

Individualized Education Program

Student name **Jason Patterson** Student # **49** DOB **2/6/2002**
Serving school **Alder Elementary** IEP Mgr. _____ Grade **1** Age **6 y 9 m**
Home school _____ Prepared by **John Newhoff**
Eligibility Category _____ Ethnicity _____ Language _____
Date of IEP Mtg: _____ Next IEP Review _____ Last Eval _____ Next Eval **?**
Parent Name(s) _____

Address: **4690 Edsel Road, City Of Commerce, CA, 90040** Phone: **818-404-0831**

Surrogate Parent Surrogate Name _____ Language at Home: _____
Parent Interpreter Needed

POINTS TO CONSIDER: IEP team membership is described in WAC 392-172A-03095.	School district must give prior written notice when proposing or refusing to initiate or change the identification, evaluation, educational placement, or provision of FAPE.	A required team member may be excused from attending an IEP meeting with the agreement/ consent of the parent (s) and the district, depending upon whether that member's area is being discussed or modified at the meeting. See WAC 392-172A-03095 (5) for additional related requirements.
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Participants in IEP Meeting: *(Signatures are used to document participation in the meeting and do not constitute agreement or disagreement):*

_____	_____
<i>Parent/Guardian</i>	<i>District Representative</i>
_____	_____
<i>Parent/Guardian</i>	<i>General Education Teacher</i>
_____	_____
<i>Student</i>	<i>Name/Title</i>
_____	_____
<i>Special Education Teacher</i>	<i>Name/Title</i>
_____	_____
<i>Name/Title</i>	<i>Name/Title</i>

Other individuals who should be informed of his/her responsibilities in implementing the IEP (e.g., bus driver, librarian):

**REQUIRED FOR INITIAL PROVISION OF SERVICES ONLY:
WRITTEN PARENTAL CONSENT FOR SERVICES**

My rights and those of my child regarding procedural safeguards have been fully explained. I understand that my child requires special education and before initial provision of special education and related services may occur, I must give consent for services. I understand when I give consent, it is voluntary, and that while it can be revoked, revocation is not retroactive. This means that the revocation does not undo services that occurred after my consent was given and before my consent was revoked. If I refuse consent, I understand that the district may not request mediation to obtain my consent or ask for a due process hearing to override my consent. If I do not give consent for initial services, the district may not provide services until I provide written consent. I understand that if I refuse consent, the district will not be considered to be in violation of the requirement to make FAPE available to my child.

I give consent for my child to receive special education services.

_____ Date

Parent Signature

PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

PURPOSE: The IEP is designed to clearly communicate to the parents, the student, and providers the type and amount of special education and any necessary related services or supports that will be made available to the student. The most recent evaluation report is used to develop the IEP. The IEP is individualized to reflect the unique needs of the student and how these needs will be addressed to permit the student to be included and progress in the general education curriculum.

Present levels of academic achievement and functional performance

Effect of the disability on involvement/progress in general education curriculum/appropriate activities *(see Points to Consider):*

POINTS THAT MUST BE CONSIDERED IN DEVELOPING THE IEP (refer to WAC 392-172A-03110):

- Results of the most current evaluation, and the academic, developmental, and functional needs of the student.
- Positive behavioral supports and interventions, if the student’s behavior impedes the student’s learning or that of others.
- Language needs of students with limited English proficiency as they relate to the child’s IEP.
- Supports for blind/visually impaired students, include Braille instruction.
- Communication needs of the student, including the needs for deaf and hard of hearing students.
- Assistive technology devices and services.
- Supplementary aids/services, program modifications, and support for school personnel.