I-3 - IEP (DRAFT) Purple Knight - SAVE

Birth Date 03/12/1995 (18)

District of Residence	District of Placement	Current School	Grade
Testing District	Testing District	Test High School	Grade 12

Meeting Date 12/21/2012

I. CONSIDERATION OF SPECIAL FACTORS

A. Does the child's behavior impede his/her learning or that of others?

🗹 Yes 🖸 No

If yes, list positive behavioral interventions, strategies, and supports to address that behavior.

List only positive behavior interventions. All students labeled EBD must have a BIP. The BIP must be referenced in the IEP. In order to review and update the BIP without an IEP meeting, it is best to NOT attach the BIP to the IEP. Just reference the BIP in this section. The BIP should state how often the plan will be reviewed. At the very least, the plan should be reviewed at the annual IEP meeting.

1. An intervention plan has been designed to support _____'s behavior and is located in the student's psychological file. The behavior intervention plan details procedures to deal with disruptive behaviors during the passing periods in the general education setting. It also provides positive behavioral interventions that have been identified for reducing the identified behaviors. The special education teacher will be responsible for determining and making changes to the BIP during the course of this IEP. If changes are made the special education teacher will revise the BIP, indicate the date it was revised and distribute the revised BIP to the parents and staff.

OR

2. _____ has significant difficulty focusing and staying on task. A Behavior Intervention Plan (BIP) has been developed based on a Functional Behavior Assessment (FBA). The BIP details procedures to deal with off task behaviors in the general education setting. It also details positive behavioral interventions intended to reduce the targeted behavior. All staff that will be responsible for implementing the BIP are designated on this BIP. The special education teacher will be responsible for determining and making changes to the BIP during the course of this IEP. If changes are made the special education teacher will revise the BIP, indicate the date it was revised and distribute the revised BIP to the parents and all staff designated on the BIP. In addition, the following positive behavioral strategies will be used:

-5 minute break time (including a place to calm down)

-positive verbal reinforcement

- -use 1-2-3 Magic techniques
- -positive touch
- -token economy

-goal setting

- -social skills instruction
- -change of seating

-foreshadowing

Do not list any negative interventions like suspensions, time outs, removal from free time or other privileges taken away.

B. Does the child have limited English proficiency?

🗹 Yes 🖸 No

If yes, include the language needs that relate to this IEP that were considered. Must be completed by ELL teacher as part of the IEP. C. Does the child have communication needs that could impede his or her learning?

🗹 Yes 🖸 No

lf yes, explain.

Must be completed if the student is receiving speech and language therapy services. List the communication deficits and how they affect the student's learning. You may use the same information listed in the PLOP for communication. Be specific.

Do not write "See Speech and Language Goals and PLOP information."

D. Does the child need assistive technology services or devices?

Yes No

If yes, specify characteristics of device(s) or services that were considered.

Only list items that are directly related to the child's disability and are required for the student to access the general curriculum.

iPads, pencil grips, word processing capabilities, whiteboard, visual schedule and/or cues, alternative communication device

E. Is the child deaf or hard of hearing?

Yes 🖸 No

If yes, identify the communication needs including (a) the child's language; (b) opportunities for direct communication with peers and professional personnel in the child's language and communication mode; and, (c) academic level and full range of needs including opportunities for direct instruction in the child's language and communicative mode.

Must be completed by the teacher servicing Deaf & Hard of Hearing.

F. If visually impaired, does the child demonstrate a current or future need for Braille instruction or the use of Braille? In making your determination, consider reading skills, written language skills and future needs for Braille skills.

○ Yes Ø No ○ N/A

If no, then justify. Must be completed by the teacher servicing the Visually Impaired.

II. INDICATORS

A. Does a 3-6 year old outcome report need to be completed?

Yes No

B. Is the child aged 14 or older, or will the child turn age 14 during the timeframe of this IEP?

Yes 🖸 No

If yes, complete the I-3 Subform - Transition Summary

Student Name	Birth Date	Grade	Meeting Date
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III. ASSESSMENT

A. Wisconsin Knowledge and Concepts Examination (WKCE):

1- In this IEP year, is the child or will the child be in grade 3,4,5,6,7,8,10 during the time assessment is given?

Yes 🖸 No

Choose one

WINCE WAA

Accommodations Necessary?

🗹 Yes 🖸 No

Necessary accommodations:

Test Directions

D 2 Mark or highlight directions.

D 3 Provide printed copy of teacher directions (i.e. bold text following the SAY icon) from the WKCE Test Administration Manual.

- D 4 Explain or clarify directions.
- D 5 Student rereads and/or restates directions.
- Read directions aloud and reread as needed
- Audio recording of directions

Content Presentation

- D 6 Turn pages for student.
- D 7 Braille; student responses must be transcribed into scorable test book by a licensed teacher of the visually impaired or a certified transcriber.
- D 9 Large-print; student responses must be transcribed into scorable test book.
- D10 Extra test book; answers must be recorded in one scorable test book.
- D11 Sign language for test passages and questions (Not allowed on Reading tests).
- D12 Text talker for test passages and questions (Not allowed on Reading tests).
- D13 Student reads aloud to self.
- D14 Test administrator reads test passages and questions aloud (Not allowed on WKCE Reading test or WAA-SwD "Read-by-Student" items).
- D15 Student records him/herself reading aloud and plays back recording.
- D16 Audio recording of test passages and questions in English (Not allowed on WKCE Reading test or WAA-SwD).
- D17a Read the Reading test ONLY in the following scenarios as described inForm I-3-S6: a)For a student who is blind or visually impaired who is not yet proficient in contracted Braille, the WKCE Reading test passages and questions may be read aloud.
- Visual magnification devices. Be careful not to enlarge measurement items.
- Audio amplification devices.
- Color overlay.
- Page markers (e.g. bookmark or straight edge) to maintain place.
- Allow student to mark test book in approved locations with a #2 pencil.
- Student marks test with a highlighter.

Response

- D18 Manipulatives, base-ten blocks, 3-D shapes, 100's chart (not multiplication table), whole integer number lines, number boards, etc. are allowed as long as they do not provide a definition or description.
- D19 Calculator and/or multiplication table (Not allowed on sections of the Mathematics test measuring computation skills -refer to each appropriate grade's Test Administrator's Manual at http://dpi.wi.gov/oea/publications.html).
- D20 Braille output device; transcribe student responses into scorable test book.
- D21 Student indicates responses orally to scribe.
- D22 Student signs responses to interpreter/scribe. For the Writing test, translation from American Sign Language (ASL) is not allowed; student must use English-based sign.
- D23A Student records responses using an audio or video device: a)Test administrator transcribes student's responses into scorable test book.
- D23B Student records responses using an audio or video device: b)Student watches or listens to his/her recorded responses and transcribes into scorable test book.
- D24 Computer or word processor; responses must be transcribed into the scorable test book. For the Language Arts and Writing tests, all spell- and grammar-checking devices must be turned off; for the Mathematics test, the calculator function must be turned off for non-calculator sessions.
- D25 Speech-to-text devices; responses must be transcribed into the scorable test book. For the Mathematics test, the calculator function must be turned off for non-calculator sessions (Not allowed on Language Arts or Writing tests).
- D26 Provide spelling assistance or a spell-check device, where appropriate (Not allowed on Language Arts or Writing tests).
- Graph/lined/grid paper, template, or graphic organizer (with no text) for aligning work and/or recording answers that the student will transfer into his/her test book.

Setting

- D27 Student moves, stands, or paces during individual administration.
- ✓ Distraction-free space or alternative location for student (e.g., study carrel, front of room).
- Individualized (and supervised) or small group setting
- Adaptive furniture, special lighting and/or acoustics.
- Homebound or hospitalized student takes test at home or in a care facility/hospital with district supervision.

Timing/Scheduling

- D28 Extra time; test session must be completed within the same day the student started the session.
- Breaks: allow student to take breaks without exceeding total testing time.
- Scheduling: allow student to test across multiple days, as long as a test session is completed within the same day the student started the session.

2- Comments on accommodations

List extra time by percent (%) so that it is equitable for the accommodations the student will receive on the ACT exam for post-secondary institutions. Accommodations listed should be the same as the ones used daily and match section V of the IEP. Remember that the accommodations MUST be directly linked to the student's disability in order to ACCESS the general ed curriculum.

Extended time by 100% (double time) or extended time by 50% (time and a half).

The use of a calculator would not be appropriate if there is not evidence of deficits in math associated with the disability. A scribe would only be appropriate if there is a motor writing disability documented.

3- For children requiring alternate assessment, complete Wisconsin Alternate Assessment (WAA) checklist (I-3 WAA Checklist) to document rationale, including why child cannot participate in the regular assessment and why the alternate assessment is appropriate.

B. Wisconsin Statewide Language Assessment:

1 - In this IEP year, is the child classified as an English Learner (ELP 1-5) and will be in grade K,1,2,3,4,5,6,7,8,9,10,11 or 12 during the time the assessment is given?



C. Participation in District-Wide Assessments.

1- During this IEP year will the child be in a grade where district-wide assessments are given?

Yes 🛛 No

If yes, and the child will be participating, list the name of the assessment(s) and necessary accommodations, if any.

List district-wide assessments and any MAP accommodations that are permitted. Note the accommodations approved for MAP tests: <u>http://www.nwea.org/node/4615</u>

MAP, PLAN, Explore

If yes, but the child will not be participating, document why the child cannot participate in the regular assessment and why an alternate district-wide assessment is appropriate.

This section applies to the student who is labeled CD and following the extended grade band standards or if the parent opts out of the assessment.

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IV. PRESENT LEVEL OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE, GOALS AND OBJECTIVES

- A. PRESENT LEVEL OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE: Present level of performance must include information that corresponds with each annual goal.
 - 1. State the strengths of the child:

List strengths that the student exhibits in the areas of academics, class participation, organization and attitude.

(NOTE: The IEP meeting should start with a positive statement.)

EXAMPLE:

_____demonstrates a strong desire to be successful. _____works hard, takes pride in his work, and strives to do his best.

_____is well organized and completes assignments on time. _____is very conscientious about his work and has a strong work ethic.

_____works well with his peers and adults. _____is willing to participate in class when he is called on and actively participates with a partner.

2. State the concerns of the parents for enhancing the education of the child:

State that the parent attended the meeting and list concerns that the parents have that only affect the student's education.

_____'s parents (expressed concerns) (did not express any concerns) about ______'s performance.

Specifically, _____'s parents were concerned about_____

If the parent did not attend, state how the concerns were communicated.

3. Describe how the child's disability affects the child's involvement and progress in the general education curriculum (for preschool children, how the disability affects participation in appropriate activities):

Indicate the student's disability and how the disability directly impacts the student's progress in the general education curriculum.

_____has a specific learning disability in _____which affects_____'s performance in the general curriculum in the subject(s) of ______.

These deficits significantly impede _____'s ability to acquire and master processes and concepts at a rate which would allow ______ to proficiently progress through the general education curriculum.

A statement just stating that a student's disability impacts his/her performance is not sufficient. Be specific.

4. Describe the child's current level of academic achievement and functional performance including the results of the most recent formal and/or informal evaluation of the child. (Include current level of transition services for those 14 years old and older.)

Describe the skill deficit and the measure of where that skill is currently. The statement must address both academic achievement (reading, language arts, math, science and history) and functional performance. Academic performance includes: grades, GPA, test scores (MAP, WKCE, BAS), reading lexile, benchmarks, curriculum based measures.

GOALS SHOULD BE:

Measurable-observable (You can see it, hear it, count it)

Functional-useful in the child's daily environment. Describe both academic and non-academic areas. Include current formal and informal educational performance data. Use understandable language. Describe learning accommodations and learning strategies. Include baseline data for each annual goal.

Dimensions of skills/behaviors we attempt to change: Accuracy, Speed, Frequency, Independence, Quality, Duration. Establish a baseline of information which can be a starting point to determine annual goals.

Template: Under what conditions, Who, What, To what degree

Functional performance includes activities and skills not considered academic, daily living skills, motor skills, personal care, school/work habits, home/community orientation, behavior and interpersonal relationships.

EACH GOAL MUST HAVE A CORRESPONDING LEVEL OF ACHIEVEMENT OR FUNCTIONING IN THIS SECTION.

List current level of transition ONLY if there was an annual goal addressing the area of transition.

_____does not bring material to class on a regular basis. Currently, he is only bringing a notebook and pencil to class 1 out of 5 times (20%).

_____reads 50 words correctly per minute with 2 errors in a reading passage that is at the end of 3rd grade level.

____ 's instructional reading level is at a mid-third grade level.

_____ reads 120 words a minute with 90% accuracy in teacher given questions. When presented with grade level material, _____ is easily frustrated. His reading rate is 60 words per minute with only 40% accuracy in comprehension. His difficulty with word recognition at that level results in poor fluency and recall of what was read. His skill deficits result in limited capacity to read general education curriculum material and require intensive modifications and supports for him to participate successfully.

EXAMPLE: Behavior

Given 10 opportunities to respond to teacher initiated questions, _____ called out 6 times without being recognized by the teacher.

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B. MEASURABLE ANNUAL ACADEMIC OR FUNCTIONAL GOAL NUMBER 1

To enable the child to be involved in and make progress in the general curriculum and meet other educational needs that result from the child's disability.

Goal Name

Make sure that there is a baseline in the PLOP for this goal. DPI recommends stating the baseline in the goal. Baseline should address: Under what conditions, Who, Does what, To what degree

Select target skills and behaviors based on student's needs. Make sure it's measurable. Measurable goal template should address same points as baseline: Under what conditions, Who, Does what, To what degree

Develop a goal that can be easily measured within the classroom setting.

Given a 3rd grade reading passage, _____ will read 110 words correctly per minute with no more than 2 errors.

Without cues from adults, _____ will use at least two strategies to solve common problems that occur when using toys or objects.

When _____ is feeling angry, frustrated or sad, _____will decrease the number of violent physical acts from 50 (currently) to 25.

By the end of first semester, _____ will come prepared for class 100% of the time.

Annual goals such as "pass all classes" or ?take classes to meet graduation requirement" apply to all students and generally do not meet the standards of an annual goal. Specific methodologies and teaching approaches are not included in the IEP. Do not include titles or names of publishers or curriculum used.

Procedure for measuring the student's progress toward meeting the annual goal

formative and summative behavior charts

C. PROCEDURES AND TIMELINE FOR NOTIFYING PARENTS OF CHILD'S PROGRESS TOWARD THE ANNUAL GOAL.

Key for measuring progress

Frequency:

4 times a year or however often general ed students receive their report cards or progress reports. Elementary progress reports may be delivered with report cards. Otherwise, teachers are responsible for sending behaviaor progress reports. (Ensure that you are stating how the progress will be measured.)

Date/Progress	Progress Sufficient to Reach Annual Goals?	Summary
3/22/2011 No Progress (NP)	O Yes Ø No Initials: BB	If you put "NP" (no progress) for this section, you MUST hold an IEP meeting to discuss the lack of progress and if the goal is appropriate.
6/7/2012 Emerging (E)	Yes O No Initials: BB	This is a great place to provide positive comments about the student's progress.

Summary of progress or lack of progress to enable child to achieve goal by end of IEP year.

"No Progress" requires explanation or review of goal, short-term objectives/ or benchmarks by the IEP team.

D. SHORT TERM OBJECTIVES/BENCHMARKS necessary to describe the steps the child will take to make progress in the general curriculum and reach the annual goal and disability-related educational needs:

IEP Team Annual Review:

Goal Met	Goal Not Met
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Level of attainment:

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V. INSTRUCTIONAL SERVICES: A STATEMENT FOR EACH OF THE FOLLOWING WITH AMOUNT, FREQUENCY, LOCATION, AND DURATION.

Special Education	Amount	Frequency	Location	Duration
only list classes that are special education classes or classes where special education services will be delivered	minutes	daily or weekly	list the location where the service will be delivered	same as IEP
DO NOT list names or titles of actual classes	DO NOT PUT 'as needed' , 'as deemed necessary', 'when appropriate', 'at teacher's request', or 'available daily'	n / a	DO NOT USE resource room or specific school name	n / a
USE: reading skill develop, language skill develop. articulation skill develop. functional academic skills in reading and math instruction in written language social skills instruction	minutes	daily or weekly	list the location where the service will be delivered; special education classroom or regular education classroom	same as IEP

PHYSICAL EDUCATION

Regular
Specially designed (must be addressed in annual goal)
□ N/A
VOCATIONAL EDUCATION
Regular
Specially designed (must be addressed in annual goal)

RELATED SERVICES

Yes (If Yes, specify/describe)

None needed to benefit from special education.

Service	Amount	Frequency	Location	Duration
Speech and Language	minutes	daily or weekly	Speech therapy office or general education classroom	Same as IEP
Transportation	to and from school	daily	alternative bus transportation	Same as IEP

SUPPLEMENTAL AIDS & SERVICES

Aids, services, and other supports provided to or on behalf of the child in regular education or other educational settings by regular education and/or special education staff.

Describe Amount Frequency Location Duration	
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list accommodations directly linked to student's disability	describe circumstances in which the accommodation is permitted	daily or weekly	specific location	same as IEP
should be same as the accommodations listed for the WKCE	describe circumstances in which the accommodation is permitted	daily or weekly	specific location	same as IEP
DO NOT put "one on one" aide, should be "consistent adult supervision"	DO NOT PUT 'as needed, 'as deemed necessary', 'when appropriate', 'at teacher's request', or 'available daily'	n / a	DO NOT USE resource room or specific school name	n / a
consistent adult supervision	unstructured settings outside the classroom	daily	unstructured settings such as the lunchroom and hallway	same as IEP
sensory breaks	when student exhibits behaviors that is aggressive, escalated and/or overstimulated for a maximum of 15 minutes per incident	when the described behavior occurs	school campus	same as IEP

Program modifications or supports for school personnel that will be provided.

Describe	Amount	Frequency	Location	Duration
list any inservice to staff regarding a student's disability for example: latex allergy, an inservice is needed for staff	minutes	daily, weekly, monthly, or annually	be specific	same as IEP
Autism awareness instruction for the student's class	20 minutes	annually	be specific	same as IEP

Student Name	Birth Date	Grade	Meeting Date
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VI. LEAST RESTRICTIVE ENVIRONMENT

1. The child will participate full time with non-disabled peers in regular education classes or, for preschoolers, in age-appropriate settings.

🖸 Yes 🗹 No

If no, explain why full-time participation with non-disabled peers is not appropriate.

Complete this section for students that are being removed from general ed setting for the delivery of special education services. If the student is participating in regular education full-time, then make sure the location in Section V is the general education classroom and the answer to #1 is YES.

_____''s functional academic skills are well below her chronological age level. Removal from the general

education setting is needed because supplementary aids and services alone cannot adequately

address _____'s needs. This removal will result in _____ having fewer opportunities to interact with her

peers and learn age appropriate curriculum. However, not providing special education and related

services in a separate setting will result in _____'s failure to learn the functional academic skills needed for graduation.

2. Will the child be able to participate in extracurricular and non-academic activities with non-disabled children?

Yes No

Comments:

If YES, the student can participate in all of these activities, you may wish to make a statement if supports are needed.

_____ will participate in nonacademic activities with individualized staff monitoring of ______ behavior

interactions with _____ peers.

3. Will the child be involved full-time in the general curriculum at his/her age/grade appropriate level (for preschoolers, in age-appropriate activities)?

🖸 Yes 🗹 No

An alternate or replacement curriculum that is aligned with alternate achievement standards.

VII. DETERMINATION AND NOTICE OF PLACEMENT

The IEP developed on and/or revised/updated on 12/21/2012 will be implemented at Beloit Memorial High School (school) in the Beloit School District.

Projected date of implementation

1/11/2013

Date parents/adult child was provided with this written notice of placement

12/21/2012

Will the child attend the school s/he would attend if non-disabled?

🖸 Yes 🗹 No

lf no, explain

If student is "open enrolled" into Beloit Schools then the student's home district must be invited to the IEP. if a student is attending here because of programming needs, state that here. The resident school district is not the LEA, the district providing the services is the LEA. The resident school district is a required member.

_____ attends Beloit Memorial High School because there is no program at Parkview School District that addresses

the needs of ____'s disabiltiy.

☑ You previously received a copy of the evaluation report, and a copy of the IEP is enclosed or attached.

Copies of the evaluation report and the IEP are enclosed or attached.

List other options considered, if any, related to the placement site (school building or school district), frequency, location, and the duration of the special education and related services, supplementary aids and services, program modifications and supports, and the place of those services. List the reason(s) rejected, and the description of any other factors relevant to the proposed action:

Participation in general education _____ class was considered, but rejected due to _____'s significant weaknesses in the areas of _____. Modifications and supports in general ed would not be sufficient to promote academic success.

Small group instruction in _____ was considered but rejected because reasonable modifications and support can be given to allow _____ to participate in the general education _____ class.

Math instruction in special education classroom was considered but rejected. Despite _____'s math difficulties, when given support and modifications _____ is able to be successful in the mainstream math curriculum. _____ participates and benefits from the classroom discussions and academic interaction with his peers.

Due to the improvement of _____'s articulaton skills, speech and language services are no longer needed 3 times a week. _____'s goals can be met with less direct service time.

Since _____ needs to demonstrate more appropriate peer relationships, the IEP team felt that excluding her from general education students for long periods of the school day would not allow her to improve and practice these skills. The current behavior intervention plan will allow her participation with her same age peers and yet sets clear expectations as to when she will be removed from the general education setting.

Parent: You and your child have protection under the procedural safeguards (rights) of special education law. The school district must provide you with a copy of your procedural safeguards once a year. Previously you received a copy of your procedural safeguard rights in a brochure about Special Education Rights for Parents and Children. If you would like another copy of this brochure, please contact the school district at the telephone number below. In addition to the district staff, you may also contact the organizations listed on the Special Education Rights for Parents and Children brochure if you have questions about your rights.

NAME AND TITLE OF DISTRICT CONTACT PERSON

Contact Name/Title Phone Email IEP Case Manager 608-361-xxxx xxxx@sdb.k12.wi.us