parent Survey's, Jaime has indicated that she wants to work following graduation from High School. She also wants to be able to live as independently as possible, living with her parents immediately following completion of school, but eventually moving into her own apartment or house that she may share with a roommate. Her strengths related to employment, are that Jaime is motivated to work and has family support to do so. She has indicated that she would like to work at an animal hospital. Based upon achievement and vocational assessment, needs related to employment include lack of work experience; ability to communicate due to speech impairment; and reading at a second grade level. Other needs related to employment include appropriate social skills (Jaime has a tendency to be "overly" friendly with people she has not met). Additionally, Jaime requires extensive "one-to-one" instruction in the form of repeated modeling of work tasks to be performed and repeated review of work routines to be followed. Her strengths, related to living independently, are that Jaime has acquired many skills necessary for activities of daily living such as being

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	<p>able to groom and dress herself; ability to make a simple meal (e.g. soup and sandwich); ability to wash dishes; ability to perform basic housekeeping tasks. Needs are seen in her ability to to access and efficiently use community resources (e.g. doing her own grocery shopping, banking, public transportation). Inappropriate social skills are also seen as a barrier to Jaime living independently within the community.</p>
<b>Functional Vision/Learning Media Assessment</b>	<input type="checkbox"/> Performance commensurate with similar age peers

**Consideration of Special Factors for IEP Development:**

- Does the child's behavior impede his/her learning or that of others?  Yes  No If yes, include appropriate strategies, such as positive behavioral interventions and supports in the statement of devices and services below.
- Does the child have limited English proficiency?  Yes  No. If yes, what is the relationship of language needs to the IEP?
- Is the child blind or visually impaired?  Yes  No If yes, the IEP Team must consider:
  - Is instruction in Braille needed?  Yes  No
  - Is use of Braille needed?  Yes  No
  - Will Braille be the student's primary mode of communication?  Yes  No (See evaluation data for supporting evidence.)
- Does the child have communication needs?  Yes  No. If yes, what are they?  
Jaime has a speech impediment that makes her difficult to understand.


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- Is the child deaf or hard of hearing?  Yes  No. If yes, the IEP Team must consider:
  - The child's language and communication needs; Describe:  


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  - Opportunities for direct communications with peers and professional personnel in the child's language and communication mode, academic level and full range of needs; Describe:  


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  - Any necessary opportunities for direct instruction in the child's language and communication mode. Describe:  


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- Are assistive technology devices and services necessary in order to implement the child's IEP? (May include instruction in Braille)  Yes  No. **If yes, indicate below.**

Statement of devices/services to be provided to address the above special factors (such as an intervention plan; accommodations; other program modifications)

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**Measurable Annual Goals and Benchmarks/Short-term Instructional Objectives for IEP and Transition Activities**

Annual Measurable Goal: Jaime will demonstrate skills to evaluate and use resources available in the community.

	<b>Review of Progress of Annual Goal</b>								<b>Date Progress Report Sent to Parent</b>																		
	1st	2nd	3rd	4th	5th	6th	7th	8th	1 <sup>st</sup> reporting period:																		
Methods of Evaluation*	2								2 <sup>nd</sup> reporting period:																		
Report of Progress**									3 <sup>rd</sup> reporting period:																		
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**Benchmarks/Short-Term Instructional Objectives**

1. Jaime will learn how to ride city bus from her home to school.

2. Jaime will develop a grocery list and purchase items from the list at the grocery store.

3. \_\_\_\_\_

4. \_\_\_\_\_

Name: Jaime Segren

DOB: 05/22/1985

Date of ARC: 04/13/2001

Specially Designed Instruction in P.E.: Does the student require specially designed P.E.?  Yes  No.  
If yes, document as specially designed instruction.

(An optional form to assist the ARC in determining adaptations and modifications for assessment available soon from KDE.)

The following *specially designed instruction* will be provided through adapting, as appropriate, the **CONTENT, METHODOLOGY OR DELIVERY OF INSTRUCTION**. You may also refer to the extensions for diverse learners in the Program of Studies. A statement of supplementary aids and services, if any, to be provided to the child or on behalf of the child must be included.

Jaime will participate in the Community Based Work Transition Program beginning with the '01 - '02 school year in order to receive one-to-one vocational instruction and a functional vocational evaluation in the community from a Job Trainer.

#### Individual Modifications in the Administration of Assessments and in the Classroom

In order to justify appropriateness of accommodations for any state mandated tests, the testing accommodations must be used consistently as part of routine instruction and classroom assessment as well as meet all additional requirements established by the ***Inclusion of Special Populations in the State-Required Assessment and Accountability Programs*** document.

- Readers       Scribes       Paraphrasing       Reinforcement and behavior modification strategies
- Prompting/cueing       Use of technology       Manipulatives       Braille       Interpreters
- Extended time       Other: specify \_\_\_\_\_
- Student has been determined eligible for participation in the alternative portfolio assessment

Program Modifications/Supports for School Personnel that will be provided for the child:

Name: 5Jaime Segren

DOB: 05/22/1985

Date of ARC: 04/13/2001

**LRE and General Education:** Explain the extent, if any, to which the student will not participate in:

- regular classes (content area): \_\_\_\_\_
- extracurricular and nonacademic activities: \_\_\_\_\_
- the school that the student would attend if not disabled: \_\_\_\_\_

<b>Special Education and Related Services:</b>						
Type of Service*	Anticipated Frequency of Service	Anticipated Duration Of Service		Location of Services**		
		Amount of Time	Beginning Date			
15	2 times per week	3 hours each time in community	8/01	6		
*Type Of Service: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;">               1. Special Education                2. Speech Language Pathology                3. Audiology                4. Psychological                5. Physical Therapy                6. Occupational Therapy                7. Recreation             </td> <td style="width: 50%; vertical-align: top;">               8. Counseling                9. Orientation &amp; Mobility                10. School Health Services                11. Social Work                12. Parent Counseling &amp; Training                13. Transportation                14. Instruction In Braille                15. Other: <u>Community Based Work Transition Program</u> </td> </tr> </table>				1. Special Education 2. Speech Language Pathology 3. Audiology 4. Psychological 5. Physical Therapy 6. Occupational Therapy 7. Recreation	8. Counseling 9. Orientation & Mobility 10. School Health Services 11. Social Work 12. Parent Counseling & Training 13. Transportation 14. Instruction In Braille 15. Other: <u>Community Based Work Transition Program</u>	**For location use code for continuum of services: <ol style="list-style-type: none"> <li>1. regular class</li> <li>2. resource room/special class</li> <li>3. special schools (KSD,KSB)</li> <li>4. home instruction</li> <li>5. hospital and institutions</li> <li>6. other: <u>community job sites</u></li> <li>7. other: _____</li> </ol>
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Name: \_\_\_\_\_

DOB: \_\_\_\_\_

Date of ARC: \_\_\_\_\_

**Transition Services Needs (Beginning at age 14, or younger)**

**Needs Related to the Course of Study**

See Individual Graduation Plan

**Transition Services (Beginning at age 16, or younger if appropriate)**

**Desired Post School Outcomes/Services  
(Check those which apply)**

- Post-secondary Education
- Vocational Training
- Continuing and adult education
- Independent Living
- Integrated employment including Supported Employment
- Adult Services
- Community Participation

**Statement of Interagency Linkages and Responsibilities**

**Agency Responsibilities**

**Agency Responsible**

Referral made and Jaime determined to be eligible for the Dept. of Vocational Rehabilitation funded Community Based Work Transition Program. Jamie will begin this program in the Fall of '01

Dept. of Vocational Rehab.

Jaime will be referred to Comprehensive Care for Case Management Services.

Edison Schools/ Jaime's primary teacher, Ms. Harrison, will make referral to Comp. Care

Jaime will receive information about Supported Living and Supports for Community Living from Comprehensive Care

Edison Schools/Ms. Harrison will make information request of Comp. Care

**How were the student's preferences and interests considered? (Check all that apply.)**

- Student interview
- Student survey
- Student portfolio
- Vocational Assessments
- Interest Inventory
- Parent Interview
- Other: \_\_\_\_\_

If applicable, One year before the student reaches age 18 the student and parent have been informed of the student's rights under Part B of the Individuals with Disabilities Education Act, if any, that will transfer on reaching the age of majority. Date Informed: \_\_\_\_\_

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