

**Transition Services**

Date of Student Invitation: \_\_\_\_\_ Method of Student Invitation: \_\_\_\_\_

Measurable Postsecondary Goals (Outcomes that occur after the student has left high school.)

Training or Education Goal: \_\_\_\_\_  
 Employment Goal: \_\_\_\_\_  
 Independent Living Goal: \_\_\_\_\_  
 (if applicable)

Transition Assessments List the multiple assessments used to address the student's career interests, vocational skills, employability, independent living skills, self advocacy and other preferences and interests. Assessment documentation must be included in IEP folder.

\_\_\_\_\_

TRANSITION SERVICES	SCHOOL ACTION STEPS	STUDENT ACTION STEPS	FAMILY ACTION STEPS	AGENCY ACTION STEPS
INSTRUCTION/ RELATED SERVICES				
COMMUNITY EXPERIENCES				
EMPLOYMENT AND POSTSCHOOL ADULT LIVING				
FUNCTIONAL VOCATIONAL EVALUATION AND DAILY LIVING SKILLS				

The Individual Graduation Plan (IGP)  Individual Graduation Plan for LEAP Connect  Educational/Career Plan for LEAP Connect

WHEN NEEDED, IF A PARTICIPATING AGENCY DOES NOT ATTEND, DOCUMENT OTHER ACTIONS FOR AGENCY LINKAGES.

\_\_\_\_\_

Exit Document: \_\_\_\_\_  
 Years to Graduate/Exit: \_\_\_\_\_  
 Anticipated Exit Date: \_\_\_\_\_

**General Student Information**

HOMEBASED SCHOOL: \_\_\_\_\_ OTHER SCHOOL: \_\_\_\_\_

IEP TYPE: \_\_\_\_\_ INDIVIDUAL EVALUATION / WAIVER DATE: \_\_\_\_\_

Primary / Other	Exceptionality	Detail(s)
Primary		
Other		
Other		
Other		
Other		

IEP Participants	Name	IEP Participants	Name

Include strengths; parental concerns; evaluation results; academic, developmental, and functional needs; statewide assessment results; progress or lack of expected progress in general education curriculum; and consideration of special factors: behavior, language needs for limited English proficient, instruction in and use of braille, communication needs, assistive technology devices and services, and health needs.

**Directions: Check "Yes" or "N/A" for both questions.**

Does the student have limited or no verbal skills?

Yes  N/A

Does the student have other significant impairment in the areas of receptive and/or expressive language, including but not limited to impairments in the areas of apraxia, articulation/phonology, fluency, pragmatics, or auditory processing.

Yes  N/A

- In order to effectively plan for this student's unique communication support needs and facilitate his/her academic progress,
  - In the General Student Information drop down list, the "Communication" item will self-populate.
  - The "Communication Needs of Child" section must be completed.
  - A communication plan must be developed for this student. "The Tools for Developing Communication Plans" is a resource for IEP teams to use in developing plans.
  - At least 1 communication related goal must be included in the instructional pages of the IEP.

General Information about the Student:

Strengths:

Parent Concerns:

Evaluation / Reevaluation Results:

Academic, Developmental, and Functional Needs:	
Statewide Assessment Results:	
Progress or lack of expected progress in general education curriculum:	

**General Student Information (continued)**

Consideration of Special Factors

Behavior:	
Limited English Proficient:	
Communication Needs of Child:	
Instruction in and use of Braille:	
Assistive Technology Services / Devices - Please indicate AT devices used on the Accommodations Page	
Health needs - IHP needs to be attached to IEP	

After consideration by the IEP team, there are no special factors that need to be addressed at this time

Transition Courses of Study - Attach plan to IEP:  Individual Prescription for Instruction  Individual Graduation Plan  Individual Graduation Plan for LEAP Connect Students  Educational/Career Plan for LEAP Connect Students

Educational Needs:  Academic/Cognitive  Behavior  Communication  Motor  Self-Help  Social

**Instructional Plan #** \_\_\_\_\_

EDUCATIONAL NEED AREA: \_\_\_\_\_

CONTENT AREA: \_\_\_\_\_

- ESY Instruction                       Act 833 Applied  
 Targeted for Secondary Transition

Present Level of Academic Achievement and Functional Performance

Measurable Academic / Functional Goal

Method of Measurement: \_\_\_\_\_

Additional Methods of Measurement: \_\_\_\_\_

Date Achieved: \_\_\_\_\_

**REQUIRED FOR STUDENTS PARTICIPATING IN ALTERNATE ASSESSMENT AND ACT 833**  
 MEASURABLE SHORT-TERM OBJECTIVES or BENCHMARKS (Number each objective or benchmark)

#	THE STUDENT WILL	Date Achieved
1		
2		
3		

PERSONNEL RESPONSIBLE FOR IMPLEMENTING GOAL (Check by position)

- Special Education Teacher     Parent     Speech/Language Pathologist     Regular Education Teacher     Student     Adapted Physical Educator  
 Other Related Service Providers (List) \_\_\_\_\_  
 Other (List) \_\_\_\_\_

ESY Instruction

NONE (This student does not require Accommodations)

\*English III Only

\*\*Replacecd LEAP and EOC

**Accommodations**

**CHECK THE INDIVIDUAL ACCOMMODATIONS NEEDED**

	<input type="radio"/> Access For All <input type="triangle-up"/> Accessibility Feature		<input type="checkbox"/> Accommodation <input type="diamond"/> Assistive Technology		Statewide Assessments								
					Paper				Online				
					Classroom		LEAP 2025** Grades 3-4				Grades 3-12	Grades 9-12	Grades 3-12
	Instruction	Testing	ELA	Math	Social Studies	Science	LAA 1 Science	LAA 2	LEAP Connect	ELA	Math	Social Studies	Science
<b>Presentation Accommodations</b>													
Read Aloud													
Text-to-Speech (except reading comp sections)	<input type="checkbox"/>	<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Human (except reading comp sections)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kurzweil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
Recorded voice file	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
<b>Modify Test/Assignments</b>													
Modified tests	<input type="checkbox"/>	<input type="checkbox"/>											
Modify assignments as needed	<input type="checkbox"/>	<input type="checkbox"/>											
Shorten assignments	<input type="checkbox"/>	<input type="checkbox"/>											
Limit amount of work required or length of tests	<input type="checkbox"/>	<input type="checkbox"/>											
Modify/repeat/model directions	<input type="checkbox"/>	<input type="checkbox"/>											
Alter format of materials on page (type/highlight/spacing)	<input type="checkbox"/>	<input type="checkbox"/>											
Limited multiple choice/Reduce answer choices	<input type="checkbox"/>	<input type="checkbox"/>											
Provide Word bank/Word assistance	<input type="checkbox"/>	<input type="checkbox"/>											
Multiple choice spelling tests, shortened spelling list	<input type="checkbox"/>	<input type="checkbox"/>											

	<input type="checkbox"/> Access For All <input type="checkbox"/> Accessibility Feature		<input type="checkbox"/> Accommodation <input type="checkbox"/> Assistive Technology		Statewide Assessments								
	Classroom		Paper				Online						
	LEAP 2025** Grades 3-4		Grades 3-12	Grades 9-12	Grades 3-12	LEAP 2025** Grades 3-12							
	Instruction	Testing	ELA	Math	Social Studies	Science	LAA 1 Science	LAA 2	LEAP Connect	ELA	Math	Social Studies	Science
<b>Presentation Accommodations</b>													
Communication Assistance													
Communication Assistance/Task Description	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/>				
Communication Assistance Script (for interpreters and UEB read aloud)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fm system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adapted toys/games	<input type="checkbox"/>	<input type="checkbox"/>											
Computer/Word-Processor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Touch Screen Monitor	<input type="checkbox"/>	<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reading pen	<input type="checkbox"/>	<input type="checkbox"/>											
Communication assistance - related to hearing loss only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hearing Device	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interpreter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visuals	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>						
Visual schedule/Picture schedule	<input type="checkbox"/>	<input type="checkbox"/>											
Audio Amplification System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Other Presentation Accommodations</b>													
Answer Masking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Administration- Directions Clarified by test administrator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Masking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Headphones or Noise Buffers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highlight Tool/Highlighter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Magnification/Enlargement Device	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pop-up Glossary													
Redirect Student to the Test		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
UEB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tactile Graphics			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
Utilize graphic/pictorial mode materials (e.g. tactile graphics)	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>						

<input type="radio"/> Access For All <input type="triangle-up"/> Accessibility Feature	<input type="checkbox"/> Accommodation <input type="diamond"/> Assistive Technology	<b>Statewide Assessments</b>												
		<b>Paper</b>						<b>Online</b>						
		<b>Classroom</b>		<b>LEAP 2025** Grades 3-4</b>				<b>Grades 3-12</b>	<b>Grades 9-12</b>	<b>Grades 3-12</b>	<b>LEAP 2025** Grades 3-12</b>			
		<b>Instruction</b>	<b>Testing</b>	<b>ELA</b>	<b>Math</b>	<b>Social Studies</b>	<b>Science</b>	<b>LAA 1 Science</b>	<b>LAA 2</b>	<b>LEAP Connect</b>	<b>ELA</b>	<b>Math</b>	<b>Social Studies</b>	<b>Science</b>

<b>Presentation Accommodations</b>														
Large Print	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change background font and colors	<input type="checkbox"/>	<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Color reading filters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Color code material	<input type="checkbox"/>	<input type="checkbox"/>												
Provide study outlines/guides	<input type="checkbox"/>	<input type="checkbox"/>												
Provide assistance/cues/prompts for transitions between activities	<input type="checkbox"/>	<input type="checkbox"/>												
Task analysis	<input type="checkbox"/>	<input type="checkbox"/>												
Use multi-sensory modes /tools to reinforce instruction	<input type="checkbox"/>	<input type="checkbox"/>												
Use text/workbooks/worksheets at modified reading level	<input type="checkbox"/>	<input type="checkbox"/>												
Provide daily assignment list	<input type="checkbox"/>	<input type="checkbox"/>												
Provide homework lists	<input type="checkbox"/>	<input type="checkbox"/>												
Preview test procedures		<input type="checkbox"/>												
Simplify test wording		<input type="checkbox"/>												
Utilize audio/recorded texts	<input type="checkbox"/>	<input type="checkbox"/>												
Utilize digital formats	<input type="checkbox"/>	<input type="checkbox"/>												
Digital Recorders	<input type="checkbox"/>	<input type="checkbox"/>												
E-reader	<input type="checkbox"/>	<input type="checkbox"/>												

Other (Classroom only - NOT for state assessments)	
Unique (Requires additional documentation and LDOE approval for use on state assessments)	

	Classroom		Grades 3-4				Grades 3-12	Grades 9-12	Grades 3-12	LEAP 2025 Grades 3-12				
	Instruction	Testing	ELA	Math	Social Studies	Science	LAA1 Science	LAA 2	LEAP Connect	ELA	Math	Social Studies	Science	
	Statewide Assessments													
Response Accommodations														
Communication Assistance														
Communication board/system	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Functional communication book	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
PECS	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Scribing/Utilize oral responses to assignments/tests (answers recorded)	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Speech-to-Text	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Voice output device	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Voice recognition software	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							
Word Processors	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adaptive Keyboard	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Switch Interface	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>								<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Headmouse	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>								<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Adaptive Joystick	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>								<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Trackball Mouse	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>								<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Communication Device	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Listening device	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Whisper phone	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>												
Computation Devices (Except on specific fluency items)														
Calculators	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>			
Timers	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Manipulatives/Abacas	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>			
Multiplication Chart/Hundreds Chart/Number Line	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>			
Other Response Accommodations														
Braille Note-taker	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Writing Tools	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Slant Board	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>



	Classroom		Grades 3-4				Grades 3-12	Grades 9-12	Grades 3-12	LEAP 2025 Grades 3-12			
	Instruction	Testing	ELA	Math	Social Studies	Science	LAA1 Science	LAA 2	LEAP Connect	ELA	Math	Social Studies	Science
	Statewide Assessments												
Response Accommodations													
NotePad/Blank Paper	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Eliminate Answer Choices										<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Flag Items for Review										<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Blank Paper/Adapted Paper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Copy of notes (teacher notes, class notes)	<input type="checkbox"/>												
Word bank, reduced answer choices on multiple choice tests	<input type="checkbox"/>	<input type="checkbox"/>											
Word prediction on the ELA/Literacy Performance-based Assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Planners/Organizers/Graphic organizers	<input type="checkbox"/>	<input type="checkbox"/>											
Adapted grips/utensils/pencils/drawing tools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eye gaze communication system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Answers Recorded	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transferred Answers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide product options for students to obtain information and demonstrate knowledge through use of: alternative projects/ interviews/ oral reports	<input type="checkbox"/>	<input type="checkbox"/>											
Student writes on test		<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>					
Objective tests		<input type="checkbox"/>											
Rephrase test questions	<input type="checkbox"/>	<input type="checkbox"/>											
Test study guide	<input type="checkbox"/>	<input type="checkbox"/>											
Shortened tasks	<input type="checkbox"/>	<input type="checkbox"/>											
Extra credit options	<input type="checkbox"/>	<input type="checkbox"/>											
Hands-on-projects	<input type="checkbox"/>	<input type="checkbox"/>											
Dictionary/Thesaurus/Spell Checker	<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (Classroom only - NOT for state assessments)													

Unique (Requires additional documentation and LDOE approval for use on state assessments)

<input type="radio"/> Access For All <input type="checkbox"/> Accommodation <input type="checkbox"/> Accessibility Feature <input type="checkbox"/> Assistive Technology	<b>Statewide Assessments</b>												
	<b>Classroom</b>		<b>Paper</b>				<b>Online</b>						
			<b>Grades 3-4</b>				<b>Grades 3-12</b>	<b>Grades 9-12</b>	<b>Grades 3-12</b>	<b>LEAP 2025 Grades 3-12</b>			
	<b>Instruction</b>	<b>Testing</b>	<b>ELA</b>	<b>Math</b>	<b>Social Studies</b>	<b>Science</b>	<b>LAA1 Science</b>	<b>LAA 2</b>	<b>LEAP Connect</b>	<b>ELA</b>	<b>Math</b>	<b>Social Studies</b>	<b>Science</b>

**Timing & Scheduling**

Extended Time/Increase the amount of time allowed to complete assignments and tests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pace long term projects	<input type="checkbox"/>	<input type="checkbox"/>												
Extra time-written work	<input type="checkbox"/>	<input type="checkbox"/>												
Prior notice of tests	<input type="checkbox"/>	<input type="checkbox"/>												
Modify student's schedule	<input type="checkbox"/>	<input type="checkbox"/>												
Allow breaks during work periods, between tasks, during testing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide assistance/cues for transition between classes, lockers, and home	<input type="checkbox"/>	<input type="checkbox"/>												
Content Mastery Center	<input type="checkbox"/>	<input type="checkbox"/>												

Other (Classroom only - NOT for state assessments)

Unique (Requires additional documentation and LDOE approval for use on state assessments)

<input type="radio"/> Access For All <input type="triangle-up"/> Accessibility Feature		<input type="checkbox"/> Accommodation <input type="diamond"/> Assistive Technology		Statewide Assessments										
				Paper					Online					
				Classroom		Grades 3-4				Grades 3-12	Grades 9-12	Grades 3-12	LEAP 2025 Grades3-12	
		Instruction	Testing	ELA	Math	Social Studies	Science	LAA1 Science	LAA 2	LEAP Connect	ELA	Math	Social Studies	Science
<b>Setting Considerations</b>														
Individual testing			<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>		<input type="checkbox"/> <input type="triangle-up"/>		<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>
Small group testing			<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>		<input type="checkbox"/> <input type="triangle-up"/>		<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>
Provide individualized instruction		<input type="checkbox"/> <input type="checkbox"/>												
Provide small group instruction		<input type="checkbox"/> <input type="checkbox"/>												
Assign peer tutors/work buddies/notetakers		<input type="checkbox"/> <input type="checkbox"/>												
Provide desktop list of tasks		<input type="checkbox"/> <input type="checkbox"/>												
Alter physical room environment		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Separate or Alternate Location		<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>		<input type="checkbox"/> <input type="triangle-up"/>		<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>
Specified Area or Seating		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>	<input type="checkbox"/> <input type="triangle-up"/>
Other (Classroom only - NOT for state assessments)														
Unique (Requires additional documentation and LDOE approval for use on state assessments)														

**Program / Services**

**LOUISIANA EDUCATIONAL ASSESSMENT PROGRAM**

Regular Assessments

Alternate Assessment  LEAP Connect -- For a 12th grade student who is eligible to participate in LEAP Connect, continue selecting this option even though the student is not required to test during the 12th grade year.

LAA 2 -- The LAA 2 will no longer be administered in grades 4-8 starting with the 14-15 school year. IEP teams may continue to check these boxes for eligible students who have entered a high school cohort in 13-14 or before and those students will continue to have access to the LAA 2 graduation exams.

None  This option should be selected only under one of the following two conditions:  
- Prekindergarten through second grade students  
- Graduating seniors who have passed the required components of the exit examination

The ACT assessment requires separate documentation and approval for local, state, and ACT approved accommodations as outlined in the Procedures for Requesting ACT Test Accommodations.

**Act 833 Eligibility**

No  Yes  
 Promotion  Graduation

**Special Transportation**

No  Yes - Describe

**REGULAR CLASSES**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Reading          | <input type="checkbox"/> Spelling              | <input type="checkbox"/> Physical Education |
| <input type="checkbox"/> Science          | <input type="checkbox"/> Writing               | <input type="checkbox"/> Social Studies     |
| <input type="checkbox"/> Math             | <input type="checkbox"/> Art/Music             | <input type="checkbox"/> Foreign Language   |
| <input type="checkbox"/> Vocational       | <input type="checkbox"/> English/Language Arts |   |
| <input type="checkbox"/> Electives (list) |  |   |

**If not in regular classes, explain**

**ACTIVITIES WITH NON-DISABLED PEERS (Check all activities with non-disabled peers)**

- |  |                                |                                      |
|--|--------------------------------|--------------------------------------|
| <input type="checkbox"/> Assemblies                  | <input type="checkbox"/> Buses | <input type="checkbox"/> Field Trips |
| <input type="checkbox"/> Library                     | <input type="checkbox"/> Meals | <input type="checkbox"/> Recess      |
| <input type="checkbox"/> Extracurricular/Nonacademic |                                |                                      |
| <input type="checkbox"/> Other                       |                                |                                      |

If not participating in activities with non-disabled peers, explain

**EXTENDED SCHOOL YEAR SERVICES (ESYS)**

**Criteria For Consideration:**

- Regression / Recoupment
- Critical Point of Instruction 1
- Critical Point of Instruction 2

**Special Circumstances**

- Employment
- Transition to Part B (Preschool)
- Transition to Post School Outcomes
- Excessive Absences
- Extenuating Circumstances

**Supports Needed for School Personnel (Describe)**

**Services / Placement**

STUDENTS TOTAL INSTRUCTIONAL DAY (Minutes): \_\_\_\_\_ Student attends school  days per week.

Service	Date to Begin	Duration	Individual / Group	Regular Class		Community		Special Class	
				Minutes	Sessions	Minutes	Sessions	Minutes	Sessions
<b>Total Number of Minutes in Special Setting per Week:</b>									_____

Service	Date to Begin	Frequency	Individual / Group	Regular Class		Community		Special Class	
				Minutes	Sessions	Minutes	Sessions	Minutes	Sessions
<b>Total Number of Minutes in Special Setting per Week:</b>									_____

**PLACEMENT/SERVICE DETERMINATION CHECKLIST**

This list is not a continuum of least restrictive environment for the deaf or hard of hearing students.

- Inside the regular class 80% or more of the day
- Inside the regular class less than 40% of the day
- Inside regular class between 40%-79% of the day
- Separate School
- Residential Facility
- Hospital / Homebound
- Correctional Facilities

Document the educational benefit for the placement **if not inside regular class 80% or more of the day.**

COMMENTS

**Placement**

**SITE DETERMINATION**

NOTE: The local education agency may choose to complete this section at this time. If the following assurances cannot be provided at this time, then a Site Determination Form assuring that the site selected is in accordance with least restrictive environment rules must be forwarded to the parent within ten (10) calendar days.

**ASSURANCES:**

1. This school is the one the student would attend if he or she were not identified exceptional.
2. This school and class are chronologically age appropriate for the student.
3. The school selected is accessible to the student for all school activities.
4. The classroom is comparable to and integrated with regular classes.

Site: \_\_\_\_\_

**PROGRESS REPORT**

The LEA assures that the program and services described in the IEP will be provided. The schedule for describing the progress towards achievement of the academic and functional annual goals will be every  weeks, current with the issuance of report cards.

**ASSESSMENT IMPLICATIONS (Check one)**

- I understand my child will participate in LEAP Alternate Assessment, LEAP Connect. Testing in LEAP Connect means my child may earn a high school diploma if my child meets the requirements for the alternate pathway to a diploma for students assessed on LEAP Connect. If my child does not meet those requirements, I understand my child should earn a Certificate of Achievement. The implications of participating in LEAP Connect have been explained to me and will be reviewed annually.
- I understand my child (I) will participate in LEAP Alternate Assessment, Level 2 (LAA 2), and by meeting all graduation requirements, my child (I) will receive a high school diploma. However, if my child (I am) is not pursuing a high school diploma, my child (I) may pursue Louisiana's General Education Development (GED) diploma with possibly an Industry Based Certificate, or a State Approved Skills Certificate. If during the exit year all requirements for earning a high school diploma, GED, or State Approved Skills Certificate have not been met, then my child (I) may be eligible to exit high school with a Certificate of Achievement. I understand that this certificate limits my child's (my) choices of post-secondary education and careers, including military services. The implications of participating in LAA 2 have been explained to me and will be reviewed annually.

The LAA 2 will no longer be administered in grades 4-8 starting with the 14-15 school year. Students who have entered a high school cohort in 13-14 will continue to have access to the LAA 2 high school tests for graduation purposes. State law has recently changed regarding graduation options for students with disabilities and the IEP form has been updated to accommodate these new options.

**AGE OF MAJORITY**

- Beginning at least one year before reaching the age of majority, I (my child) have been informed that my (his or her) rights under the act will transfer to me (my child) on my (his or her) reaching the age of majority

**PARENT/STUDENT\* CONSENT FOR SERVICES**

- I have received a copy of the Louisiana Educational Rights of Exceptional Children with disabilities, and was given an opportunity for an oral explanation. I have received a copy of my (child's) evaluation and documentation of determination of eligibility.
- I give consent for the initial provision of special education and related services.
- I understand that if I disagree with any services or the placement described on the IEP, I can pursue a solution to my complaint through the state's written dispute resolution options.
- Parent / Student did not attend the **Review** IEP Team meeting.

**SUPPORTING DOCUMENTATION**

Have the following documents been included in the IEP folder?

- LEAP Alternate Assessment Participation Criteria, Level 2 (LAA 2)  Yes  N/A
- Individual Healthcare Plan  Yes  N/A
- Individual Prescription for Instruction (get copy from advisor/school guidance counselor)  Yes  N/A
- Individual Graduation Plan (current IGP has been uploaded in the attachments feature)  Yes  N/A
- Parental Consent form for Connections for 8th graders (get signed copy from SBLC team)  Yes  N/A
- Summary of Performance Criteria Form  Yes  N/A
- Parental Consent form for Medicaid Billing  Yes  N/A
- Individual Graduation Plan for LEAP Connect Students  Yes  N/A
- Educational / Career Plan for LEAP Connect Students  Yes  N/A
- Behavior Intervention Plan  Yes  N/A
- Communication Plan  Yes  N/A
- Assistive Technology Consideration Checklist  Yes  N/A
- Assessment Approval Form  Yes  N/A

**SIGN:** \_\_\_\_\_

**PARENT/GUARDIAN/SURROGATE PARENT/COMPETENT MAJOR/STUDENT**

**Date**

**PRINT:**

\*Signature is only required for the **initial** provision of services.  
 \* Parents should initial and date in the IEP Participant box on the GSI page if they attended an IEP team meeting where the IEP was amended.

**SIGN:** \_\_\_\_\_

**OFFICIALLY DESIGNATED REPRESENTATIVE OF LOCAL EDUCATION AGENCY**

**Date**

**PRINT:**

**Goal Summary**

Educational Need Area	Goal Name	Content Area	Course	ESY Instruction	Act 833 Applied	Act 833 Met	Description
						<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

Educational Need Area	Goal Name	Content Area	Course	ESY Instruction	Act 833 Applied	Act 833 Met	Description
						<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

Educational Need Area	Goal Name	Content Area	Course	ESY Instruction	Act 833 Applied	Act 833 Met	Description
						<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

Educational Need Area	Goal Name	Content Area	Course	ESY Instruction	Act 833 Applied	Act 833 Met	Description
						<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	